AN ACADEMIC-PRACTICE COLLABORATION TO IMPROVE A CRITICAL CARE WORK ENVIRONMENT

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OUTLINE

- The Problem
- Review of Literature
- Survey
- Survey Results
- Recommendations
- Academic Perspective
- Hospital Perspective
- Conclusion
THE PROBLEM

High turnover rates in a critical care unit
• 55% of the RN workforce is age 50 or older and eligible for retirement in 10 to 15 years \(^1\)

• As a result of difficult working conditions and dissatisfying work environments, nurses leave the profession or habitually change jobs \(^2,3\)

• 30% to 50% of all new graduate RNs either exit the profession completely or change jobs within the first 3 years of practice \(^4\)

• The average turnover rate in 2014 was 17.2%, an increase from 13.5% in 2011 \(^5\)
THE SURVEY

• Referenced AACCN and Healthy Work Environments
• Thirty-seven item survey with Likert Scale questions
• Two qualitative questions
• Administered over two weeks on all shifts
• Thirty-two of thirty-six RNs participated
SURVEY RESULTS

- Effective Leadership
- Staffing and Resource Adequacy
- Professional Practice
- Meaningful Recognition
- Communication and Collaboration

Qualitative Questions
RECOMMENDATIONS

Effective Leadership

• Improve nursing leadership visibility
• Open door policy
• Enlist staff participation for unit level decision making

Staffing and Resource Adequacy

• Ensure current staffing levels are congruent with regulatory requirements, budget allocations
• Seek staff feedback related to staffing
• Evaluate staffing on a daily basis
RECOMMENDATIONS

Professional Practice
• Evaluate/enhance orientation program, certification incentives, staff development

Meaningful Recognition
• Implement consistent leader rounding including night shift
• Develop strategies to recognize staff (personalized thank you notes, highlight staff recognized by patients)

Communication and Collaboration
• Create get to know you activities/events
• Implement interdisciplinary rounds
• Develop a multidisciplinary collaboration committee. One goal could be to enhance physician-staff relations
LESSONS FROM THE ACADEMIC PERSPECTIVE

• Establish roles and responsibilities early
• Clear expectations
• Sensitivity and confidentiality
LESSONS FROM THE HOSPITAL PERSPECTIVE

• Value of ‘outside eyes’ and collaborative relationships
• Assessment can lead to valuable information
• Utility in not making assumptions
CONCLUSION

• Academic-practice collaboration can build relationships and share expertise

• Nursing administrators should be proactive in establishing and sustaining healthy work environments due to the nursing shortage and high attrition rates

• There is utility in surveying staff and not making assumptions regarding work environments
REFERENCES


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