Chapter 22
The Complex Nuances of Nurse Manager Leadership

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ABSTRACT

Hospital organizations are affected by the shortage of nurses across the United States. Hospital organizations must strategically plan to recruit and retain nurses. An average hospital will incur costs between $5.13 million to $7.86 million due to RN turnover. In an outcome-focused healthcare environment, healthcare leaders must consider all perspectives involved in nurse manager leadership. The purpose of this phenomenological study was to describe nurses' lived experiences with nurse manager leadership on medical surgical units in Riverside County, California, USA.

INTRODUCTION

Hospital organizations are affected by the shortage of nurses across the nation (American Nurses Association, 2016a). Health workforce projections estimate California will have a shortage of 44,500 full time equivalent positions of RN's by 2030 (U.S. Department of Health and Human Services et al., 2017). Projections at the state level predict deficits caused by local conditions, such as health care utilization trends, staffing patterns, patient demographics, and new RN graduates (U.S. Department of Health and Human Services et al., 2017). Health care organizations need to strategically plan through workforce development how to address and support adequate RN staffing (Aggar, Gordon, & Bloomfield, 2016). The shortage of registered nurses is a fiscal and organizational development priority for hospital administrators (Morioka, Tomio, Seto, & Kobayashi, 2017).

When nurses leave their positions, hospital organizations incur significant costs to replace these positions. Hospitals have incurred costs between $46.7k and $95.6k in excess labor utilization due to RN turnover (Nursing Solutions, Inc., 2017). These costs reflect lost productivity and excess overtime to compensate for open nursing positions (Nursing Solutions, Inc., 2017). The average costs one RN position turnover ranges from $38,900 to $59,700 (Nursing Solutions, Inc., 2017).

An average hospital will incur costs between $5.13 million to $7.86 million due to RN turnover (Nursing Solutions, Inc., 2017). The costs involved in nurse turnover are both indirect and direct to an organization. The direct costs include the posting of ads, the training of staff, and cost of temporary staff (Duffield et al., 2014). The indirect costs include the training of new staff and any termination costs from former staff members (Duffield et al., 2014). Nearly 86% of hospitals view retention as a key strategic priority, yet only 43% have operationalized a formal strategy (Nursing Solutions, Inc., 2017).

Nurse turnover is also important to overall patient care. The phenomenon of nurse turnover contributes to inadequate nurse staffing, which is related to adverse patient outcomes (Dabney & Kalisch, 2015). One adverse patient outcome monitored in the hospital setting are pressure acquired ulcers. Higher to nurse to patient ratios were related to less incidences of pressure ulcers (Park et al., 2014). Hirsbrunner, Denhaerynchk, Fierz, Milisen, and Schwendimann (2015) found that higher proportion of RN's working, more nursing hours, and more nursing experience was inversely correlated with patient falls. Thus, nurse staffing is a critical aspect to supporting patients and care outcomes (Hirsbrunner et al., 2015).

Registered nurses are the clinical foundation of patient care in a hospital setting. Nurses perform various essential patient care tasks that include physical examinations, providing medications, and interdisciplinary care coordination (American Nurses Association, 2016c). Without adequate nurse staffing, patient care diminishes, and nurses experience burn out (American Nurses Association, 2016b). This burnout can lead to job dissatisfaction and nurse's intention to leave a position (American Nurses Association, 2016b).

Hospital administrators must be innovative in creating a strategic plan to address retaining and recruiting registered nurses in the current labor market (Titzer, Shirey, & Hauck, 2014). One avenue to achieve this is by supporting a healthy work environment through nurse leadership. Nurse manager leadership can influence the work atmospheres and contributes to satisfaction with one's job. Hospital administrators should consider addressing nurse retention by focusing on nurse manager leadership.

Background of the Problem

The shortage of nurses has been amplified by several sociological issues, including the aging population, retiring nurses, and healthcare reform. As of 2014, Americans ages 65 years and older comprised 14.5% of the United States population (Administration on Aging, 2015). This is an increasingly large segment of the population, whose healthcare needs will be exacerbated by their increasing age (American Nurses Association, 2016a). By 2040, this population segment is estimated to compromise 21.7% of the population (Administration on Aging, 2015). This growing population segment of 65 and older has increased the market need for nurses. The market demand for nurses is tied to the high utilization rates of medical services by the older American cohort (American Nurses Association, 2016a).

An additional factor influencing the demand on nurses are national legislation regarding healthcare. The Patient Protection and Affordable Care Act (2010) mandated minimum healthcare coverage for all Americans and as of the end of open enrollment in 2016 there were 12.7 million new insurance plans purchased (Centers for Medicare and Medicaid Services, n.d.). Newly insured patients are seeking medical services at the outpatient and hospital level. To meet this increased demand of medical services, hospital administrators must recruit and sustain adequate nurse staffing (Titzer, Shirey, & Hauck, 2014). However, current research is lacking the lived experiences of nurses that can be helpful in shaping these strategic plans.

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