Turnover intention:
Experiences of Nurses Working Life in an acute hospital

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Background & Introduction

- In Hong Kong, proportion of Registered nurses working in private sector increased from 10.0% in 1996 to 16.8% in 2013.  
  (Department of Health, 2013)

- In HA Staff Survey, area require attention on Generation Y vs Baby Boomers particularly in engagement.  
  (HA Staff Survey 2016/17)

- In PYNEH, Generation Y nurses (RN & EN) reach around 900 (~50%) of nursing workforce.  
  (NSD, PYNEH)

- Globally, job commitment of Generation Y nurses are different from Generation X and Baby boomer.  
  (Jamieson & Andrew, 2013 & Lavoie-Tremblay et al., 2010)
Aim & Objectives

Aim: A pilot study to understand experiences of nurses working life on their turnover intention by EXIT interview in an acute hospital

Objectives:
- To gain insight into the underlying reasons affecting nurses’ decision on resignation
- To understand stabilizing and destabilizing nurse experiences at work
Methods

- NSD acknowledged the resignation
- Telephone invitation on Voluntary basis
- Face to Face EXIT interview
- Descriptive expressions were checked with participants
- Listing and grouping data into Two domains
Methods

Descriptive Expressions grouped into **TWO** Domains

- Work Life Experience
- Personal Life Experience

Balance between 2 Domains $\rightarrow$ Satisfactory work

(Webster et al., 2009)
Methods

EXIT interview

1. Reason of resignation
2. Factors on prevention from resignation
3. Key Nursing Life Experiences
4. Future Plan
Results

Total resigned RN & EN within that period: **67** (RN – 57; EN – 10)
Total no. of participants (RN & EN): **35** (RN – 31; EN – 4)
Results

Demographic characteristics by Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Participants (RN &amp; EN)</th>
<th>Resigned (RN &amp; EN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged 20 - 29</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Aged 30 - 39</td>
<td>32</td>
<td>11</td>
</tr>
<tr>
<td>Aged 40 - 49</td>
<td>0</td>
<td>53</td>
</tr>
</tbody>
</table>
Results

Demographic characteristics of participants

Year of Experience

- 3 - 6 months: 12 (34%)
- > 6 months - 3 years: 3 (9%)
- > 3 years - 6 years: 3 (9%)
- > 6 years: 17 (48%)
Results

Duration for Decision making

- 0 - 6 months: 80% (28 cases)
- > 6 months - 1 year: 11% (4 cases)
- > 1 year - 2 years: 6% (2 cases)
- > 2 year - 3 years: 3% (1 case)
Team engagement & Perceived personal support

**Stabilizing factors**
- Sense of belongings and supportive co-worker relationship
- Manager or supervisor gives emotional support or spend time with nurses
  
  “I feel warm as WM actively gives emotional support that’s why I postpone my resignation”

**Destabilizing factors**
- No constant positive coaching & feedbacks
- Social isolation with limited concerns on staff to staff relationship by supervisors
  
  “I believe some of my colleagues amplify my faults...juniors afraid to talk with me as seniors having bias on me...”
Growth opportunities & Self - development

- Foreseeable and Clear individual Training & Development
  
  "Offering training opportunities is essential for retention..."

- Limited structured Preceptorship for nurses after the first year/ from scattered recruitment/ after clinical rotation
  
  "I am not from Central recruitment...limited Induction training and no clinical rotation for me..."
Work Life Balance

- Early duties and leave arrangement
  “Life is equal important to job satisfaction...we could have better planning to enjoy personal life if duty roster and leave could be confirmed earlier”

- Heavy work demand affecting personal life
  “I feel very stressful, my mind keep ruminating about works even I had finished duty…”

- Night shift duties
  “I understand I should have night shift duties...however, I found it no longer tolerable...I started insomnia…”
Perceived professional incentives

- **Stabilizing factors**
  - Being respected and praise to efforts
    
    “I feel full of energy while my efforts was recognized by others including patients and their relatives”

- **Destabilizing factors**
  - Handling with complaints
    
    “Patients and their relatives have a very high expectations on us... I was frustrated as they easily made complaint and assuming we have not performed good enough...I really want to have great support while handling with complaint...”
Discussion

Respect & Supportive Staff to Staff Relationship

Supervisory Positive Support

Clear Growth Opportunities

Recognition from Public & Care recipient
Implications & Recommendations

Staff related factor

- Promote positive, peer support & recognition by forming a Young PYer Nurse Group
- Uplift Stress Coping amongst nurses
- Revise Guideline on Management and Application of Duty

Nurse buddies gathering  Stress Relieving Program  Nurse buddies sharing
Implications & Recommendations

Staff related factor

- Reinforce Team engagement
- Enhance People and Team competency of ward managers and supervisors
- Facilitate communications between nurses to ward managers and supervisors

Frontline Nurses
Focus Group

Team building
Implications & Recommendations

Process related factor

- Provide a clear and foreseeable Training & Development plan for each newly recruited nurses

Growth Program

- Ward visit

Induction Program

- Preceptor Training

3 series Support Program

Gain Rejoicing Orientation with Team Harmony
Implications & Recommendations

Environment related factor

- Enhance Positive Practice Environment
- Promote Workflow improvement

Patient related factor

- Promote Patient to Nurse Relationship
Limitations

• The findings cannot generalize to other healthcare setting

• The findings from the 35 people included in analysis were not representative of all nurses who left
Conclusion & Significance

● Experiences of nurses working life in acute hospital could be identified via EXIT interview
● EXIT interview as a platform to collect feedbacks
● Gain insight to needs and concerns among nurses
● Provide indications to improve nurses retention especially on Generation Y nurses
References


- HA Staff Survey 2016/17


