Sigma’s 30th International Nursing Research Congress

Does Civility as a Nurse Characteristic Predict Job Satisfaction and Intent to Stay?

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Purpose:

As part of the 2018 Registered Nurse (RN) Scholars Research Fellowship Program, the purpose was to test a predictive model of the effects of civility (as a self-reported nurse characteristic) on RN job satisfaction (an affective response to work) and intent to stay with the organization. RN turnover in clinical settings is costly, ranging from USD $4.4 to 7.0 Million annually (Colosi, 2018). The 2018 National Healthcare RN Retention Report states that each percent change in RN turnover will cost/save the average hospital an additional $337,500 (Colosi, 2018). Other indirect costs of turnover include a loss of productivity, efficiency, and organizational knowledge.

The research is guided by the Cowden & Cummings (2012) theoretical model of a nurse’s intent to stay with the organization. The model includes 4 categories of characteristics (manager, organization, work, and nurse characteristics) that influence affective and cognitive responses to work, which then lead to the nurse’s intent to stay with the organization. In addition, a recent Advisory Board presentation highlighted the critical role of civility in nurse turnover and retention (Deline et al., 2017). Thus, we theorized, based on the model by Cowden and Cummings (2012), that civility as a self-reported nurse characteristic could be a novel predictor of job satisfaction and intent to stay with the organization. The research questions are:

R1: Does the score on a civility self-assessment predict the nurse’s intent to stay with the organization?
R2: Does RN job satisfaction mediate the relationship between civility and intent to stay?

Approach: A predictive model was designed based on the Cowden & Cummings (2012) theoretical model. After checking that assumptions are met, a linear regression model will be used to determine the significance of the model, p≤0.05.

Methods:
The cross-sectional, multi-site study of clinical nurses was approved by the Seton Institutional Review Board at a large academic medical center and teaching hospital.
system in Austin, TX. The surveys were sent via email as an electronic link to all nurses within the Seton Healthcare Family in Austin, TX between May- October 2018.

Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Instrument</th>
<th>Description</th>
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<tr>
<td>Nurse Characteristics &amp; Descriptors</td>
<td>Age, Type of Nursing Degree, Tenure at Seton, Role, Ethnicity, Sex</td>
<td>Factors to characterize the sample</td>
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<td>Typical Shift</td>
<td>Day Shift (7am-7pm) Night Shift (7pm-7am) Other Shift</td>
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<td>Job Satisfaction</td>
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<td>Tested for reliability and validity in nursing populations, α 0.88 (Mueller &amp; McCloskey, 1990).</td>
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<td>Intent to Stay</td>
<td>McCain’s Intent to Stay Scale</td>
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<td>Civility</td>
<td>Clark’s Workplace Civility Self-Assessment Scale</td>
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Data Analysis - incomplete responses were deleted from the dataset. Assumptions were checked for individual variables. Regression analysis was used to determine the significance of the model, p<0.05..

Results:
The dataset includes responses from N=523 nurses. Duplicates were removed, leaving a final sample of N=471 complete responses. The overall model was significant [F (2,471) = 52.56, p<.0001], predicting 18% of the variance. Civility as a self-reported nurse characteristic is an independent, significant predictor of the nurse’s intent to stay with the organization, & the relationship is significantly mediated by RN job satisfaction. Civility > Intent to Stay = F (1,471) = 21.81, p<0.0001, R2=0.044
Satisfaction > Intent to Stay = F (1,471) = 89.76, p<0.0001, R2=0.16
Civility > Satisfaction = F(1,471) = 11.36, p< .001, R2=0.023

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Conclusion:
Findings support the addition of civility as a nurse characteristic to the theoretical model, and civility is one of many factors that influence nurse satisfaction, which in turn influence intent-to-stay and organizational commitment. The null hypothesis is rejected. Results suggest that nurses who perceive themselves as highly civil are more likely to stay with the organization because they are more satisfied. Future studies should confirm these findings in additional samples, expand the variables to include additional predictors, and test civility training interventions on intent to stay and retention outcomes. Civility may be an appropriate screening tool in the hiring process, or civility training interventions may improve RN retention. In addition, future studies should include multiple aspects of civility (i.e. the civility of the organization, perception of nurse’s civility by peers, supervisors, administrators, and/or colleagues in other professions in addition to the self-reported measures used in this study. Additionally, a nurse’s level of civility could be considered in relation to the levels of bullying or violence experienced during the workday.

Title:
Does Civility as a Nurse Characteristic Predict Job Satisfaction and Intent to Stay?

Keywords:
Civility, Nurse Retention and RN job satisfaction

References:


Abstract Summary:

This session will describe a multi-site study that tested the effect of civility on RN job satisfaction and organizational commitment. Findings indicate that civility as a self-reported characteristic is
a significant independent predictor of intent-to-stay and is mediated by RN satisfaction, supporting the Cowden & Cummings (2012) theoretical model.

Content Outline:

1. Introduction (5 minutes)
   a. Registered Nurse (RN) turnover in clinical settings is costly to the organization, with average costs per hospital ranging from a loss of $4.4-7.0 Million USD annually (Colosi, 2018). In addition to financial cost, there is a loss of productivity, efficiency, and organizational knowledge associated with nurse turnover. Thus, clinical organizations would like to maximize nurse retention and minimize nurse turnover.
   b. A theoretical model of a nurse’s intent to stay with the organization was developed by Cowden & Cummings (2012). The model includes 4 categories of characteristics (manager, organization, work, and nurse characteristics) that influence affective and cognitive responses to work, which then lead to the nurse’s intent to stay with the organization.
   c. The purpose of this study, as part of the 2018 RN Scholars Research Fellowship Program, is to test a predictive model of the effects of civility (as a self-reported nurse characteristic) on RN job satisfaction (an affective response to work) and intent to stay with the organization (the dependent outcome variable). The proposed study will use an existing survey dataset of N=166 nurses at two (2) Seton Healthcare Family hospitals: Seton Medical Center Austin and Dell Seton Medical Center. The dataset contains results from the following measures: type of unit (i.e. acute care, emergency department, critical care, etc.), typical shift (i.e. day shift, night shift, other), Mueller and McCloskey Job Satisfaction Scale (Mueller & McCloskey, 1990), McCain’s Intention to Stay Scale (McCloskey & McCain, 1987), and Clark’s Workplace Civility Self-Assessment (Clark, 2013).

2. Research Questions and Hypotheses
   R1: Does the score on a civility self-assessment predict the nurse’s intent to stay with the organization?
   H1: The F statistic will be significant at p≤0.05 for the model predicting that civility self-assessment total score (X) can predict the total score on the nurse’s intent to stay with the organization (Y).
   R2: Does RN job satisfaction mediate the relationship between civility and intent to stay?
   H2: The regression model of RN satisfaction mediating the relationship between civility and intent to stay will have a statistically significant F statistic at p≤0.05.

Approach: A predictive model was designed based on the Cowden & Cummings (2012) theoretical model. To test the model, first the total sum score of each instrument will be calculated. Then, after checking that assumptions are met, a linear regression model will be used to determine the significance of the model, p≤0.05.

3. Relevance to conference theme (<1 min)
   The study purpose is aligned with the conference theme of Cultural Context and Care within the subcategory of Healthcare Environment and Provider Wellbeing. Workplace Civility is a component
of the healthcare environment and RN job satisfaction and intent to stay are related to provider wellbeing. Civility and retention are relevant to an international audience, spanning diverse healthcare delivery models despite variations in cultural norms and expectations.

4. Presentation Objectives (<1 min)
Upon completion of this session, the participant will:
* Describe the effect of self-reported workplace civility traits on RN retention and organizational commitment
* Discuss implications of the findings for the clinical setting
* Identify future directions of research related to these findings

5. Methods (2 min)
The cross-sectional, multi-site study of clinical nurses was approved by the Seton Institutional Review Board at a large academic medical center and teaching hospital system in Austin, TX.

a. Sample, Setting, and Timeframe
1. The surveys were sent via email as an electronic link to all nurses within the Seton Healthcare Family in Austin, TX between May-October 2018.

b. Measures

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c. Data Analysis - incomplete responses were deleted from the dataset. Assumptions were checked for individual variables. Regression analysis was used to determine the significance of the model, p<0.05.

6. Findings (4 min)
a. The dataset includes responses from N=523 nurses. The final dataset was of N=471 complete responses after incomplete responses were removed.
b. The overall model was significant [F (2,471) = 52.56, p<.0001], predicting 18% of the variance.
c. Civility as a self-reported nurse characteristic is an independent, significant predictor of the nurse’s intent to stay with the organization, & the relationship is significantly mediated by RN job satisfaction.

1. Civility > Intent to Stay = F (1,471) = 21.81, p<0.0001, R2=0.044
2. Satisfaction > Intent to Stay = F (1,471) = 89.76, p<0.0001, R2=0.16
3. Civility > Satisfaction = F(1,471) = 11.36, p< .001, R2=0.023

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<td>Age (years)</td>
<td>15% 18-29; 29% 30-39; 27% 40-49; 18% 50-59; 10% 60+</td>
</tr>
<tr>
<td>Shift</td>
<td>49% Day Shift</td>
</tr>
<tr>
<td>Department/Specialty</td>
<td>30% Critical Care; 19% Acute Care; 12% ED; 12% Pediatrics</td>
</tr>
<tr>
<td>Tenure at Seton</td>
<td>55% 5+years</td>
</tr>
<tr>
<td>Sex</td>
<td>91% Female</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>80% Not Hispanic or Latino; 12% Hispanic or Latino; 8% Prefer Not to Answer</td>
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7. Conclusion (4 min)
a. Findings support the addition of civility as a nurse characteristic to the theoretical model, and civility is one of many factors that influence nurse satisfaction, which in turn influence intent-to-stay and organizational commitment. The null hypothesis is rejected.
b. Results suggest that nurses who perceive themselves as highly civil are more likely to stay with the organization because they are more satisfied. Future studies should confirm these findings in additional samples, expand the variables to include additional predictors, and test civility training interventions on intent to stay and retention outcomes. Civility may be an appropriate screening tool in the hiring process, or civility training interventions may improve RN retention.
c. In addition, future studies should include multiple aspects of civility (i.e. the civility of the organization, perception of nurse’s civility by peers, supervisors, administrators, and/or colleagues in other professions in addition to the self-reported measures used in this study.)
d. Additionally, a nurse’s level of civility could be considered in relation to the levels of bullying or violence experienced during the workday.

8. Questions/Discussion - 5 minutes

**First Primary Presenting Author**

**Primary Presenting Author**

Kimberly Anette Lewis, MSN, RN  
Seton Healthcare Family / The University of Texas at Austin  
Nursing Research, Professional Development, and Magnet Research Scientist, Doctoral Candidate  
Austin TX  
USA

**Author Summary:** Ms. Lewis is a clinical nursing research scientist at Ascension in Austin, TX and a doctoral candidate at The University of Texas at Austin. She assists nursing practice with the design and implementation of research and EBP projects across the spectrum of healthcare working with a diverse, interprofessional team of clinicians. She has worked in clinical, academic, and bench research, has a background in pediatric critical care, and degrees in nutrition science and nursing education.

**Second Secondary Presenting Author**

**Corresponding Secondary Presenting Author**

Leona L. Baxter, MSN, RN, PCCN  
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Medical Intensive Care Unit  
Registered Nurse Scholar  
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**Author Summary:** Leona has worked in the MICU at Dell Seton Medical Center for many years. She received her master's degree in nursing and has contributed her expertise as a nurse with advanced education within her unit and throughout the hospital.

**Third Secondary Presenting Author**

**Corresponding Secondary Presenting Author**

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**Author Summary:** Kimberly Fraze currently works as a Nurse Expert at Dell Children's Hospital in the Imaging Department. She is participating in her hospital’s program to become a Nurse Scholar. Her previous years of experience consisted of PICU, Pediatric Clinical Instructor, and BLS Instructor.

**Fourth Secondary Presenting Author**

**Corresponding Secondary Presenting Author**

Ashley I. Hall, MSN, RN, CNL  
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USA

**Author Summary:** Ashley Hall is a Nurse Expert in the Medical Intensive Care Unit at Dell Seton Medical Center at the University of Texas. She is involved in the Seton Healthcare Family’s RN Scholar Research Program and teaches Adult Health Clinicals for Concordia University.

**Fifth Author**

Enotiemwonwman “Nancy” Ekemike, MSN, RN  
Seton Medical Center Austin  
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**Author Summary:** Nancy has over 18 years of clinical experience and currently works in the Intermediate Care Unit at Seton Medical Center Austin as an RN IV. Nancy has worked in She is an informal leader within the unit due to her education and experience. She received her master’s degree in nursing and public health in 2016. She promotes learning within her unit about civility and team work despite cultural differences.

**Sixth Author**

Johanna Wynn, MSN, RN  
Seton Medical Center Austin  
Registered Nurse Expert  
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**Author Summary:** Johanna has been with Seton Healthcare for 10 years. She began her nursing career at SMCA in the IMC. She transitioned to the NICU at SMCA in early 2013. She has a BA from Smith College, BSN from Johns Hopkins School of Nursing and an MSN from
Loyola University New Orleans. She is currently participating in Seton Healthcare Hospital's Nurse Scholar program.

**Seventh Secondary Presenting Author**

*Corresponding Secondary Presenting Author*

Amanda Yi Wong, BSN
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USA

**Author Summary:** I am a recent graduate nurse of the University of Texas at Austin. I have 2 years of experience in the Epsilon Theta Chapter at UT as a Leadership Succession Committee member and employment as an registered nurse at the Intermediate Care Unit of Dell Children's Medical Center in Austin, TX.