Floating Woes Begone: How to Keep Nurses at the Bedside?

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Background
Floating is a major contributor to nurse dissatisfaction and turnover and will contribute significantly to the nursing shortage especially at the bedside.
Floating is defined as assigning nurses who work in a specific unit to float to another unit that is short staffed.
The reasons for the staffing issues are varied from sick call outs by the staff to increased acuity of the patients.
The effects of floating on nurses are: increase in stress, anxiety, feeling overwhelmed, frustrated dissatisfaction, and a feeling of lack of support by administrators thereby contributing to a high turnover.
However, it is important to proactively address factors that promote retention and reduce turnover to ensure that nurses remain at the bedside.

Literature Review
The literature revealed extensive research highlighting nurse dissatisfaction with floating that has significantly contributed to high turnover.
High turnover rates are extremely costly to institutions.
An unprecedented nursing shortage is anticipated due to one million RNs expecting to retire by 2030.
Patient care settings will face a significant loss of nursing expertise, skill, and knowledge.
The unprecedented nursing shortage and high turnover makes floating inevitable thus contributing to driving nurses away from the bedside.

Effects of Floating:
Lack of familiarity of the unit causes undue anxiety & stress in nurses
Leads to increase in unsafe practice as nurses don’t know the routine of the floor
Leads to time wasted trying to find equipment/supplies
Leads to mistrust of administration
Leads to high turnover

Problem
It is no secret that floating is a major cause of dissatisfaction and turnover yet it is routinely practiced to meet the staffing needs in an institution.
So, how can institutions overcome the woes of floating and high turnover and keep nurses at the bedside?

Recommendations
Plan NOW!
Institution Wide:
• Clear float policy
• Orientation
• Float evaluation

Float resources:
• All units to have cheat sheets
• Pair with floor nurse

Float pool
• Hospital employees
• Offer financial incentives

Staff autonomy:
• Closed staffing vs cluster units
• Self schedule extra shifts
• Cross-train

References