Spring 4-28-2024

Evaluating Nurses' Turnover Intention and Organizational Commitment Following Stroke Unit Staffing Changes: An Evidence-based Quality Initiative

Heather Tatusko
Heather.tatusko@gmail.com

Spring 4-28-2024

Evaluating Nurses' Turnover Intention and Organizational Commitment Following Stroke Unit StaffingChanges: An Evidence-based Quality Initiative

Heather M. Tatusko Phiri

Evaluating Nurses' Turnover Intention and Organizational Commitment Following Stroke Unit Staffing Changes: An Evidence-based Quality Initiative
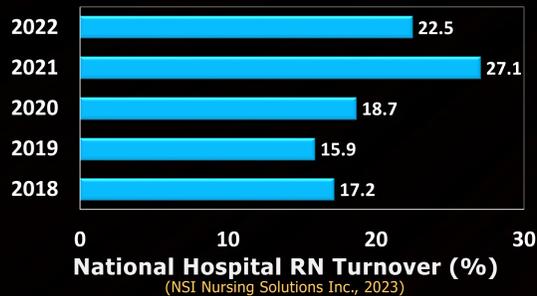
Heather Tatusko Phiri, MSN, RN—Project Team Member; Dr Chai Sribanditmongkol, PhD, RN, IBCLC, CNS, Faculty Advisor—Project Team Leader; Dr Amy Bishop, DNP, AGCNS; Dr Joy Shoemaker, DNP, APRN, FNP-BC

Introduction

- Evidence suggests nurses are overworked, overwhelmed, undervalued, and understaffed at dangerous levels throughout various inpatient hospital units across the United States (U.S.).
- Hospital nurse turnover is a significant issue that has accelerated since the COVID-19 pandemic, resulting in economic impacts and consequences for organizations, individuals, and society.

Figure 1.

Estimated U.S. Nursing Turnover Rate in Acute Care Hospitals

Year	National Hospital RN Turnover (%)
2022	22.5
2021	27.1
2020	18.7
2019	15.9
2018	17.2

National Hospital RN Turnover (%)
(NSI Nursing Solutions Inc., 2023)

- Evidence suggests that evaluating registered Nurses' Turnover intention (NTI) and Organizational Commitment (OC) can help maintain a ready and capable team of skilled RNs; however, most HCOs do not collect or analyze NTI and OC data, and just focus on nursing staffing numbers and until recently, monetary incentives to get adequate nursing numbers.
- **NTI:** nurse's intent to leave their job, HCO, or profession.
- **OC:** psychological state that (1) characterizes an employee's relationship with the organization and (2) has implications for an employee's decision to remain with the HCO.
- A significant inverse relationship exists between OC and NTI, with a Pearson's coefficient of $r = -0.51$ and $p < 0.01$ (Callado et al., 2023).
- **RNs with higher OC tend to demonstrate lower NTI and stay longer in their profession, jobs, and HCO.**

Problem

- In a 32-bed stroke unit at a large regional medical center in the Midwest, high staff RN attrition resulted in inadequate RN staffing and closed unit beds, delaying patients' access to timely care.
- To accommodate patient care and reduce the risk of future bed closures, the hospital administrators increased RN staffing, adding one RN per 12-hour shift (3.6 Full-Time Equivalent RNs).
- NTI and OC among nurses working on the stroke unit remains unknown, which may place the unit at increased risk at closing beds and access to care in the future.

Purpose & Aim

- **Purpose:** To provide new data to one stroke unit's Nursing Leadership and healthcare administrators who oversee RN staffing
- **Aim:** To evaluate the relationship between NTI and OC through a systematic record review of staff nurse questionnaire response data following a unit's recent increase in nursing staffing levels

Methods

Plan-Do-Study-Act Framework & Project Objectives

- **Plan**: Recognize an opportunity and plan the change.
  - Identified the problem of hospital staff RN turnover
  - Reviewed and appraised the evidence from the literature,
  - Obtained a reliable outcome measure tool to provide new data that supports RN leaders at one HCO after recent RN staffing changes made on a 32-bed stroke unit, experiencing high staff RN turnover.
  - A plan was developed to assess NTI/OC following the recent unit staffing change.
- **Do**: Test the change.
  - Distribute and collect the NTI/OC Questionnaire to the unit's full-time staff RNs,
- **Study**: Review findings, analyze results, and lessons learned.
  - Data collection cannot occur at this time, but the literature indicates that evaluating NTI and OC is one evidence-based strategy to implement on a small scale to predict hospital staff RN turnover and retention and decrease preventable turnover of experienced hospital staff RNs.
- **Act:** Take action. If the change worked, incorporate it and plan to sustain it. If improvements are needed, revise the plan.
  - Present project findings and recommendations to the Unit Nursing Leadership, university faculty & students.
  - NTI/OC Questionnaire may provide insight into the causes of turnover for one unit's RN leaders and serves as a starting point for a better understanding of evidence-based QI approaches that prevent turnover and improve retention of hospital staff RNs.

Sample

- **Participants:** 13 full-time RNs & 15 Travel RNs
- **Setting:** 32-bed stroke unit within a Comprehensive Stroke Center at a large, 1,059-bed, accredited teaching hospital in the Midwest.
- **Protection of Human Subjects:** project reviewed and determined **IRB APPROVED** in accordance with federal regulations and the Otterbein University INSTITUTIONAL REVIEW BOARD, **(HS # 23/24-50) 04/03/24**

Outcome Measure

- **NTI/OC Questionnaire**: consists of six essential nursing demographic items, ten (7-point Likert Scaled) NTI Questions, nine (5-point Likert Scaled) OC Questions, and two open-ended questions

Results

- **Figure 2.**
- 32-bed Stroke Unit's Nursing Workforce Demographics

KEY:
- Clinical RN Leader, $n = 6$
- Part-Time Staff RN, $n = 2$
- Full-Time Staff LPN, $n = 2$
- Full-Time Staff RN, $n = 13$
- Travel RN*, $n = 15$

14.3%
35.7%
31.0%
4.8%
4.8%

The Joint Commission
American Heart Association / American Stroke Association
CERTIFICATION
Meets standards for Comprehensive Stroke Center

Identified Barriers & Lessons Learned

- Despite obtaining IRB approval, due to the sensitive nature of the data involved and the DNP program time constraints, the data collection and sharing between the university and the HCO was not feasible at this time.
- One lesson learned would be to involve the organization's human resources department as a critical project stakeholder in the project's planning stage.

Conclusion

- Even though data collection could not occur, the literature suggests that evaluating NTI and OC is one evidence-based strategy to implement toward better understanding hospital staff RN turnover and retention; ultimately decreasing preventable turnover of experienced hospital staff RNs.
- RNs with higher OC tend to demonstrate lower NTI, and stay in their profession, jobs, and HCO longer.
- In a 32-bed stroke unit at a large regional medical center in the Midwest, high staff RN attrition resulted in inadequate RN staffing and closed unit beds, delaying patients' access to timely care.
- Despite increasing staffing by 3.6 Full-Time RNs, the degree of NTI and OC among nurses working on the stroke unit remains unknown, potentially placing the unit at increased risk at closing beds and care access in the future.
- The ideas, methods, and evidence from the literature as presented in the project proposal contends that the incorporation of NTI/OC Questionnaire may offer valuable unit-specific insights for RN leaders, helping them to better understand their staff's intentions to stay and commitment to their organization; which may ultimately help to maintain a ready and capable nursing team, and prevent avoidable nursing turnover and delayed patient access to care services.

Abstract & References