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EXCHANGE

MARCH 2016

# Insights Report



DAVID HARTIG

## RECRUITMENT AND RETENTION

*Strategies for Nurse Staffing Success*

*Analysis and in-depth discussion from healthcare leaders at the  
HealthLeaders Media CNO Exchange in November 2015*

*An independent HealthLeaders Media report*

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# Despite Considerable Struggles, Leaders Are Optimistic About Healthcare's Largest Workforce



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The task of today's nurse leader is, in many ways, analogous to developing a winning sports team—serving as part talent scout to find the best and brightest, part coach to develop high-performing workers, and part manager to oversee quality, teamwork, and morale.

But while there's an abundance of eager and able athletes, the current healthcare environment finds itself with a shortage of experienced nurses and, for some organizations, a dearth of new graduates as well.

Adding to the challenge is competition from other healthcare systems dangling signing bonuses and higher pay; high turnover among the newest generation of nurses, who don't remain in one place long; and seasonal variation in some areas, where staffing needs rise and fall.

Losing healthcare providers to early retirement or leaving the field altogether is often the result of heavier workloads and heightened pressure to produce quality outcomes and patient satisfaction while running an efficient operation with adequate reimbursement. Filling positions with qualified workers to meet the expansion of ambulatory and outpatient facilities is another shortage woe.

At HealthLeaders Media's inaugural CNO Exchange, held in November 2015 in Austin, Texas, more than two dozen nurse executives from leading healthcare systems shared innovative ways to attract and develop a top-notch staff, foster a nurturing environment, ensure workflow balance, and build the next generation of leaders.

Leaders remain optimistic about nursing's future—emphasizing opportunities in leadership development and new roles, more shared governance about patient care, and highly ambitious millennials bringing technology skills, energy, and enthusiasm to organizations. Consequently, they're putting strategies in place to equip nurses to play an even more significant role in the healthcare arena.

## Discussion

# Creative Concepts Capture and Keep Nursing Talent

JULIE AUTON

The adage that “everything old is new again” can be said of today’s nursing profession, as a shortage of experienced nurses is resurfacing. A lack of seasoned professionals is partly due to RNs opting for early retirement or moving into another profession altogether. Inadequate staffing is also being experienced as organizations add outpatient facilities and population health initiatives such as community outreach, education and patient monitoring. Nurse executives are employing time-tested, as well as inventive, strategies to attract the best and brightest staff, and designing ways to engage, develop, and retain the next wave of leaders.

Casting an eye to the future also means growing a new generation of millennial nurses (generally, those born after 1980)—and dealing with their decidedly different ideas, values, expectations, and ways of operating. Leaders are tasked with understanding their motivations, adapting to their communication modes (texting) and fashion styles (tattoos and piercings), and providing immediate gratification (cash bonuses).

More than two dozen nurse executives, representing hospitals and healthcare

systems spanning the United States, joined HealthLeaders Media’s inaugural CNO Exchange in Austin, Texas, in November 2015 to share their knowledge about cultivating a powerful workforce and bolstering the profession to seize new possibilities.

### TAKEAWAYS

- **Ushering in a new generation**
- **Building a proficient workforce**
- **Creating an attractive workplace culture**

### Ushering in a new generation

The millennials are a growing part of the labor force, and have surpassed baby boomers as the largest age-related demographic in the U.S., according to the Pew Research Center. Individuals in this cohort, also known as Generation Y, are tossing the conventional rulebook aside and bringing strikingly diverse attitudes and behaviors to the workplace. Yet despite the struggle to understand how to connect with, manage, and incentivize this group, nurse executives are discovering benefits this younger set offers.

One thing is for sure: Gen Y is interested in moving up the ladder quickly, so keeping youthful recruits motivated while educating them on furthering their clinical skills and nursing knowledge is essential.

Holly Lorenz, RN, MSN, is chief nurse executive, vice president of patient care services, and CNO at UPMC in Pittsburgh, a 20-hospital system with 3,500-plus beds, 400 outpatient sites, and 14,000 nurses. She has created a career roadmap for her eager new graduates.

“Our nursing curriculums have a clear pyramid that says, ‘This is your role, these are your resources, this is what you need to do if you want to get to the charge nurse role, to clinical coordinator, to manager, to director, to CNO, etc.’ This helps establish some expectations early on, because they want to move [up] every two years.”

Lorenz also stresses that while a nurse’s title might not change, the scope and span of control could. “We’re not opposed to movement every couple of years, but it’s not necessarily going to be a vertical move; sometimes they’ve got to take a lateral one. That seems to resonate with them.”



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**PEER INSIGHTS:** Members of the CNO Exchange engage in discussion during one of the event programs. From left, Valerie Kiper, DNP, MSN, RN, NEA-BC, CNO at Northwest Texas Healthcare System in Amarillo; Nancy Ray, senior vice president and chief nursing executive at University Health System in San Antonio; Kathy Bonser, MS, RN, vice president of nursing and CNO at SSM Health DePaul Hospital in St. Louis; and Claudia S. Wilder, DNP, RN, NEA-BC, senior vice president and CNO at Baylor Scott & White Health, North Texas Division, in Dallas.

Cynthia Latney, PhDc, MSN, RN, NE-BC, is CNO and vice president of patient care services for Penrose St. Francis Health Services in Colorado Springs, Colorado, which includes a faith-based community health system. She says she finds that Gen Y nurses will respond zealously if she taps into what excites them.

"They don't like long, drawn-out projects, but if there's something they're interested in and you give them work to do, they're fabulous," Latney says. "Some of the best, brightest, most creative ideas are coming from our young nurses, if you give them an opportunity and appreciate them."

She says they also like working in teams, in which they learn from each

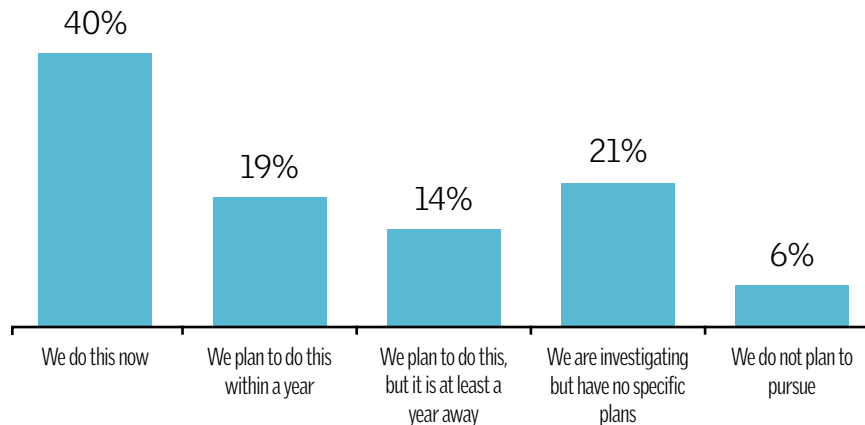
other. Teamwork facilitates critical thinking skills, which they develop quickly.

While adjusting to Gen Y's preferred operating styles, leaders are confronted with older generations of managers, who struggle to meet the needs of younger nurses. Intergenerational differences appear in their preferences for work-life balance, communication methods, and diverse perspectives.

"Work-life balance is [Gen Y's] No. 1 priority," says Dawn Pevey-Mauk, MBA, BSN, RN, NEA-BC, CNO and chief operating officer at Ochsner Medical Center Baton Rouge, a community hospital within the Ochsner Health System, which includes 14 hospitals and a dozen partnerships within its



What is the status of your organization's efforts to establish team-based care to take into account top-of-license performance efficiencies?



SOURCE: HealthLeaders Media Intelligence Report, *Population Health: Investing in a Risk-Based Future*, October 2015; [hl.mt/1YZKIMz](http://hl.mt/1YZKIMz)

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network. As a result, it's hard to recruit young nurses to work holidays or weekends, or to relinquish their day off when needed.

She counteracts their reluctance with bonuses in their paycheck. Some CNOs also give cash bonuses at the end of a shift, satisfying millennials' need for immediate gratification.

Catering to younger people's values, though, can cause conflict among older employees, so Pevey-Mauk uses education to help smooth

misunderstandings and connect disparate age groups.

Intergenerational mentoring is another tactic to retain newer nurses and give older ones insight into a younger demographic, says Beverly Bokovitz, MSN, RN, NEA-BC, CNO at St. Anthony's Medical Center, a St. Louis-based health system with 769 licensed beds.

Embracing new ways to communicate is also central; for example, texting instead of calling, or posting information on social media rather than email or sticky notes. Even human resources policies—such as those relating to tattoos, piercings, and the use of personal electronic devices—needed to be adjusted.

Leaders are finding that accommodating such preferences, reorienting traditional thinking, and embracing fresh approaches does yield benefits. Nurse leaders note Gen Y's fondness for texting garners a quicker response than a phone call. Other pluses include their adeptness with technology, and bringing enthusiasm, drive, and industriousness to their roles.

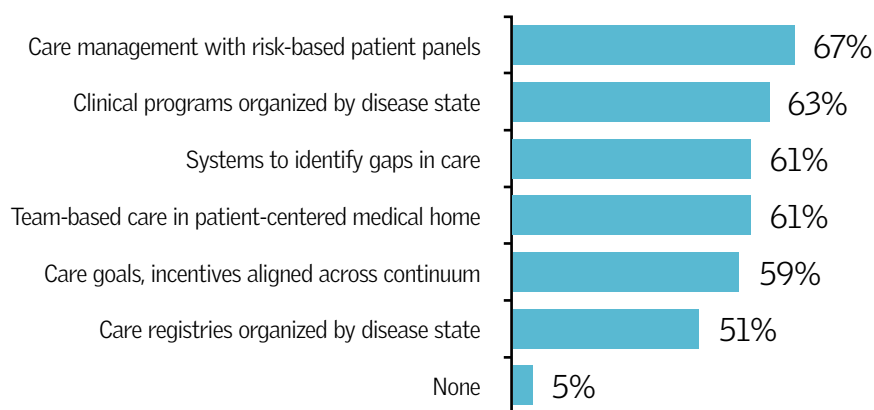
**"Work-life balance is [Gen Y's] No. 1 priority."**

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Within three years, in which areas does your organization expect to have redesigned the delivery of care with the intent of supporting population health management?



Multi-response

SOURCE: HealthLeaders Media Intelligence Report, *Population Health: Investing in a Risk-Based Future*, October 2015; [hl.mt/1YZKIMz](http://hl.mt/1YZKIMz)

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CNO and Chief Operating Officer  
Ochsner Health System  
Jefferson, Louisiana

"If you let them do what they're motivated to do, then they'll be tremendous resources," says Tammy Daniel, DNP, MA, RN, NEA-BC, vice president of patient services at Baptist Medical Center in Jacksonville, Florida, a 489-bed hospital within a five-hospital health system encompassing 1,100 beds.

"What drives them to healthcare is the flexibility and the opportunities. I find that new BSNs [Bachelor of Science in Nursing] are already in the Doctor of Nursing Practice program, and they've not even worked a year at the bedside—the mobility they want is there," Daniel says.

Cathleen A. Wheatley, MS, RN, CENP, is chief nurse executive and vice president of clinical operations at Wake Forest Baptist Medical Center in Winston-Salem, North Carolina, a 1,050-bed system with three campuses, a Level I trauma center, an NCI-designated

cancer center, a children's hospital, and an extensive ambulatory network. She sees enormous advantages in welcoming millennials.

"They're the future, and we're not going to change them," she says. "They're the right generation to take healthcare to the [wider community] because you don't have to work nights in ambulatory clinics—population health is just right for them.

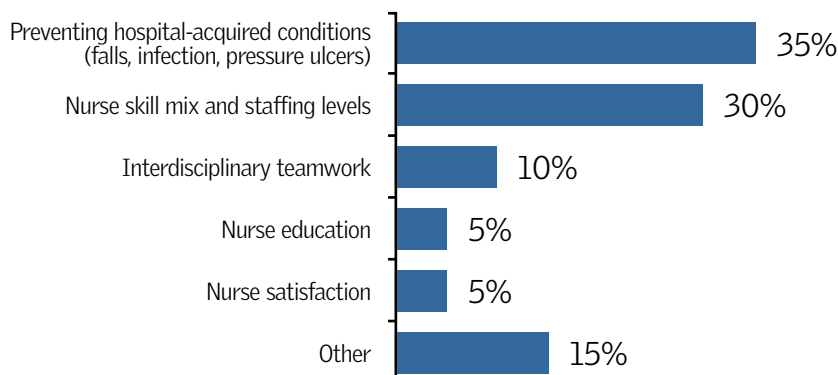
"We keep saying they don't have the same work ethic we had," she adds. "I've reframed that to say they have a life ethic we didn't have ... and how do we tap into that?"

### **Building a proficient workforce**

Despite a supply of new graduates, organizations are undergoing insufficient staffing of experienced nurses for specialty units and care sites across the system, and some locations face challenges due to seasonal variation. Nurse leaders are training staff to embrace new roles to fill gaps in care and satisfy those interested in career advancement.

"Because of our growth, we have difficulty finding experienced nurses for our specialty areas, so we're growing our own," says Grace Sotomayor, DNP, MBA, RN, NEA-BC, CNL, FACHE, vice president of administration and chief nurse executive for Carolinas Healthcare System's Central Division, which includes a Level I trauma center, a community hospital, a children's hospital, a cancer institute, a behavioral health program, and a cardiovascular

## What area is the most challenging in terms of improving nursing care quality?



SOURCE: HealthLeaders Media CNO Exchange Pre-Event Survey. BASE = 20.

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institute. The system has 900 care locations.

"We instituted an ICU-preparation course for new graduates, which consists of basic orientation as well as a six-month intensive for ICU care," she says. "We use our simulation lab to assist with competency assessment and have adapted a similar model for perioperative, the emergency department, and labor and delivery areas. We also have a shorter, 11-week, intensives-only program for experienced nurses who are new to these specialty locations."

**"Every CNO worries about their nurse managers. They're your transformational leaders at the bedside."**

**BEVERLY BOKOVITZ, MSN, RN, NEA-BC**  
CNO  
ST. ANTHONY'S MEDICAL CENTER  
ST. LOUIS

Scripps Health, a San Diego-based system operating 26 ambulatory centers, five hospitals, home health, and other programs, also institutes training to give new graduate nurses the skills and competencies to support different care areas.

"Scripps has an established residency program for training new grad med/surg nurses," says Mary Ellen Doyle, MBA, BSN, RN, corporate vice president of nursing for Scripps Health in San Diego. "The 10-month program incorporates didactic, simulation, and hands-on, skills-building curriculum. The program is over five years old and is continually modified, based on feedback from participants and program outcomes."

## Creating an attractive workplace culture

Producing a proficient workforce is essential, but once leaders have crafted a robust team, there's the challenge of retaining people with core competencies and specialized skills. Establishing a positive work environment, balancing workload to



**Claudia S. Wilder, DNP, RN, NEA-BC**

Senior Vice President and CNO  
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avoid burnout, giving nurses a voice at the table, and providing promotion and leadership opportunities are strategies nurse executives are using to stem turnover.

Organizational culture is key. Wheatley says that access to patient experience data, employee experience data, and operational metrics from the National Database of Nursing Quality Indicators™ gives nurse leaders greater insight into the work environment.

"It's when you look at these three things together that you have informed decision-making about workplace culture," she says. "Any one of these in isolation doesn't tell you the full picture."

Positive work environment is also tied to effective management. "Every CNO worries about their nurse managers. They're your transformational leaders at the bedside," says Bokovitz. "It's the group I worry the most about. You 'get it' from the top, you 'get it' from below, so I'm always thinking about how do we support them, how do we grow them?"

Providing opportunities for promotion and leadership are morale boosters and retention measures, as well.

"We have a journey-to-management [program], as well as a unit director leadership program and a star program, in which we move nurses and the team they're working with into the same leadership development, and then leadership development intensivists," says Doyle. "We hire 90% of our nurse leadership positions internally, which is a good retention tool."

Involving nurses in decision-making for process improvement, patient care, and other initiatives leads to a more engaged and committed staff.

Miller Children's & Women's Hospital Long Beach, California, a 373-bed nonprofit teaching hospital and part of the MemorialCare system, has practice councils at individual campuses as well as integration councils across the health system to discuss issues.

"We encourage these councils to come up with solutions," says Sharilyn Kelly, RNC-OB, MSN/MSHCA, executive director of women's services. "Staff charge nurses make

recommendations to the senior council for approval. They're the content experts, so we rarely overturn their recommendations."

While advancing and rewarding nurses are ways to build a dynamic workforce, staffing numbers and models need to be carefully thought through, cautions Kathleen D. Sanford, DBA, RN, FACHE, FAAN, senior vice president and CNO for Catholic Health Initiatives, a 20-state system based in Englewood, Colorado, that includes 105 hospitals and thousands of care sites, including critical access hospitals, tertiary centers, and academic medical centers.

"As nursing leaders, we need to be thinking about what the system is going to look like five and 10 years from now," says Sanford. "Are we going to change the models? Are we going to use people other than nurses? And do we really believe the hospitals are going to shrink?"

**"Some of the best, brightest, most creative ideas are coming from our young nurses, if you give them an opportunity and appreciate them."**

**CYNTHIA LATNEY, PHDC, MSN, RN, NE-BC**  
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