Strategies to Promote and Empower the Bedside Nurse

Statewide Nursing & Healthcare Workforce summit
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CHA – Deans and Directors

Create a document:

- Identifying issues contributing to nurses leaving the bedside

- recommendations based on the literature

- to be share with educators and healthcare executives

- to serve as a resource and posted to CHA and CLN/CCNW websites

Document includes:

Executive Summary	A diagram depicting Why nurses leave the bedside…influences and negative impacts
At-a-glance view of issues driving nurses from the bedside as well as strategies and recommendations	
A chart depicting a theoretical framework regarding why nurses leave the bedside	A diagram depicting Why nurses stay at the bedside…recommendations and outcomes

Background:

- New graduate nurses make up 10% of the acute care workforce

(Liu, Wu, Chou, Chen, Yang, & Hsu, 2016)

- Approximately 33% of new graduates leave their position within the first year of hire

(NSI Nursing Solutions, Inc., 2023).

- Hospital and nurse turnover is about 23%.

- The average cost of turnover for a bedside nurse is $52,350 resulting in the average hospital losing $6.5-10.5 million.

- Each percentage change in RN turnover will cost/save the average hospital an additional $380,600/year.

Work Environment / Safety

The two top health and safety issues musculoskeletal/stress related injuries and workplace violence, incivility, bullying

1) Musculoskeletal and stress related injuries

- 47% of nurses believe that lifting and repositioning patients puts their safety at risk (Richardson et al., 2018).

- 56% report increased shift hours impacting workplace injury (ANA, 2011)

- Moral injury still persists in nurses affecting nurses emotional disorders, sleep disturbances, substance use (Callis et al., 2024)

- 73% of nurse injuries were due to workplace violence (Bureau of Labor Statistics, 2018)

Work Environment / Safety

2) Workplace violence, incivility, bullying

- 1 in 4 nurses reported being physically assaulted according to a 2019 ANA Survey (https://www.nursingworld.org/practice-policy/work-environment/end-nurse-abuse/workplace-violence/)

- 41% of nurses report being victims of bullying, incivility or other forms of workplace violence (AMN Healthcare, 2019)

- More than 75% of nurses reported experiencing bullying behaviors in the previous 6 months; aggressors were fellow nurses, physicians, charge nurses, and other hospital staff (Smith et al., 2020)

Work Environment / Safety

2) Workplace violence, incivility, bullying

- Overall absence from work due to WPV cost hospitals over $53 million a year (BitePro, 2023)

- Annual turnover rate for nurses is between 15-36% due to WPV (Somani et al., 2021)

- Cost to replace a nurse is between $27,000 and $103,000 including separation, recruiting, hiring, orientation, and training (OSHA.gov)

Work Environment / Safety

Strategies & Recommendations:

- Combining theoretical education with ergonomics is more effective in preventing musculoskeletal injury (Sousa et al., 2023).

- Organizations to provide necessary resources to minimize high patient ration of dependent patient injuries (ANA, 2018)

- Safety in reporting workplace injury, secure time for recovery, and minimize long shift hours (ANA, 2018)

- Assess and modify risk behaviors (Fernandes et al., 2018).

- Focus on prevention, work environment designed to foster collegiality (Smith et al., 2021)

Work Environment / Safety

Effective January 1, 2022,
The Joint Commission introduced new workplace violence prevention requirements to address:

- A workplace violence prevention program
- Policies and procedures
- Leadership oversight
- Reporting systems
- Data collection
- Post-incidence strategies
- Training and education

Work Environment / Safety

What can we do as nurses?

- *Participate* –
    - Ensure your organization complies with The Joint Commission safety standard
    - Design education and training on workplace safety and measure progress
- *Report* –
    - Report any incidents of violence, incivility, and/or bullying experienced or witnessed
    - Know your right to your own safety
- Advocate –
    - Work with colleagues to establish a commitment to workplace violence prevention as part of the institutional culture
    - Learn about and support legislative efforts at your state association
    - Advocate for federal action to address workplace violence

Work Environment -Staffing

- 77%-90% RNs report *inadequate staffing* (AMN Healthcare, 2023)

- 67% report *not having enough time* to adequately care for the patient (AMN Healthcare, 2023)

- Only 64% of RNs are *satisfied with the quality of care* delivered (AMN Healthcare, 2023)

- 48%-52% RNs will *leave or retire* within a year; 43% will retire within four years (AMN Healthcare, 2023; ANF, 2022)

Work Environment -Staffing

- 90% report the **nursing shortage is worse than five years** ago and will continue to get worse (AMN Healthcare, 2023)

- 50% of RNs would **not recommend nursing as a career**

- **Increased Stress** reported across all populations; 81% (AMN Healthcare, 2023; ANF, 2022)

- 81% of RNs <35 report **employer do not care about their** well-being (ANF, 2022)

Work Environment -Staffing

CT supply and needs (CCNW, 2022)

- 89% hospitals report staffing concerns, 53% admit serious (CCNW, 2022)
- Only 57% of the 89,819 CT Licensed RNs are actively practicing (CCNW, 2022)
- Only 11% of the RNs are between 20-29 (CCNW, 2022)

Why does staffing matter?

- Missed care (AMN, Healthcare, 2023; Ouellet, 2020)
- Poor patient outcomes (Ouellet, 2020)
- RN Moral distress (AMN Healthcare, 2023)
- Burnout leading to turnover, nurses leave (AMN, Healthcare, 2023; ANF, 2022)

Staffing: The change we need

A new safe staffing legislation (HB 6941 Governor's Budget, 2023)

- Accountability
- Protection
- Educate

Future ideas to raise awareness of the value of RNs at the bedside

- Unique identifiers for nurses-NPI and UNI (Carroll, 2022)
- Data linking value of nursing work's impact on patient outcomes (Koehn, 2023)

Technology

Electronic Health Record (EHR):

- a vital role in health IT, enhancing patient care, safety and coordination

- source of truth for key operations including:
    - Regulatory
    - Financial
    - Administrative
    - Data Analysis

- Full access for patients

Technology

EHR - Impact on Nursing:

- time consuming

- nurses spend up to 40% of 12 hour shift documenting patient care

For nurses, Documentation Burden may lead to:

- Job dissatisfaction, Burnout, less time for self-care

For Patients Documentation Burden may:

- ↓ in the patient experience, ↑ risk for hospital conditions (i.e. falls, pressure injury)

Technology

Electronic Health Record--Recommendation/strategies

- Need to improve efficiency; analyze the burden of documentation

- Focus on creating more time for nurses to be with their patients.

- Ongoing EHR education

- Involve nurses in the (re) design and development of EHR systems.

- Seamless integration

- Workflow Optimization

- Supportive Leadership

- Clinical Decision Support

- Provide the nurse with the technology necessary to bring care back to the bedside mobile EHR apps and POCT

Technology

Alarm fatigue:

- 72-99% of alarms are false leading to alarm fatigue in nurses (Gaines, 2019)
- 93% of nurses stated alarm fatigue may cause alarms to be subdues or ignored (Lewandowska, et. al, 2020)
- A hospital reported that on average one million alarms are sounded in a single week; 350 alarms per patient/day in the ICU (Gaines, 2019)

Recommendation/Strategies:

- Have alarm management processes in place, review and adjust default parameter settings, ensure appropriate settings for different clinical areas.

Professional Development

Professional Development & Nurse Practice Autonomy

- Invest in Nursing Professional Development Practitioners
  - NPD Scope and Standards:

Onboarding – Orientation	Competency Management	Education
Role Development	Collaborative partnerships	Inquiry

- Professional development of staff requires adequate staffing

- Allow the nurse time for professional development

- Budgetary resources are essential

Professional Development

Recommendation/Strategies:

- Competency Based Orientation
- Clinical ladder programs
- Recognition
- Tuition assistance
- Professional membership
- Mentor programs / Leadership Academies

- Use role models and coaches in practice
- Professional Governance
- Have nurses at all levels (from bedside to boardroom)
- Collaborative Partnerships

Resources

Time and tasks:

- Nurses spend about 10% of their time on non-nursing activities (Yen et al., 2018)

- Nurses spend up to 28% of a shift at non-value-added tasks (Storfjell, 2019)

Recommendations:

- Re-examine workload and look for opportunities for reductions

- Maximize utilization of support roles

- Pilot project examples

Resources

Staff Compensation:

- Organizations use compensation to attract talent and potential employees compare compensation before accepting a position

  (Henderson, 2019).

- According to US Bureau of Labor Statistics, the 2022 median pay was $81,220

- American Nurse Journal's 2023 survey revealed salaries have increased within the past 12 months

- Dissatisfaction with salary is the top reason why nurses want to leave their employer

Resources

AACN 2021 survey revealed:

- 67% of participants plan to leave their current position within next 3 years

- 63% said they would reconsider if higher salary and benefits (up from 46% in 2018)

- Since pandemic and with travel nurses earning considerably higher salaries, the issue of compensation has been magnified

Resources

Staff Compensation—Recommendations:

- Nursing input into compensation package and consideration for cost of turnover

- Removal of rotating shifts

- Flexible hours, 8 hour shifts vs. 12 hour, part-time positions

- Salary increases/differentials for degree advancement and/or certification, charge nurse role, clinical ladder, serving as preceptor

- Performance based and/or years of experience bonuses

- Child care assistance, wellness and employee assistance programs

Importance of Leadership Development

- Survey of the top reasons why RNs leave revealed relationships with immediate supervisor/directors/management accounted for 21% of the reasons

  (People Element, 2017)

- 82% of nurses indicated that more nurse leaders are needed in healthcare

  (AMN Healthcare, 2017)

- 61% of nurses said they would not consider moving into a leadership position

- Millennial nurses were more likely to be interested in a leadership position

Overall Culture, Relationships and Leadership

Recommendation/Strategies:

- Creating the right culture—culture of safety, quality and service

- Mentoring opportunities

- Shared governance

- Maximizing opportunities for leadership development

- Increasing leadership engagement and provide support to staff

- Improving communication

- Using evidence-based practice

Nurses Leave the Bedside

Structure (characteristics of the work environment)	Process (resulting behaviors within the work environment)	Outcome (realized by the RN)
• Understaffed patient care units • Complex patients • Rapid patient turnover • Fragmented/outdated technology • Inefficient workflow • Long & undesirable hours	• Incivility • Bullying • Lack of advocacy • Lack of appreciation • Ineffective leadership	• Stress • Overwhelmed • Compassion fatigue • Lack of autonomy as a professional RN • Injuries

Nurses Stay at the Bedside

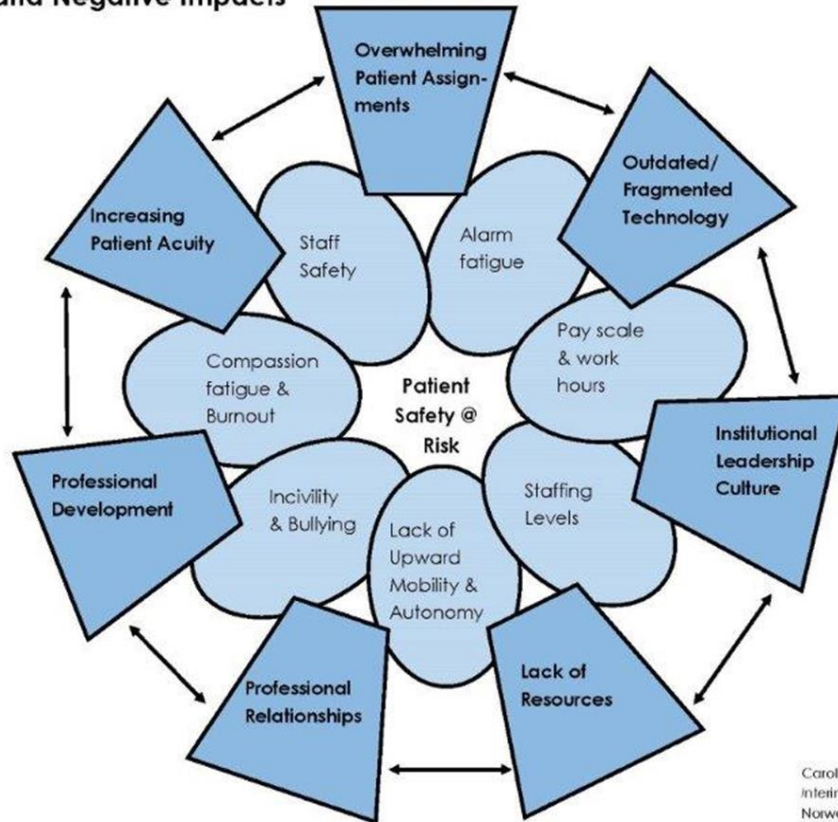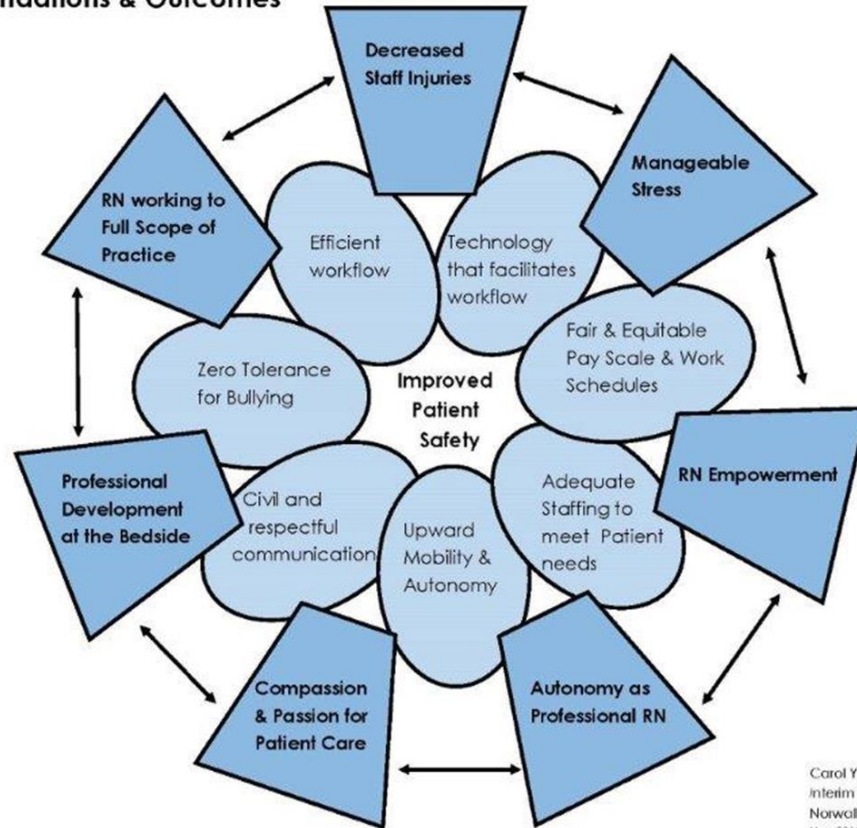| Structure (characteristics of the work environment)	Process (resulting behaviors within the work environment)	Outcome (realized by the RN)
• Patient care units with adequate staffing to meet the complex needs of patients • Managable patient turnover • Technology that faciliates workflow and patient care • Efficient workflow • Managable and fair work schedules	• Civil and respectful communication • Zero tolerance for bullying • A culture of advocacy and appreciation • Effective leadership to empower the RN	• Managable stress • Compassion and passion for the work of nursing and colleagues • Autonomy as a professional RN, practice at the fullest extent of their scope • Decreased injuries

Why Nurses Leave the Bedside ...
Influences and Negative Impacts

Overwhelming Patient Assignments

Outdated/ Fragmented Technology

Increasing Patient Acuity

Staff Safety

Alarm fatigue

Pay scale & work hours

Compassion fatigue & Burnout

Patient Safety @ Risk

Institutional Leadership Culture

Professional Development

Incivility & Bullying

Lack of Upward Mobility & Autonomy

Staffing Levels

Professional Relationships

Lack of Resources

Carol Yoder, MSN, RN
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Oct 2019

Why Nurses Stay at the Bedside ...
Recommendations & Outcomes

Carol Yoder, MSN, RN
Interim Director Nursing & Allied Health
Norwalk Community College
Nov 2019

Next steps

- Recommendation to revisit the presentation with the other members of the CHA/CCNW group

- Consider sharing with nurse executives

- Other steps?

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Thank you

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