Nurse Work Engagement

Mary Lang, MSN, RN, RCES
Disclosure Statement

- Mary Lang MSN, RN, RCES- employed at Loyola University Medical Center, part of Nursing Research Fellowship Program
- No conflict of interest, no commercial or sponsorship support was given to the author
Objectives

- The Learner will be able to:
  - Identify the definition of engagement
  - Understand that the perception of managerial support is significant for the nurse engagement in the workplace
  - Comprehend the impact of a clinical ladder system on nurse engagement
Loyola University Medical Center
Brainstorming

Being open to ideas
Clinical Ladder System

- Four Levels
  - Level 1
  - Level 2
  - Level 3
  - Level 4
Research Question

- Is there a correlation between Nurse Engagement Level and Clinical Ladder Level?
- Is there a correlation between Nurse Engagement Level and Perception of Managerial Support?
Key Definitions

- **Nurse Engagement** as defined by Utrecht Work Engagement Scale (UWES) with Vigor, Dedication, and Absorption being key attributes (Schaufeli, 2003)

- **Vigor**-willing to put the effort in; able to handle negativity

- **Dedication** defined as being committed to one’s job; owning the tasks with a sense of motivation to do well

- **Absorption** refers to really getting into the work, forgetting about time; job is your priority right now (Maslach, Schaufeli & Leiter 2001)
Utrecht Work Engagement Scale (UWES)

- “Questionnaire to measure work engagement-a positive work related state of fulfillment”.
- N=14,521 17-item UWES
- 9-item UWES with validity, good internal consistency and test-retest reliability (Schaufeli et al 2006)

- The engaged nurse see’s the glass as half full and is self-driven, internally motivated (Schaufeli et al 2006)
Methodology

**What:** Using an online Survey Monkey Questionnaire, an email was sent to 1200 Registered Nurses (RN), who were full time or at least 0.5 FTE.

- Survey included questions from the UWES, work practice and professional demographics
- Clinical ladder eligible staff were asked to participate
- Seven follow-up emails were sent, flyers, word of mouth announcements (over four months)
Methodology

**Where:** Large Midwest Academic Teaching Hospital, Magnet Re-designated, Level I Trauma Center, with 559 beds

**Who:** Clinical Ladder eligible RNs that work full time or at least 0.5 in direct patient care, including inpatient areas, outpatient, and satellite clinical settings
Methodology

**When:** 2015-2016; take 15 or less minutes to complete; during work time

**How:** With Investigational Review Board (IRB) approval; anonymous
Research Timeline

- **IRB Approval**: 8/14/2015
- **Data Collection via Survey Monkey**: 9/1/2015
- **Data Collection Ended**: 12/16/2015
- **Data Analysis - Initial**: 1/20/2016
- **Data Analysis - Final**: 3/8/2016
Results: Demographics (N=277)

- Years as a Nurse: -13.4 median
- Years at this hospital: 8 median
- ANCC Certification: 41%
- Intention to Leave: < 51%
- Respondents: 277 - 23% of total RNs

Biostatistician: Quantitative testing for: Significance (P) was determined the Kruskal-Wallis & Wilcoxon rank sum; sensitivity analysis
Results (N=277)

Work Setting
- Inpatient: 64%
- Outpatient: 26%
- Other: 10%

Educational Level
- BSN: 58%
- Associates Degree: 18%
- MSN: 11%
- Other: 10%
Pursuit of Nursing Certification

I II III

Very Likely
Not Likely
Engagement Scores

Engagement Score by Clinical Ladder Level
(not statistically significant)

<table>
<thead>
<tr>
<th>Clinical Ladder</th>
<th>Level IV</th>
<th>Level III</th>
<th>Level II</th>
<th>Level I</th>
</tr>
</thead>
<tbody>
<tr>
<td>n = 35</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Absorption</td>
<td>4.04</td>
<td>3.83</td>
<td>3.87</td>
<td>3.83</td>
</tr>
<tr>
<td>Vigor</td>
<td>4.27</td>
<td>4.04</td>
<td>4.03</td>
<td>3.8</td>
</tr>
<tr>
<td>Dedication</td>
<td>4.46</td>
<td>4.21</td>
<td>4.34</td>
<td>4.17</td>
</tr>
</tbody>
</table>

Not statistically significant
Managerial Support

- Statistically significant scores for Vigor, Dedication and Absorption with the staff who perceived managerial support.
Discussion: Clinical Ladder

- Engagement scores among nurses on the 4 clinical ladder levels were not significantly different.
- Nurses at all levels reported similar work vigor, dedication, and absorption.

- Implications that a clinical ladder does not change the level of nurses’ engagement.
Discussion: Managerial Support

Engagement in the Workforce

- Study what managers do that would increase nurses perception of manager support
  - Examples: visible/accessible; responsive to issues; listening; honesty
  - Leadership style
  - What influences nurse managers’ own level of engagement (Warshawsky 2012)

- What impact would manager feedback, staff empowerment and providing learning opportunities to nurses have on vigor, dedication and absorption.

- Communication and incentives with research
- Nurse retention
- Improve patient satisfaction
Further Research

- Implement a clinical ladder to encourage engagement?
- Carpe diem…engage new graduate nurses early on road to certification?
- What do managers do that would increase nurses’ perception of manager support?
- What behavior shows managers are more engaged themselves?
Bibliography


Support & Assistance

- All RN respondents in this study
- Mary Grace Mora-Lach MSN, RN Manager Cardiovascular
- Sandra Sojka PhD, R.N., Assistant Professor
- Pam Clementi PhD, R.N., Director Nursing Education
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