RESILIENCE AT WORK AMONG FIRST-LINE NURSE MANAGERS

Ron C. Carpio, MSN, MHA, RN-BC, NE-BC
Laura P. Castro, MSN, RN
Heinrich M. Huerto, MSN, RN, ONC, CMSRN
Martha E.F. Highfield, PhD, RN
Sherri Mendelson, PhD, RNC, CNS

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PROVIDENCE HOLY CROSS MEDICAL CENTER

- Mission Hills, CA – 22 mi NW of Los Angeles
- 377-licensed beds

- ANCC’s 3rd Magnet® re-designation
- Level II Trauma Center
- Primary Stroke Center
- Baby Friendly Hospital
- NICU CCS designation
- CARF accreditation
- 2017 Healthgrades® Distinguished Hospital for Clinical Excellence™
- One of “150 Great Places to Work in Healthcare” – Becker’s Hospital Review
RESILIENCE

• “The process of negotiating, managing, and adapting to significant sources of stress or trauma... the capacity for adaptation and ‘bounce back’ in the face of adversity” (Windle, 2011, p. 331).
BACKGROUND

- Work-life balance, overall quality of life, resiliency
- No guidance for current and new NMs
- Reduction of stress, burnout, and improve support, development, satisfaction
- Retention and recruitment of NMs
- Opportunity with PHCMC Nurse Research Fellowship Grant
What is the level of Resilience At Work among first-line NMs?

Are years of experience in NM role, total years of experience as an RN, level of education, ethnicity, age, gender, or the number of direct reports related to resilience at work?
METHODOLOGY

• Study Setting and Sample
  – PH&S Southern California Region (6 ministries)
  – NMs with direct reports (IP and OP)
    • 77 Nurse Leaders = accessible population

• Design
  – Descriptive, cross-sectional study
  – System IRB approved
METHODOLOGY cont.

• **Instrument = R@W Tool** - Valid and reliable
  - First time use for NMs
  - **25 statements** R/T resilient, workplace behaviors
  - **7 subscales**
    1. Living Authentically
    2. Finding Your Calling
    3. Maintaining Perspective
    4. Managing Stress
    5. Interacting Cooperatively
    6. Staying Healthy
    7. Building Networks
METHODOLOGY cont.

• **Procedure**
  – Electronic survey
  – Voluntary participation; anonymous response
  – Fast and easy process

• **Analysis**
  – Descriptive (M & SD)
  – Inferential (Spearman correlation coefficient)
  – Cronbach’s $\alpha$
Results (Demographics)

**Ethnicity (N=44)**
- White (n=30) 68%
- Asian (n=7) 16%
- Hawaiian/PI (n=1) 2%
- Hispanic (n=5) 12%
- Other (n=1) 2%

**Gender (n=45)**
- Female (n=36)
- Male (n=9)
- Decline to state (n=3)
RESULTS - Demographics

**TABLE 2.** Distribution of Race, Gender, and Nursing Degree, Age, Years in Current Role, Total Years as Nurse Manager, Years as Registered Nurse, and Number of Direct Reports

<table>
<thead>
<tr>
<th>DEMOGRAPHICS</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race (n=44)</strong></td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>7 (15)</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>5 (11)</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>1 (2)</td>
</tr>
<tr>
<td>White</td>
<td>30 (64)</td>
</tr>
<tr>
<td>Other (White/Hispanic)</td>
<td>1 (2)</td>
</tr>
<tr>
<td><strong>Gender (n=45)</strong></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>36 (75)</td>
</tr>
<tr>
<td>Male</td>
<td>9 (19)</td>
</tr>
<tr>
<td>Decline to State</td>
<td>3 (6)</td>
</tr>
<tr>
<td><strong>Nursing Degree (n=48)</strong></td>
<td></td>
</tr>
<tr>
<td>Diploma/Associates</td>
<td>5 (10)</td>
</tr>
<tr>
<td>Bachelors</td>
<td>23 (48)</td>
</tr>
<tr>
<td>Masters</td>
<td>20 (42)</td>
</tr>
<tr>
<td><strong>Age (n=48, M=48, SD=9)</strong></td>
<td></td>
</tr>
<tr>
<td>30-39</td>
<td>8 (17)</td>
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<tr>
<td>40-49</td>
<td>16 (33)</td>
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<tr>
<td>50-59</td>
<td>21 (44)</td>
</tr>
<tr>
<td>60-69</td>
<td>3 (6)</td>
</tr>
<tr>
<td><strong>Years in Current Role (n=48, M=4, SD=4)</strong></td>
<td></td>
</tr>
<tr>
<td>1-3</td>
<td>28 (58)</td>
</tr>
<tr>
<td>4-6</td>
<td>11 (23)</td>
</tr>
<tr>
<td>7-10</td>
<td>7 (15)</td>
</tr>
<tr>
<td>&gt;11</td>
<td>2 (4)</td>
</tr>
<tr>
<td><strong>Total Years as Nurse Manager (n=48, M=8, SD=6)</strong></td>
<td></td>
</tr>
<tr>
<td>1-5</td>
<td>17 (35)</td>
</tr>
<tr>
<td>6-10</td>
<td>16 (33)</td>
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<tr>
<td>11-15</td>
<td>9 (19)</td>
</tr>
<tr>
<td>&gt;16</td>
<td>6 (13)</td>
</tr>
<tr>
<td><strong>Years as Registered Nurse (n=48, M=21, SD=10)</strong></td>
<td></td>
</tr>
<tr>
<td>1-10</td>
<td>10 (21)</td>
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<tr>
<td>11-20</td>
<td>14 (29)</td>
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<tr>
<td>21-30</td>
<td>14 (29)</td>
</tr>
<tr>
<td>&gt;30</td>
<td>10 (21)</td>
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<tr>
<td><strong>Number of Direct Reports (n=48, M=67, SD=39)</strong></td>
<td></td>
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<tr>
<td>1-25</td>
<td>9 (18)</td>
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<tr>
<td>26-50</td>
<td>8 (17)</td>
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<tr>
<td>51-75</td>
<td>10 (21)</td>
</tr>
<tr>
<td>76-100</td>
<td>13 (27)</td>
</tr>
<tr>
<td>&gt;100</td>
<td>8 (17)</td>
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</tbody>
</table>
RESULTS – Question #1

• 62% response rate (N=48)
• **4.2 = R@W Scale overall mean**
• Subscale means
  – **Living Authentically (highest)** (5.3/0.4)
  – Interacting Cooperatively (5.1/0.8)
  – Finding Your Calling (5.0/1.0)
  – Building Networks (4.7/0.9)
  – Staying Healthy (4.1/1.3)
  – Managing Stress (3.9/1.1)
  – **Maintaining Perspective (lowest)** (3.1/1.0)
RESULTS – Question #2

• Correlated items (p<.05) with total years as NM
  • R@W overall
  • Maintaining Perspective
  • Staying Healthy

• Non-correlated items
  • Age, Years in Current Role, Years as RN, & Number of Direct Reports
DISCUSSION

• Mean Overall R@W Score (4.2)
  – Between Average and High Resiliency

• Mean Subscale Score
  – Highest/Lowest
    • Living Authentically (5.3)/Maintaining Perspective (3.1)
DISCUSSION cont.

• Correlation between Total R@W Score/Subscale and Demographics
  – Statistically significant with overall R@W mean score AND Total Years as Nurse Manager Maintaining Perspective, and Staying Healthy scores
STUDY LIMITATIONS

• Small, convenience sample not generalizable beyond participants
• Self-identification
  – Role and title clarification
  – Supervisors, Directors with direct reports
• R@W = new tool
  – Initial testing shows potential weakness in 2 subscales
  – Never been tested and standardized with NMs
NURSING IMPLICATIONS: Create, measure, & maintain resilience

• Research
  – Expand survey to PH&S system
• Education
  – Self-care practice intervention
• Education/Administrative
  – Career developmental plan
  – For new NMs – part of orientation
• Monitor literature
  – Development of the tool
REFERENCES


QUESTIONS

THANK YOU!

For more info: ronald.carpio@providence.org