

Increasing Nursing Job Enjoyment & Patient Satisfaction on a High Acuity Medicine Unit

Virginia Commonwealth University Health System ♦ Darci Bowles MS RN RRT



Background

Our unit is part of the Virginia Commonwealth University Health System (VCUHS) which is Magnet accredited, an academic facility, a regional referral center for the state, and is the region's only Level I Trauma Center. Our Health System is located in Richmond, Virginia. 30% of our area residents live below the poverty level, and >40% of our unit's patients are functionally illiterate.

*Progressive Care Medicine Unit
*28 beds, always in demand
*9 physician teams
*RN:Patient ratio from 1:2 to 1:5
*Semi-private rooms

*Common Diagnoses: CHF, COPD, DM, ESRD, HIV/AIDS, Substance Abuse/Addiction
*Average RN age is 28
*Many Opportunities for Environmental Stress and Dissatisfaction

In 2007, our Professional Research Consultant (PRC) -surveyed patients said that our overall nursing quality was excellent 85% of the time. Our nursing turnover rate for that year was 18% and our nursing vacancy rate was 13%. Our 2007 NDNQI Nursing Satisfaction Survey results showed a T-score of 61 in the category of Job Enjoyment and a T-score of 51 in the category of Control of Work.

Contributing Factors

Recognizing that the evidence shows that low staff morale and patient satisfaction are associated with inferior patient outcomes, we sought to identify and improve the contributing factors.

Through focused discussions with our nursing staff and our patients, unit leadership identified five areas of leadership practices and behaviors that needed improvement: hiring practices, orientation process, communication of performance expectations, presence and visibility, relationships with support services.



Every day a new discovery!

Interventions

Interviewing and Hiring Practices

- Team Interviews Including Multiple Staff Members
- All Candidates Shadow for a Minimum of Four Hours
- Start Setting Performance Expectations at Time of Interview
- Select Candidates Primarily for Attitude, Interest, and Fit

Enhanced Nursing Orientation

- Using Myers-Briggs to Match Preceptors to Orientees
- Consistent, Scheduled Monitoring of Progress
- Early Identification of Concerns and Barriers
- Start to Build Conflict Resolution Skills on Day One

Clear Communication of Expectations for Advancement on Clinical Ladder

- Thorough, One-on-One Explanation of All Performance Expectations for Advancement on Clinical Ladder During Initial Orientation and With Annual Performance Evaluations
- Additional Expectation that RN Must Be Able to Function as Charge Nurse and/or Preceptor to Advance to Clinical Nurse II Level
- Overhaul of Charge Nurse Orientation with Concentration on Staff Support, Throughput, and Conflict Resolution Skills
- RN Must Attend 8-Hour Precepting Class

Consistent Unit Leadership Presence and Visibility

- Either Nurse Manager or Nurse Clinician Present on Unit for AM Shift Change Monday through Friday
- Changes in Clinical Coordinators' Scheduling to Optimize Coverage and Ensure Presence on Saturdays and Sundays
- Unit Rounding by NM Twice Daily at Minimum
- Clinical Coordinators Consistently Contributing To or Facilitating Patient Care and Throughput

Developing Relationships With Support Services

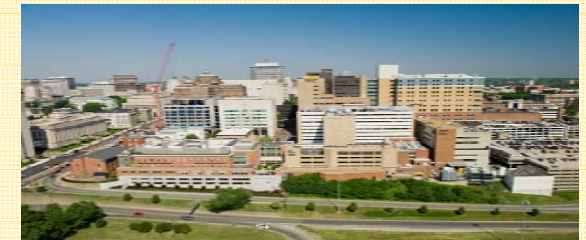
- Brief Daily "Check-In" with Environmental Services Supervisor
- Development of and Adherence to List of Mutual Responsibilities of Nursing and Support Staff
- Consistent Assignment of Core Group of Environmental Services and Dietary Staff to Unit
- Posting of Daily, Weekly, and Monthly Environmental Services Tasks
- Monthly Meetings Between Unit Leadership and Support Services Managers
- NM Assistant Assigned as Primary Liaison Between Unit and Central Supply

Outcomes

In comparison with our 2007 results, our 2009 NDNQI Nursing Satisfaction Survey results showed a T-score that had increased to 70 from 61 in the category of Job Enjoyment. Our T-score in the area of Control of Work had also increased to 59 from 51.

Our year-to-date PRC Patient Satisfaction Survey results report that our patients say that the overall quality of our nursing care has increased from 85% excellent in 2007 to 97% excellent in 2010.

Our unit's nursing turnover rate has decreased from 18% to 8%, and our nursing vacancy rate has decreased from 13% to 5% over the same time frame.



References

- Darian, D.I., O'Brien-Pallas, L.C. (2003). An evaluation of nurse sensitive outcomes for quality care. *International Nursing Perspectives*, 3(3), 109-125.
- Mark, B.A., Salyer, J., Wan, T.T.H. (2003). Professional nursing practice: Impact on organizational and patient outcomes. *Journal of Nursing Administration*, 33(4), 121-130.
- Virginia Commonwealth University Health System (2007, 2008, 2009, 2010). Nursing quality dashboard reports.
- Watters, S. (2009). Shared leadership: Taking flight. *Journal of Nursing Administration*, 39(1), 26-29.
- Yang, K., Huay, C. (2005). New graduate RN work satisfaction after completing an interactive nurse residency.

Acknowledgements

Special thanks to the patients and staff of VCU Health System, Bonnie Brunel MS RN, Jeannette Cain, MS RN, and Lauren Goodloe, PhD RN.