NURSE RETENTION IN THE ACUTE CARE SETTING

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Abstract

Nursing burnout and turnover intention are growing issues, largely impacted by the COVID-19 pandemic, yet ones that were prevalent before this worldwide health crisis and will persist in the coming years. Strategies to intervene are key in order to maintain a strong workforce in the acute care setting. Signs of burnout such as emotional and physical fatigue, decreased alertness at work, and desire to leave the profession increased following a season of working during the pandemic. Among a large sample of RNs that experienced this increased workload, over half reported feeling at the end of their rope, fatigued, or burned out at least a few times a week if not every day. With high levels of burnout, there is potential for an increase in turnover intention and subsequent further decline in nurses unless solutions are quickly enacted. This integrative review explores the current literature available on the causes and consequences of burnout as well as strategies to prevent and reduce the impacts of burnout and turnover intention on the nursing profession. Main causes of nursing burnout include high nurse to patient ratios and interpersonal strain such as lack of support from leaders and tumultuous staff relationships. The consequences of burnout and turnover intention include poor patient outcomes and declines in the mental and physical health of nurses. Strategies to improve nurse retention were categorized into main themes and their prevalence among the research articles was analyzed. These categories are leadership (41%), organizational culture (45%), interprofessional relationships (43%) and self-care activities (38%). Strategies to reduce burnout include policies on staffing ratios and allowing nurses to have organizational power. Like burnout, strategies to reduce turnover intention happen at both the organizational and person levels.

Introduction/Significance

The need for nurses is always present with the number of nurses accounting for almost three times that of physicians and surgeons supplying US hospitals (Bakhamis et al., 2019). With such a vast number of nurses in the world of healthcare, research on the experience of the nurse is vital to maintain a healthy workforce and strong healthcare system. With the shortage of nurses in US hospitals, nurses find themselves overworked. Shifts become hectic as expectations for nurses increase. A huge factor in nurses' daily work experience is the number of patients under their care. A low nurse to patient ratio is ideal, with more personalized care and more time for the nurse to spend with individual patients. A high nurse to patient ratio inevitably causes less focus on each individual and more work for the nurse. Due to the need for nurses and the gap in staffing, nurses often face high patient workloads which lead to busy shifts day after day, causing burnout. Nurses find themselves unable to continue at such a high pace. This research will address the retention of nurses in the acute care setting by analyzing nurse to patient ratios, burnout, and turnover intention. Additionally, it will suggest strategies for increasing retention.

Background

There are many factors to explore contributing to the high nurse to patient ratio currently including the aging US population (Bakhamis et al., 2019). To understand the significance of sustaining high nurse to patient ratios, we must understand burnout. The concept of burnout has implications far beyond the emotional satisfaction of the individual nurse. It is the state of being so tired that the capacity to contribute beneficial aid is gone. Studies have shown that overworked nurses can develop "a sense of cynical detachment from work and view others, especially patients, as objects" (Bakhamis et al., 2019 p. 4). As patients are dehumanized by

those caring for them, the original mission of the nursing profession to care for and heal one's neighbors is lost. Additionally, and alarmingly, nursing burnout compromises patient safety. Nurses are trained to be highly accurate, careful, and diligent. Stress and emotional fatigue take away from the body's physiological capability to remain alert and capable of carrying out nursing directives.

When nurses are overextended, the quality of their work suffers. In problem solving efforts on this topic, it is crucial to investigate laws regarding nurse staffing. While many protocols for the healthcare industry come from standing legislation, the federal government does not have laws outlining staffing ratios, however there are proposed ratios for states to follow. California is currently the only state that has established laws for hospitals to abide by. Other states have statewide regulations guiding their hospital systems. Change in this area would be highly beneficial as research has shown that good nurse to patient ratios lead to less medication errors, less nursing burnout, and better patient satisfaction ("Nurse-to-patient ratios: A state-by-state guide," 2021).

Travel nursing during and after the pandemic has shifted the healthcare landscape. During the height of the pandemic, nurses responded to the travel nursing job openings for a few different reasons. Some wanted to serve and give back, embarking on an exciting adventure unique to our lifetime. Other nurses were incentivized by pay and the flexibility that travel nursing provides. However, the movement of nurses out of traditional hospital RN positions to the field of traveling has added to the nursing shortage already experienced and increased costs for hospitals. Coupled with the record number of healthcare workers leaving their positions in 2021, the environment for nursing burnout has increased exponentially (Hansen & Tuttas, 2022).

US hospitals have their own protocols on staffing, which can go a variety of different directions depending on each hospital's leadership. Public reporting systems provide transparency to the public on staffing and help hold hospitals accountable. Another way to help drive implementation of better nurse to patient ratios is shared governance such as nurse driven staffing committees. These committees engage staff in the problem-solving process, creating buy in that ultimately helps with retention (Davidson, 2023).

Turnover intention is a key factor to investigate when thinking about nurse retention. It provides insight into the thought process each nurse considers when deciding to take a position or leave her current job. According to a study done in Australian hospitals in which nurses were asked about turnover intention, the repeated responses included "workplace conditions, career advancement opportunities…and social and personal factors" (Cosgrave et al., 2018).

Purpose/Research Questions

This integrative review will examine causes and implications of high nurse to patient ratios, pulling data from current studies. The review will then propose solutions to increase the retention of nurses in the acute care setting and lower incidences of burnout, considering strategies that have been tried such as relationship building within the workplace and competitive salaries. It will summarize primary research in this area that can be transmitted to nurses on the frontlines.

Research questions

What are the causes and consequences of burnout?

What strategies can be implemented to decrease turnover intention?

Methods

Integrative review is a broad type of review that captures unique perspectives. It is especially helpful regarding data on health care practices due to the busy nature of health care providers' schedules. Providers and care takers are inundated with information at work constantly and are not able to spend the time required to read about primary research as it happens. Integrative review provides a summary of pertinent information that can be easily digested and applied to relevant processes.

There are 5 stages of integrative review, with the first being problem identification. This step will clearly outline the topic and why it is relevant in the field of nursing. The second stage of integrative review is literature search, in which data will be collected on recent studies surrounding the topic, extracting pieces that are beneficial to include in the review. Next, the data collected from pertinent studies will be evaluated to ensure its validity and relevance. The fourth step of integrative review is data analysis in which the data that has been found and authenticated will be analyzed for patterns and conclusions that are helpful to transmit to nurses and other healthcare professionals. Finally, the analyzed data will be put together in a concise way that can be shared in a variety of settings for the betterment of the nursing field (Hopia et al., 2019).

Results/Themes

The 100 articles related to burnout and turnover intention were categorized according to themes and the following patterns were identified. Causes of burnout and turnover intention include unsafe working conditions, high patient workload, complex relationships with staff and patients, negative self-esteem, and dissatisfaction with work. Research shows that burnout syndrome is higher in hospitals with higher nurse to patient ratios (*Still an epidemic*, 2023). In

attempting to understand the impact of the pandemic on nurses, research revealed that dealing with COVID-19 patients negatively impacted the professional self-concept of nurses. This contributed to burnout, as professional self-concept is considered a critical factor in the recruitment and retention process in the nursing process (Allobaney et al., 2022).

Strategies to prevent burnout and decrease turnover intention include 4 main categories of data: self-care activities, interprofessional relationships, organizational culture, and leadership. Within the category of self-care, 38% of the articles identified strategies to prevent turnover intention and decrease the impact of burnout. These strategies included establishing work life balance, building resilience, and practicing mindfulness and gratitude. Job satisfaction and finding personal meaning in work were high satisfiers of decreasing burnout among nurses. In a longitudinal study collecting qualitative data from RNs on the: emotional, quantitative, and physical demands of nursing found that increased meaning of work resulted in decreased burnout levels and higher burnout levels lead to higher turnover intention (Van der Heijden et al., 2019).

Within the category of interprofessional relationships, 43% of the articles identified themes that included: collaboration, communication, and relationship health. One of the main areas in which change can be implemented to increase retention is within organizational culture. This umbrella includes solutions around psychological health support, mental health programming, policy change, patient ratios, available resources, safety, and career ladders. Among the articles referenced, 45% of them included organizational culture as a retention strategy. Organizational approaches to prevent burnout include proper supervision and training on skills, clear communication about job role, and opportunities for career advancement (Kaburi et al., 2019). Mindfulness and cognitive-behavioral therapy-based interventions are effective in reducing stress, anxiety, and are ways to prevent burnout. Healthcare systems must promote the

health and well-being of physicians and nurses with evidence-based interventions to promote population health and enhance the quality and safety of care delivered (Melnyk et al., 2020). Within the leadership category, the following solutions were identified among 41% of the articles: mentoring, supportive leadership, shared governance, and career advancement opportunities. Effective communication, respect, competitive financial compensation, benefits, and proper recognition are among the main strategies nurse leaders can use to retain nurses (Duru & Hammoud, 2022).

Organizations can investigate factors that would decrease turnover intention such as role respect, higher wages, reduced workload, enhanced occupational health and safety, and career advancement opportunities (Lin et al., 2021). Higher levels of distributed leadership predict increased employee engagement and job satisfaction and lower turnover intentions. Employee engagement is key for commitment (Quek et al., 2021). A cross-sectional study with over 300 employees revealed that mentorship engagement increased work engagement and decreased turnover intention. Mentors need supportive interpersonal behaviors to instill motivation into mentees and organizations can support mentor-mentee relationships to decrease turnover intention (Firzly et al., 2022).

Discussion

The nursing shortage was exacerbated by the COVID-19 pandemic and the nursing workforce is still suffering its impact. Burnout is one of the largest contributors to the growing problem of the nursing shortage. With the increasing amounts of data on burnout syndrome, it has been found that incidence of burnout is higher in hospitals with high nurse to patient ratios. Because of the shift of nurses leaving the bedside during and following the pandemic, patient

ratios are more of an issue than ever before, and this only exacerbates the phenomenon of burnout. The stresses that the pandemic placed on nurses in acute care settings brought issues to light that had been present, but now were no longer bearable. The staff ratios placed nurses in a position where they couldn't provide safe patient care. The physical tole alone would be enough to cause nurses to burnout, but the mental toll of being stressed about their ability to provide safe care was the breaking point for many nurses during the pandemic. Many people go into nursing with a similar set of personality traits and qualities and that includes deep empathy for patients. When nurses must care for a high number of patients at one time, their care gets narrowed down to a task and some of the relationship piece that brings joy and fulfillment is lost.

Understanding why staffing ratios matter and contribute to burnout is key for stakeholders to make a difference in the health of nurses. Understanding the causes and consequences of burnout is crucial for nurses and leaders within health care organizations. After analyzing strategies to reduce turnover intention and prevent burnout, change is needed both at the personal and organizational level. Self-care strategies provide a barrier between the nurse and the lingering effects of stress encountered at work. Mentorship, supportive leadership, and opportunities for advancement are retention satisfiers.

Implications/Conclusion

Identifying factors that contribute to burnout as well as strategies to prevent it among nurses adds value to the field of nursing by suggesting methods to combat nursing burnout and increase nursing retention rates. Presenting concise and analyzed data through an integrative review provides information in a digestible form for health care professionals to absorb. One of the action steps that hospitals can take, and many are taking, to prevent burnout among their

nurses is to provide supportive leadership and mentorship early. This can be done particularly through new grad nurse programs that extend the values of education and mentorship into the orientation period for new nurses. Hospitals that have adopted these programs and pour into their nurses are taking a risk in investing time, energy, resources, and relational capital into their new grads. However, that investment has the potential to reap high rewards in the realm of nurse satisfaction and retention. One of the main retention satisfiers being mentorship and supportive leadership should clue hospital leaders into the fact that contributing to the health and wellbeing of nurses to prevent burnout is a valuable investment.

One of the steps that can be taken on the unit level is for nurse managers and charge nurses to include check ins with their nurses on the topic of burnout. Nurses can sense when their leaders are genuine and intentional check ins on their stress levels, coping abilities, and perceived well-being go a long way in contributing to a positive staff culture that supports the health of nurses. It can be daunting to think about implementing changes regarding policies at the organizational level, so considering ways that nurses can impact their unit and their own health is encouraging and a valuable step. As nurses pour out so much time to patients in the hospital setting, it can feel burdensome to think about ways that they can take time to care for their own health. Burnout and stress impact health gradually overtime and preventative measures to relieve stress and provide self-care are necessary. The research on selfcare strategies shows that it is effective in relieving stress and lowering rates of burnout and is therefore important for nurses to be knowledgeable about and implement in their routines.

With intentional effort to prevent burnout and decrease its impact on nurses at both the personal and organizational levels, nurses will be satisfied in their work and not leave the

professional at such high rates. Burnout is important for nurses and nurse leaders to take seriously to promote the vitality of the healthcare system.

Organizations can focus on how to support nurses and capitalize on their strengths, creating autonomy and a space for joy and personal satisfaction at work. This review provides insight into why nursing burnout and turnover intention happen and why they matter to our healthcare system while exploring solutions to the ever-growing nursing shortage. Organization leaders, policy makers, and nurses can gain insight into why burnout exists and how to prevent nursing shortages by addressing factors leading to burnout and turnover intention.

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