

Nursing Retention Practices-Creating a Healthy Work Environment

Management of Practice Committee Summary

Summary Overview:

- In order to effectively address the nursing shortage, from the recruitment and retention perspective, it takes several approaches and initiatives in order to create excellence in establishing a healthy work environment.
- Upon reviewing numerous studies and published practices, key themes emerged in establishing a healthy nursing workforce environment.
- In the 2003 summary of the MHA/MONE Survey of Hospital Nurse Staffing Issues in Massachusetts, RN retention management practices identified most often were “mentor/preceptor programs for new hires, increased salaries, special recognition ceremonies and training programs for preceptors.” “Hospitals rated mentor/preceptor programs for new hires as the most effective practice, followed by self-scheduling for nursing units, increased salaries, implementation of shared governance philosophy and permanent shift assignments.”
- The May 2003 *Healthy Work Environments: Striving for Excellence*, Volume II. Report prepared by McManis and Monsalve Associates in Partnership with AONE identified six critical success factors for establishing nursing work environment excellence. These were:
 - Leadership Development & Effectiveness
 - Empowered Collaborative Decision-making
 - Work Design & Service Delivery Innovation
 - Values-Driven Culture
 - Recognition & Reward Systems
 - Professional Growth & Accountability
- Many of these success factors are key components for hospitals to achieve Magnet Status. (Refer to Attachment A from the *Healthy Work Environments Report* for a summary of organizational elements.) One of the tactical recommendations contained in the AHA Commission on Workforce for Hospitals and Health Systems report, *In Our Hands*, April 2002, calls upon hospitals to “embrace the characteristics of the Magnet Hospital Program and incorporate them in work innovations.” Massachusetts General Hospital and Winchester Hospital are the current hospitals in Massachusetts that have been awarded Magnet Status.
- A common thread emphasized in the implementation of such success factors is the critical need for staff participation in the decision making process and the impact on patient care outcomes and evidenced based practice.

Current Trends:

This next section will provide an overview of current trends and practices on creating a healthy work environment among Massachusetts's hospitals. Any statistics noted were drawn from the 2003 summary of the MHA/MONE Survey of Hospital Nurse Staffing Issues in Massachusetts. Of note, 65.7% of the Massachusetts hospitals reported having created a retention strategy/plan and 26.9% plan on implementing this practice. Some of the identified critical success factors were not formally addressed in the MHA/MONE Survey so only anecdotal information was provided. Also in this section, a few additional national examples were also extracted from the AONE *Healthy Work Environments: Striving for Excellence*, Volume II.

Professional Growth & Accountability

Massachusetts Examples:

- When rating the average effectiveness of RN Retention Management Practices in Massachusetts, adopting a mentoring/precepting program for new RN hires was ranked the highest. 89.6% of the Massachusetts hospitals reported having such a program in place and 4.5% plan on implementing this practice.
- 79% of the Massachusetts hospitals reported having training programs for preceptors in place and 10.4% plan on implementing this practice.
- 45% of the Massachusetts hospitals reported having career growth opportunities/clinical ladder/career advancement program in place and 32.8% plan on implementing this practice.
- Several of the MONE membership reported trends of offering on-site as well as online CE offerings. Also, onsite career development as well as advancement programs are increasingly emerging, such as a C.N.A-to-RN program at Winchester Hospital, an on-site A.D.N-to-BSN program at Spaulding Rehab and an on-site B.S.N-to-M.S.N. program at Boston Medical Center.
- Numerous partnerships with academic institutions are being established to enhance resources for nursing education. For example, Franklin Medical Center and Amherst Extended Care has a partnership with Greenfield Community College to promote entry into nursing and retention of nursing students in programs.
- Formal centers for Clinical and Professional Development, such as the one at Massachusetts General Hospital, are beginning to re-emerge. In addition, clinical research programs are being further strengthened through the establishment of formal nursing research centers, such as the Yvonne L. Munn Center for Nursing Research at MGH, or through formal arrangements with PhD faculty from academic institutions, such as a funded position at Boston Medical Center.
- Programs for specialty areas such as on-site critical care programs and support for specialty certification was also frequently cited by MONE membership.

National Examples:

- Baptist Hospital of Miami offers staff nurse full tuition scholarships for their next degree with a one-year work commitment.
- Baptist Health System also established a Center for Nursing Excellence that provides philanthropic support for nursing scholarship programs.

Recognition & Reward Systems

Massachusetts Examples:

- 85% of the hospitals reported having implemented special recognition programs with another 3% planning to implement this as a retention strategy.
- Trends cited by MONE membership were monetary rewards for goals and professional accomplishments within clinical ladder programs.
- Budget for “just in time” awards, such as the CARE Cash program at Newton Wellesley Hospital and Spot Awards at Winchester Hospital, were also reported by membership.
- Several hospitals reported having special recognition ceremonies such as “Partners in Excellence” at MGH, Newton Wellesley Hospital’s-CAREfirst Program, which is a monthly recognition program nominated by NWH colleagues, patients or visitors for actions that reflect CAREfirst attributes and the “Gold Standard Award” at Kindred Hospital-Boston North Shore. Baystate Health System also has a reward and recognition program called Baystate's Best, which is a note card process submitted for approval. Those recognized become eligible for cash awards and each dept displays their collective note cards proudly.
- Recognition letters from patients, staff and management are another common trend for acknowledging staff’s efforts.

National Examples:

- St. Mary’s Medical Center in Wisconsin has a peer recognition program that encourages all employees to give “Kudos” appreciation cards to individuals they feel are contributing to a quality workplace.
- TriHealth in Cincinnati has a Nursing Recognition and Reward Committee to spearhead the design and implementation of monthly staff appreciation activities. Individual units are given “tool kits” of staff recognition rewards, which are used at each unit’s discretion.

Leadership Development & Effectiveness

Massachusetts Examples:

- 73% of the Massachusetts hospitals reported increased training and accountability of nurse managers with another 10% planning to implement such training.
- MONE Leadership Conference is an annual event established for the membership to send emerging leaders for leadership development.
- Specific local examples include:
 - Newton Wellesley Hospital-Developed a Leadership Institute that encompasses 2 full day sessions each quarter that focuses on their 5 organizational pillars (Service, People, Quality/Safety, Finance and Growth). Also has on-site Masters Program in Health Care Administration through Cambridge College.
 - Massachusetts General Hospital established a Nurse Manager Development Series and also supports new nurse managers in attending the Johns Hopkins Nursing Leadership Academy.
 - Southcoast Hospital Group-Advisory Board Leadership Series with 6 Fellows involved in a two-year program. Baystate Health System has also had a two-year program with the Nurse Executive Center of the Advisory Board Company, that all nurse leaders went through including didactic learning and 360-feedback.
 - Winchester Hospital-All nurse managers and directors become certified as nursing administrators.

National Examples:

- Johns Hopkins Nursing Leadership Academy
- Nursing Executive Center (Advisory Board Company) Nursing Leadership Series
- Univ. of Pennsylvania Nurse Management Fellowship Program
- Inova Fairfax Hospital, VA-has an internal management leadership academy, the “Lead or Shape” Program.

Empowered Collaborative Decision-making

Massachusetts Examples:

- 77.6% of the Massachusetts hospitals reported having implemented staff participation in decision making with another 9% planning on broadening the scope of staff participation.
- 46% of the Massachusetts hospitals reported having implemented a shared governance philosophy with another 18% planning to implement a more formal shared governance structure.
- Specific local examples include:
 - Massachusetts General Hospital-Collaborative Governance Model that encompasses values, philosophy, standards of practice, collaborative decision-making, professional development, patient care delivery models, privileges/credentialing/peer review, research and Descriptive Care theory models
 - Winchester Hospital-Developed a hospital council infrastructure with staff nurse representation on every council. Offers Shared Decision-Making conferences.

National Examples:

- In the *Healthy Work Environments* report, detailed descriptions of the processes that several hospitals went through to establish a shared governance philosophy was summarized. These ranged from multi-disciplinary care teams being established at St. Luke’s Regional Medical Center in Idaho to undertake a major initiative to redesign patient care to Jewish Hospital in Kentucky that implement nursing-led multidisciplinary work groups to ensure staff input in designing new applications of information technology.

Work Design and Service Delivery Innovations

Massachusetts Examples:

- Again, the types of work design and service delivery innovations implemented by Massachusetts’s healthcare institutions were not specifically asked in the MHA/MONE annual survey.
- The MONE membership identified general trends toward use of enhanced technology such as computerized documentation, including POE and an electronic M.A.R., nurse call/communication systems and bar coding technology that would enhance patient safety initiatives.
- Other specific examples from MONE membership were:
 - Massachusetts General Hospital-OR of the Future
 - Kindred Hospital Boston North Shore established a Modular Nursing Model with RN, LPN and C.N.A’s.

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- Fairlawn Rehabilitation Hospital also reported implementing a RN/PCA partnership model
- Winchester Hospital established a matrix structure with a designated V.P. and MD assigned as liaisons to specific units

National Examples:

- York Hospital, PA-Designed an Express Admissions Unit within the ED, which handles the initial admitting process so that patients arrive on the nursing units as transfer patients. Also designed “triad” leadership teams consisting of a physician, nurse and an administrator for each major service line.
- Hartford Hospital, CT-Designed a Care Coordination Team, which consists of more than 30 staff who specialize in admission assessments, pre-hospitalization preparation, care coordination and discharge planning.
- Sinai Hospital of Baltimore-Did a re-engineering and redesign of the Nurse Manager Roles resulting in each medical/surgical unit having one manager and 3 or 4 clinical leaders whose responsibilities entail direct patient care, staff education and assisting staff hiring and performance evaluation.

Values-Driven Culture

Massachusetts/National Examples:

- How Massachusetts’s healthcare institutions establish, share and communicate organizational values was not specifically asked in the MHA/MONE annual survey.
- *The Healthy Work Environments* report emphasized, “Meaningful work is related to having individuals understand and share organizational values and find personal fulfillment in contributing to organizational purposes and goals embraced as their own”. (Pg 7). However, the report did not elaborate on any best practices from the national hospitals that participated in the survey.
- Specific examples shared by MONE members are:
 - Newton Wellesley Hospital established and educated staff on the “5 Organizational Pillars”
 - Southcoast Hospital Group-360 Feedback process integrated into the annual evaluation process
 - Mercy Medical Center began the implementation of “Values in Practice” philosophy two years ago.
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 - Baystate Health System also has in place 5 Operating Principles; Trust, respect, collaboration, communication and integrity. Behavioral standards developed for each principle are incorporated into all leaders performance evaluation. Behavioral event interviewing techniques are used to hire the right leaders into the system who demonstrate strong track records of using these principles.

Summary & Future Considerations:

In Summary, it is increasingly evident that a nursing infrastructure must exist in organizations to support not only the operational deployment of staff but the professional environment as well. There is now unequivocal evidence that such an infrastructure makes a difference to retention, professional satisfaction and quality patient care.

As a result, we must produce a document that nurse leaders can use beyond nursing, which shows these investments are a good value proposition for the hospital. In order to accomplish this, future strategies might include:

- modifying the MHA/MONE annual survey of hospitals to also explore key strategies for work redesign and service delivery innovations.
- providing additional forums for MONE members to formally share best practices and innovations around creating a healthy work environment.
- supporting informational forums about the journey toward achieving Magnet Status.
- consolidating research data and resources for MONE members on current issues such as cost benefit analysis on nursing retention practices or the number of RN's at the bedside and patient outcomes.