

Nursing Satisfaction and Implementation of Shared Governance on a Neonatal Unit



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Acknowledgments



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Statement of the problem



- Job satisfaction in staff nurses should be of great concern to any health care organization. Nurses hold the majority of positions in most health care settings and replacement of licensed personnel is costly and time consuming (Kanai-Pak, Aiken, Sloane, & Poghosyan, 2008).



Statement of purpose



- The purpose of this study is to examine the relationship between implementation of shared governance at the unit level and registered nurse satisfaction on a neonatal intensive care unit.



Shared Governance



- Shared governance is a managerial innovation that legitimizes nurses' control over practice, while extending their influence into administrative areas previously controlled only by managers (Hess, 2004).



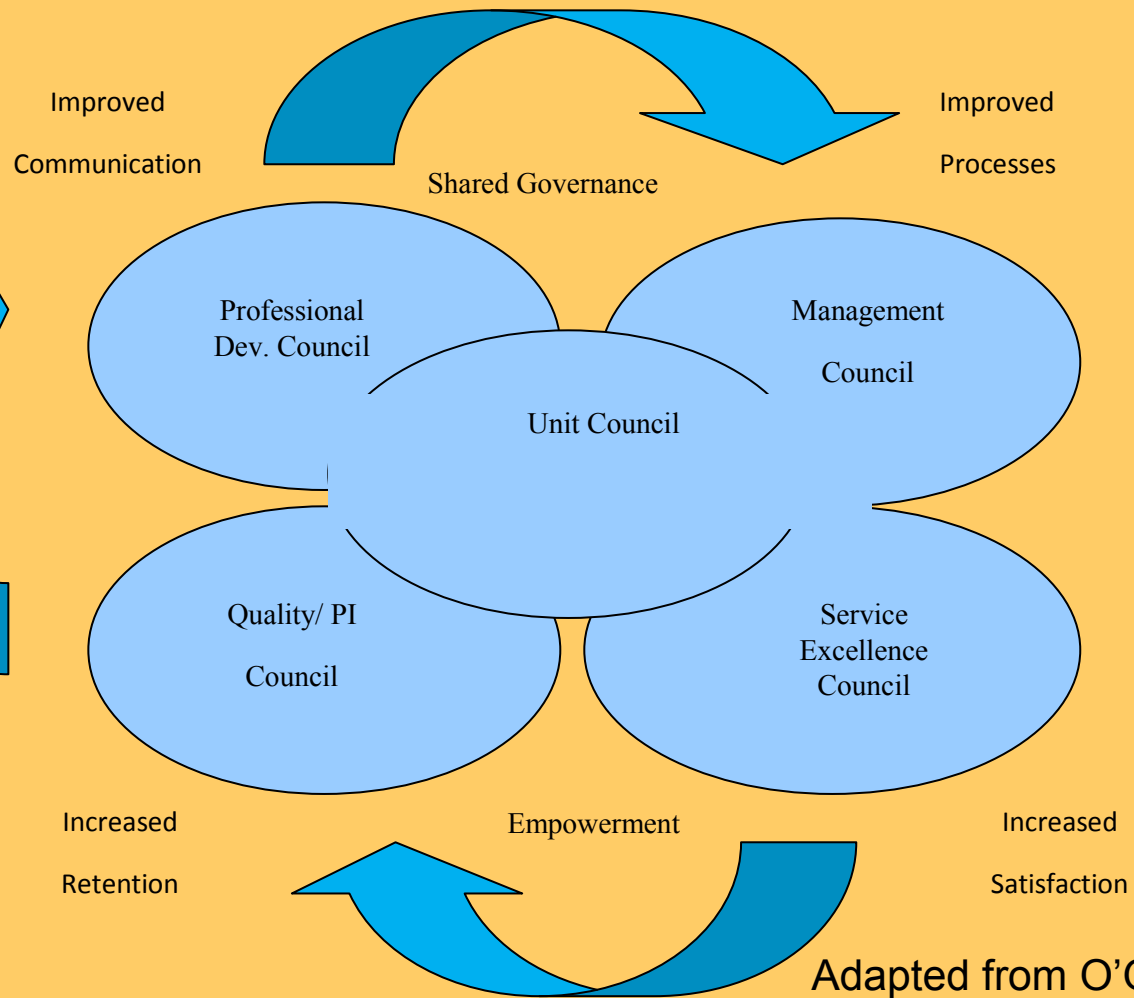
Theoretical Framework



- The Councilor Model of Shared Governance (O'Grady, 1987).
 - Uses a council format to structure staff and management governance processes.
 - A majority of practicing staff nurses are members of the councils with a management representative acting as an advisor.



NICU Councilor Model 2008



Adapted from O'Grady's Councilor Model

Council implementation



- ◎ By-laws for the councils were created in this study to provide structure for the model.
- Beginning in September 2008, the NICU councils were brought up one at a time.
- The first council was the Management Council.
- The second council was the Unit Council, followed by the Professional Development Council, Quality Council / Performance Improvement (PI), and lastly the Service Excellence Council.
- By February of 2009, all councils were functioning efficiently.



The Management Council



- Membership is comprised of unit manager, charge nurses, educator, and the Unit Council chair.
- Provides leadership and direction to all councils.
- Delegate initiatives to councils as appropriate.
- Responsible for reviewing annual reports submitted by each nursing council and provide feedback and direction.
- Provides final approval for all recommendations from councils not budget neutral.





Management Council accomplishments



- Provided structure for the other councils.
- Accomplished goal of bringing the decision-making to the bedside and allowed the nurses to control their practice.



The Unit Council



- Membership consists of all unit based council chairpersons, three staff RNs, ancillary staff member, and a charge nurse.
- Monitors and oversees all other unit based councils and endorses plans.
- Votes on all initiatives from other councils not budget neutral and then presents proposal to management council.
- Votes on any amendments to by-laws of councils and sends approved amendment to management council.

Unit Council accomplishments



- Voted on a new product for oral care to decrease ventilator associated pneumonia (VAP).
- There have been 0 cases of VAP in 2 years.
- Members have been a constant source of support and encouragement for all projects.





The Professional Development Council

- Membership consists of six staff nurses, nurse educator, and a charge nurse.
- Defines, implements, evaluates and maintains educational standards that promote professional growth and ongoing clinical competency.
- Responsible for annual competencies.
- Conduct quarterly unit based journal clubs.
- Foster environment conducive to advancement and utilization of nursing research and evidence-based practice.

Professional Development Council accomplishments

- Changed annual competency structure.
- Educated staff on how to use search engine to locate evidence-based research articles.
- Promote National Certification.
- Educated staff on new retinopathy of prematurity (ROP) protocol.
- Organized journal club for the NICU staff.



Quality/ PI Council



- Membership consists of six staff nurses and a charge nurse.
- Develop an annual quality improvement plan.
- Monitor and analyze data relative to nursing quality and safety practices seeking opportunities for continued improvement.
- Monitor and ensure compliance with established state, federal and regulatory standards.





Quality/ PI Accomplishments



- Researched new protocol for ROP and set a new evidence based practice in motion which has decreased the severe ROP rate from 14% to 6% within a year.
- Monitor chart audits to ensure proper documentation.
- Instituted a new evidence based feeding protocol to decrease our necrotizing enterocolitis rate.

Service Excellence Council



- Membership consists of seven staff nurses, two ancillary staff, a charge nurse, and a family member of a former patient.
- Promote excellence in customer service with patients, families, and staff.
- Rewards and recognition program.





Service Excellence Accomplishments



- Redesigned and decorated lactation room for mothers.
- Placed employee spotlight board in unit.
- Doctor's day celebration.
- March of Dimes team.
- Ensure call backs of all discharged patients.
- Completed service excellence video for education of staff.
- Coordinate bi-annual "preemie" reunion.

Research Question 1



- Will the nurse satisfaction indicators of job enjoyment, tasks, decision-making, and job satisfaction as measured on the National Database of Nursing Quality Indicators (NDNQI) RN Survey show improvement following implementation of shared governance councils on a neonatal unit?



Research Question 2



- Will there be a difference in nurse retention rates on a neonatal unit following the institution of shared governance?



Review of relevant literature



- Nurse retention
- Nurse satisfaction
- Shared governance implementation
- Decision-making
- Search for tasks resulted in no found research articles within the literature.



Nurse Retention



- Nurses who report a higher level of job satisfaction are more likely to remain employed in their current health care organization (Coomber & Barriball, 2007).



Nurse Satisfaction



- Improving nursing job satisfaction has led to improvement in patient satisfaction with nursing care (Force, 2005).





Shared Governance implementation



- Consistent relationships between shared governance and nurse satisfaction have not been found.
- Some studies found nursing satisfaction to improve when shared governance was initiated (Ludeman & Brown, 1989; Westrope, Vaughn, Bott, & Taunton, 1995; Zelauskas & Howes, 1992; Force 2005; Stumpf, 2001).
- Other studies report no change or decreased satisfaction (Hastings & Waltz, 1997; Prince, 1997).

Decision-Making



- According to Scott (2004), morale among nurses improves when nurses are closely involved in the decision-making processes, giving them greater control over their work.





Methodology

Study Design



- Retrospective study using secondary data.
- Pre/post survey data
- Convenience sample
- Data obtained from NDNQI RN survey.
- Retention rates examined pre and post implementation.



Sample



- 58 Registered Nurses employed in a neonatal unit (FT, PT, and Per diem).
- Age range from 25-63 with an average of 43 years.
- Varying degrees in nursing.
- 36% of survey sample are nationally certified in neonatal nursing specialty.
- Average length of seniority is 9.3 years.
- Ethnicity- 3% Asian, 14% African American, 83% Caucasian, and 0% Hispanic.



Setting



- 30 bed level three NICU in the Southeastern United States.
- Primary population of patients are low income minorities.
- Unit cares for approx. 850 patients per year.
- Nurse patient ratios range from 1:1 to 1:4.
- Only two attending neonatologists.



Procedure



- All RNs in the NICU were eligible to take the survey.
- Survey conducted annually in May.
- Survey was open for participation for 21 days.
- Survey was completed on-line and could be taken on the job or from home.
- Logins were required to take the survey.



Instrumentation



- The American Nurse's Association (ANA) National Database of Nursing Quality Indicators (NDNQI) RN Survey which was established in 1998.
- NDNQI is the only national nursing quality measurement program which provides hospitals with unit level performance reports along with comparisons to national averages and percentile rankings.



NDNQI RN Survey



- The NDNQI- Adapted Index of Work Satisfaction includes the following subscales:
 - Tasks
 - Decision-making
 - Job Enjoyment
- Overall
Job
Satisfaction
- Uses a Likert Scale from 1-6 with 1 being strongly disagree to 6 being strongly agree.



Data Analysis



- The NDNQI data was analyzed pre and post implementation and presented in percent differences.
- Statistical analysis could not be performed due to the lack of raw data reported.
- Descriptive demographic data was obtained from employee files.
- The descriptive statistics such as frequencies and percentages were obtained from the demographic data.
- Retention data was obtained from human resources.





Results

Survey Return Rates



- In 2008, there was a return rate of 78% in the NICU. (n=45)
- In 2009, there was a return rate of 70% in the NICU. (n=40)



Sample Characteristics

Characteristic	N	%
Age (25-63), avg. 43		
<u>Education</u>		
Bachelor Degree	26	45
Associate Degree	28	48
Diploma	4	7
<u>Gender</u>		
Female	55	95
Male	3	5
<u>Ethnicity</u>		
Caucasian	48	83
African American	8	14
Asian	2	3
Hispanic	0	0
Certified RNs	21	36

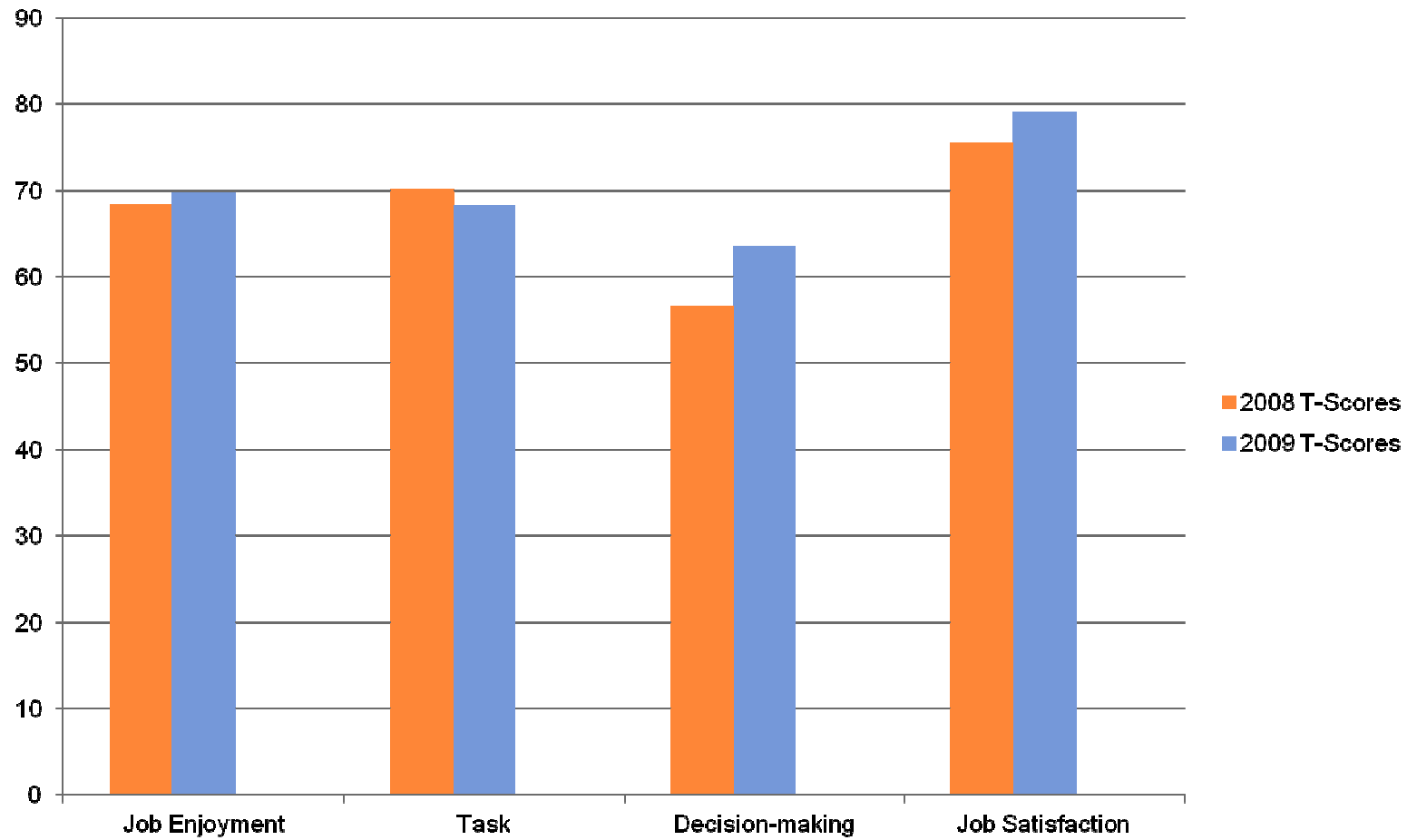
NDNQI Results



Variables	2008 T-Scores	2009 T-Scores	% Differences
Job enjoyment	68.37	69.78	2.1
Tasks	70.16	68.28	-2.7
Decision-making	56.58	63.60	12.4
Job satisfaction	75.48	79.02	4.7



Results



Retention Results





Research Question 1



- Will the nurse satisfaction indicators of job enjoyment, tasks, decision-making, and job satisfaction as measured on the National Database of Nursing Quality Indicators (NDNQI) RN Survey show improvement following implementation of shared governance councils on a neonatal unit?
- Job enjoyment scores show an increase of 2.1%.
- Task scores reflect a decrease of 2.7%.
- Decision-making reflects an increase of 12.4%.
- An overall increase of 4.7% was noted in job satisfaction.

Research Question 2



- Will there be a difference in nurse retention rates on a neonatal unit following the institution of shared governance?
- Nurse retention rates increased from 83% to 97% after the implementation of shared governance.



Study Limitations



- Convenience sample
- Decreased census
- Organizational changes
- Internal Transition



Implications of Findings



- Contributes to knowledge related to shared governance.
- Contributes to knowledge of Councilor Model of shared governance.
- Results suggest nursing management can contribute to a positive work environment by instituting shared governance.
- Retention rates shown to improve with implementation of shared governance.



Recommendations for Future Research



- Replication of study with diverse groups and larger samples.
- Replication of study with different units and at the organizational level.
- Replication of study at different time intervals post implementation.
- Research including tasks and decision-making in relation to nursing satisfaction.



Questions

