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Effective Strategies Nursing Leaders Use to Increase Registered Nurse Retention

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This is to certify that the doctoral study by

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Abstract

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MS, Lindenwood University, 2017

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Abstract

The declining number of registered nurses (RNs) across all specialties in the United States presents significant challenges to the healthcare system, requiring nursing leaders to implement effective retention strategies. A critical issue for hospital stakeholders is that many nursing leaders lack evidence-based strategies to improve RN retention. Grounded in the stakeholder theory as the conceptual framework, the purpose of this pragmatic inquiry research project was to explore the nurse retention strategies successfully used by six nursing leaders in the Midwest United States. Data were collected through personal interviews and publicly available documents, then analyzed following Yin's 5-step process, ensuring data saturation. Findings revealed six key retention strategies: offering RN competitive pay, improving hiring and onboarding processes, prioritizing RN recognition, offering RN training/education opportunities, procuring more staff, and providing RNs with a flexible work schedule. A key recommendation is that nurse leaders should make assessing RN well-being a routine performance metric. The implications of positive social change include the potential to show nurse leaders how to improve RN retention, leading to fewer medical errors, higher quality of care, better treatment outcomes, enhanced dignity, and improved quality of life for local citizens.

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Section 1: Foundation of the Project

Background of the Problem

The number of registered nurses (RNs) has been decreasing throughout all specialties, causing significant challenges to the healthcare system and requiring nursing leaders to increase nurse retention rates in the United States. RNs have decreased by more than 100,000 from 2020 to 2021, which has been the largest drop ever observed over the past 4 decades (Auerbach et al., 2022). Since 2021, the significant growth in older populations and limitations in nursing school capacity has contributed to a deficit of more than 900,000 nurses (Boyle et al., 2022). According to the International Council of Nurses, the COVID-19 pandemic exacerbated the plummeting nurse retention rates (Buchan & Catton, 2023). Nursing leaders must act and increase nurse retention rates to overcome the nursing shortage. The nursing shortage has impacted many healthcare systems and requires hospital leaders to employ comprehensive strategies to understand and mitigate this phenomenon.

There are multiple reasons for the nursing shortage. Fewer nurses are entering the workforce, and many are inadequately prepared to meet certain areas of patient needs in a changing healthcare environment (Brown et al., 2023). With the low retention rates, healthcare leaders require collaboration, nursing involvement, and retention strategies to combat the nursing shortage. The nurse turnover rate dropped from 27.1% in 2017 to 18.4% in 2023 (Haddad et al., 2024).

Healthcare organizations that implement high-level strategies such as retaining

current nurses to reduce the number of new nurses requiring hiring and training, increasing nurse residency programs to create more availability in nursing schools, and using more effective recruitment methods to hire more nurses can increase nurse retention rates (Silvestre et al., 2017). By identifying best practices in nurse retention, this study offers valuable insights for hospitals throughout the Midwest United States, addressing the pressing nursing retention crisis and providing practical solutions to enhance healthcare workforce stability.

Business Problem Focus and Project Purpose

In this qualitative pragmatic inquiry study, I explored the strategies that some nursing leaders in the Midwest region of the United States use to improve nurse retention. The targeted population comprised six nursing leaders who successfully improved nurse retention in a hospital setting. In 2023, the national RN turnover rate was 18.4% (Roush, 2024). Successful retention is defined as a hospital turnover rate of 15% or better, which corresponds to the 80th percentile of current hospital retention rates, according to the 2024 NSI National Health Care Retention and RN Staffing Report (as cited in Haddad et al., 2024). By identifying and understanding effective strategies for improving nurse retention, this study has a prospective social benefit of enhancing nurse satisfaction. Findings from this study may provide valuable insights into nurse retention strategies, patient care outcomes, and the well-being of community citizens.

Research Question

What effective strategies do some nursing leaders in the Midwest United States use to improve nurse retention?

Assumptions and Limitations

Assumptions

Assumptions are issues, positions, or ideas that the researcher takes for granted regarding the context of the topic (Theofanidis & Fountouki, 2018). In this study, I identified a few assumptions. First, nurses experience burnout. My second assumption was that the participants would answer the interview questions truthfully to avoid any inappropriate test utilization and reduce costs. Researchers can conduct a more vigorous research study by identifying the assumptions, which will help minimize any barriers to the research.

Limitations

According to Theofanidis & Fountouki, 2018, limitations are out of the researcher's control and must be identified early. Researchers could learn from the limitations of this study to then formulate recommendations for further research. The first limitation was that participants feared sharing their true experiences or feelings for fear of retaliation. A second limitation was that the participants were in a small geographical area, and, therefore, results from this study may not be generalizable to other U.S. regions.

Transition

In Section 1, I presented an overview of nurse leaders' strategies to promote higher retention. Also in Section 1, I presented details about the background of the business problem, business problem, and limitations. I also provided research questions, assumptions, and limitations. In Section 2, I will present findings from an in-depth literature review regarding factors influencing nursing staff turnover rates.

Section 2: The Literature Review

A Review of the Professional and Academic Literature

In this literature review, I analyze and synthesize various literature sources from the Walden University Library database, which includes peer-reviewed sources, including ProQuest Central, SAGE journals, Emerald Management journals, OVID, EBSCOhost, Google Scholar, government websites, and seminal scholarly books. This review includes an explanation of the conceptual framework, an examination of the foundational aspects of the research topic, and an assessment of the relationship between the research topic and the conceptual framework. From my literature review, I was able to gain knowledge and expand my understanding of this topic to facilitate the preparation of my research study.

The healthcare industry has changed in the last 5 years, largely due to the pandemic and the pressing need for nurse retention. Factors contributing to the challenges in retention among hospital nursing staff include increased patient care demands, poor leadership and management, limited career advancement opportunities, inadequate education, and unfavorable work environments (Marufu et al., 2021). These issues have led to low retention rates among nurses, exacerbating the existing nurse shortage crisis.

Some nursing leaders do not understand the causes of nurse turnover intention, nurse burnout, and nurse job satisfaction (Dyrbye et al., 2016). Insufficient staffing also significantly impacts the low retention rate when nurses who show up become

overworked, exhausted, and frustrated with their jobs (Tamata et al., 2021). Understanding the causes of these problems can facilitate the formulation of strategies to reduce nurse shortage. Consequently, effective strategies for nurse retention can help mitigate these challenges and promote a sustainable healthcare workforce.

As I studied peer-reviewed articles and published literature, several strategies emerged to improve nurse retention rates. Work environment improvements, such as fostering shared governance, ensuring adequate staffing levels, and cultivating supportive nurse-physician relationships, show promise in enhancing nurse satisfaction and retention (Mazzuca, 2017). Career development opportunities, including professional development programs, mentorship, and opportunities for advancement, can increase job satisfaction and provide nurses with a sense of growth and progression (Adeniran et al., 2013). Leaders who support the work environment require strength in promoting autonomy, recognition, and effective communication, thus fostering nurse satisfaction and encouraging organizational loyalty.

Conceptual Framework: Leadership

Investigators can use the stakeholder theory on the key components and relationships underpinning a particular topic or phenomenon (Friedman & Miles, 2002). Nurse retention strategies involve identifying the main factors contributing to nurse retention and how nurse retention factors impact nurses' decisions to interact to influence nurses' decisions to stay or leave their positions. The stakeholder theory for nurse retention strategies includes identifying the work environment, the nurse-physician

relationship, and a supportive culture (Sobers, 2020). The conceptual framework of the stakeholder theory regarding nursing retention strategies involves identifying and understanding the various stakeholders involved in the nursing profession, recognizing their interests, and developing strategies to address their needs and concerns (Sobers, 2020).

The stakeholder theory can help organizations become collections of different parties with individual goals and objectives that can be affected by each other (Freeman et al., 2018). The theory was developed to understand various stakeholders with interdependent relationships (Friedman & Miles, 2002). Nurses who feel satisfied and engaged with their work can positively impact patient outcomes.

Conversely, the support provided by the organization and the leadership quality can strongly influence the level of job satisfaction experienced by nurses. The stakeholder theory defines who benefits from the organization (Friedman & Miles, 2002). Stakeholders such as managers and nurses can both benefit in hospital settings. Managers can use the stakeholder theory as a lens for developing strategies to help nurses feel more satisfied and engaged.

Effective nursing retention strategies involve engaging stakeholders in the decision-making process. Their insights and perspectives are crucial for creating strategies that align with their interests and garner implementation support. Therefore, regarding nursing retention strategies, stakeholder theory-oriented managers exhibit stakeholder trade-offs such as extra time off or flex scheduling to enhance nurse

satisfaction and resultant job retention. The stakeholders can influence the development of long-term and sustainable nursing retention strategies.

Stakeholder-theory-oriented managers exhibit better treatment toward their stakeholders than those in similar circumstances and achieve high levels of economic performance. The stakeholder theory encompasses six general principles, including value creation, human complexity, purpose, interconnection, cooperation, and reciprocity principles (Cardiff et al., 2023). Similar to other business leaders, hospital leaders have a moral obligation to their stakeholders. The corporation's survival and success rely on its stakeholders' support. Stakeholder theory holds stakeholders accountable for ensuring the overall success of organizations (Adamska et al., 2016), while leaders use the path-goal theory to select a leadership style that fits the situation.

Hospital leaders must establish one relationship within the hospital that allows them to benefit from the corporation's actions and operations. Patients represent the primary stakeholders of hospitals, thereby giving hospital leadership the potential to infringe upon or disregard their rights. Nurses hold a medical responsibility for preventing harm to their patients. Freeman (1984) stated that without stakeholders, such groups of nurses would cease to exist.

Stakeholders such as nurses should engage with other stakeholders to increase the ongoing support of other shareholders (Brailsford et al., 2009). Hospitals make money by treating patients, so nurses must engage with their patients to increase patient load and revenue. Managers who use the stakeholder theory must create value for all

stakeholders, not just shareholders (Freeman, 1984).

Freeman's stakeholder theory can be useful to business leaders understand the importance of relationships between customers, suppliers, employees, and the community (Freeman et al., 2008). Stakeholder value creation occurs in relationships with common interests, collaboration ability, and trust between the parties. Kujala et al. (2019) stated that a leader's ability to establish long-lasting connections with its stakeholders, based on interest alignment, cooperation, and trust, determines its value. Nurses who aid patients often create relationships that portray the stakeholders' theory. A company that has a set of relationships crucial to its functioning among individuals or groups who affect or who are affected by its business operations may benefit from leaders' applications of stakeholder theory. Although I selected stakeholder theory for this study, there are other theories that I could have chosen and one of those theories is the competing values framework.

The Competing Values Framework (CVP)

CVP was developed in the 1980s by Quinn and Cameron. CVP has two values: internal vs. external focus and flexibility vs. stability. The framework categorizes organizational cultures into four quadrants: clan, adhocracy, market, and hierarchy. Each quadrant represents a different set of values and characteristics that can impact nurse satisfaction and retention. The clan executive leaders and managers have the best expertise in recognizing and handling conflicts, miscommunications, and misunderstandings related to the organizational goals of leaders and management

(Gammoh, 2021).

The market organizational culture is based on the idea of decision-making and allows leaders to focus on driving results and gaining a competitive edge. Hospital leaders who develop a market culture can promote nurses who will succeed in their roles and have strict guidelines that provide structure. CVF supports improving leadership and organizational cultures to improve nurses' job satisfaction and provide opportunities for nurse growth. Understanding the dominant culture and its impact on nurse satisfaction can help healthcare institutions make targeted improvements to increase nurse retention rates and ultimately enhance patient care.

The hierarchy culture has an organizational structure that is clear and has well-defined responsibilities. The culture has standardized rules and procedures as well as strict control (Yu & Wu, 2009). Although CVP theory is useful, the path-goal theory is based on leadership and achieving goals.

Path-Goal Theory

House (1996) developed the path-goal theory, a leadership theory, in the 1970s. This theory emphasizes how leaders, by clarifying the path to achieving goals and providing appropriate support and rewards, can improve their followers' motivation, satisfaction, and performance. A central tenet to the theory is that influential leaders adapt their followers and the specific context to maximize positive outcomes.

Researchers use path-goal theory to understand stakeholder interests, characteristics, and positions within a network. Understanding the stakeholders' interests

can lead to positive outcomes, which can develop more robust communication between the leadership and stakeholders (Kok et al., 2015).

The path-goal theory emphasizes that effective leaders provide the necessary support and guidance to help their followers achieve their goals, thus enhancing job satisfaction, motivation, and performance. The four path-goal theory leadership styles are directive, supportive, participative, and achievement-oriented leadership (Olowoselu et al., 2019). The path-goal theory is an evidence-based theory focusing on organizational performance by applying the most effective leadership style to each situation, such as improving physician satisfaction and job satisfaction and providing opportunities for physician professional development (Taylor, 2021). I did not use the path-goal theory because the model is suitable for focusing on leadership behavior, which is not my intent in this study. The performance model (PP) model is another theory that has some similarities to the path-goal theory.

The PP Model

Developed by Neely in the late 1990s, the PP model provides a strategic performance measurement framework addressing the limitations in traditional performance measurement systems. The PP model resembles the balanced scorecard because the focus is on a broader set of stakeholders and their perspectives. The PP model centers on performance, including customer satisfaction, stakeholder interests, and the organizational processes that drive performance. The PP model contributes to organizational performance improvement and performance (Baumann & Bonner, 2017).

The PP model incorporates stakeholder satisfaction and the idea that the business's success is satisfying the stakeholders' needs. Stakeholder-focused approaches, such as the PP model, unify other measures, strengthening individuals within the organization (Severgnini et al., 2018). The PP model can promote evaluation from perspectives on learning, innovation, processes, stakeholders, and customers. The PP model is the participation of stakeholders who can impact the organization's performance (Severgnini et al., 2018) while in the stakeholder theory, managers focus more on the culture.

Other Alternative Theories

Addressing nurse retention issues in hospitals requires the consideration of alternative theories. Leader-member exchange (LMX) theory managers focus on relationships between the leader and individuals. A leader’s behavior influences the perceptions and responses of followers (Nahrgang et al., 2011). Developed by George Graen and Fred Dansereau in the 1970s, LMX theory leaders do not treat all their followers the same way. Based on this theory, leaders form distinct, personalized relationships with their subordinates to enhance employee retention.

Conversely, low-quality or less frequent LMX in hospital settings can have adverse effects, such as decreased morale, job satisfaction, and potential lapses in patient care. Therefore, understanding and applying LMX theory in hospital settings helps build strong relationships with their team members, benefiting staff and patients. The LMX theory has similar characteristics to the job demand control support model.

Karasek and Theorell's job demand control support (JDCS) model is a widely recognized occupational health and psychology framework (as cited in Lee et al., 2020). Developed in 1990, the theory shows the relationship between work-related factors and their impact on employee well-being and job-related stress. Employees and their staff have the same power as executives in their job functions when working on tasks (i.e., job control), they would have more job satisfaction as well as organizational and peer support (Lee et al., 2020). The JDCS model proposes that combining high job demands and low job control can lead to adverse health outcomes. The social support component is a buffer, mitigating the harmful effects of high demands and low control. Adequate social support can reduce the adverse impact on employees' health when they have high demands and low control. The JDCS model differs from most models, such as Maslow’s hierarchy of needs.

Maslow’s hierarchy of needs, developed in 1949, outlines human motivation and the nature of human needs in a hierarchical pyramid. The model identifies various human needs from physiological safety to belonging and self-actualization, arranging them in a pyramid with the most fundamental needs at the bottom and higher-order needs at the top. In this study about nurse retention strategies, a researcher could use the hierarchy of needs theory to analyze what strategies hospital leaders could use to facilitate nurse retention. The order of the needs implies that, to reach the next stage of the pyramid, one must meet the basic needs first.

Similarly, meeting human needs is essential for individuals to become efficient

workers. Nurses who lack basic needs such as a support family or good health would be unable to focus their time or energy on their work– thus, unable to reach the highest level in Maslow's theory. Nurses have unlimited pressures, including ensuring patient safety, regulations from national organizations, and adhering to organizational policies such as the Joint Commission. Other regulations and pressures do not align with this theory, making Maslow's theory unacceptable for the strategies administrators need to use to retain nursing staff.

Kahn's (1990) theory of engagement and disengagement emphasizes the meaningfulness and safety of the work. Certain theories may struggle to be applicable due to the compounding effect of stress and demands in the nursing workplace caused by restraints in regulations, policies, and procedures. The theory is helpful for nurse retention but does not meet the complex needs of high-stress nursing environments. Therefore, stakeholder theory is a more comprehensive approach to exploring strategies for nurse retention. I will now shift my discussion from conceptual theories to support and discuss the nurse retention business problem.

Job Demand

Various internal and external forces including patients, administrators, new technology, electronic medical records (EMRs), social media, attendance expectations, critical thinking, and innovative demands from administrators to increase patient satisfaction scores, patients' families, pandemics (and the potential thereof) – shape the demands of nurses (Brewer & Kovner, 2020). An example of a regulator is the Center

for Medicaid and Medicare Services, which informs patients and their families of the increasing prevalence of global diseases. The fear of global diseases can result in further demands on the need for personal protective equipment and the ability to be ready for any impending exposure. The demands of global diseases can also impact nurses' job of caring for patients. Along with global diseases, information technology (IT) and workloads have an impact on the healthcare industry.

The healthcare industry has undergone significant changes, propelled mainly by the ability of IT to help nurses organize and ease their workloads. Technologies such as EMRs have become integral to healthcare facilities, with nursing at the forefront (Lambooij et al., 2017). Despite these positive advantages, challenges persist, such as concerns regarding data security and the necessity for comprehensive IT training around recording and tracking protocols. This complex responsibility highlights the need for a comprehensive approach to supporting nurses in this dynamic healthcare environment. In light of these significant challenges, it becomes evident that a comprehensive approach is essential for supporting nurses in navigating the complexities of the healthcare environment effectively.

According to Yong (2021), nurses have the highest callout rate and health issues among all healthcare professions. Warrick (2017) studied ways to improve hospital nurses' health and quality of work-life. The absence of nurses can significantly impact the operation and profitability of hospitals, as it often hinders the facility’s capacity to meet staffing needs. Striking a balance between work and personal life responsibilities

is essential, especially considering the challenges associated with attendance-based stress. This issue further demonstrates the broader challenge of managing job demands in nursing. Nurse callout rates are high for multiple reasons, which makes work-life balance even more critical.

Some of the job demands involve nurses working beyond their skill level. Nursing leaders may find that providing ongoing nurse education helps to alleviate the problem of nurses working beyond their skill levels because of staffing shortages and job demands. (Bartosiewicz & Januszewicz, 2019) stated that completing tasks without proper licensing or certification could lead to harmful patient outcomes. According to (Bartosiewicz & Januszewicz, 2019) nurses tend to be more confident and secure working within their skill levels and scope of practice, leading to more positive patient health outcomes. Nurses who are not forced to work above their skill level and can build confidence in their skill level will perform more effectively and have greater satisfaction, resulting in lower turnover intention rates. Recognizing and addressing the mismatch between nurses' skills and job demands creates a work environment that fosters effective performance and job satisfaction, ultimately lowering turnover intention rates.

Administrators need to identify the job demands perpetuating turnover intentions to inform strategies that mitigate turnover. Lyons and Bandura (2021) studied strategies to determine employees' turnover intentions. The researchers concluded that there had been little research focused on the issue of reducing or preventing turnover in hospital

settings, and 55% of the participating doctors were contemplating other job opportunities, impacting job satisfaction. Recognizing and addressing job demands contributing to turnover intentions is crucial for creating a work environment that fosters job satisfaction, ultimately reducing turnover rates.

Nurse Shortages

The scarcity of nurses presents a notable challenge to the healthcare sector. In 2018, experts projected that nurse shortages posed a considerable threat and would continue as a problem for many years (Kingma, 2018). From 2020 to 2021, RNs decreased by 100,000 in the United States (Bae, 2023). By 2033 over 1 million nurses will retire. In 2018, the nursing turnover rate reached a concerning high of 27%, driven by factors such as burnout, job dissatisfaction, and staffing shortages (Ackerson & Stiles,2015). This turnover rate was not only detrimental to the continuity of care but also imposed significant financial burdens on hospitals. It was estimated that the associated costs ranged from $5.13 million to $7.86 million annually for hospitals, encompassing expenses related to recruitment, training, and lost productivity (Wei et al., 2018). There is a rush for hospital leaders to act fast due to nurses being overworked, underpaid, and undervalued, which could cause a surge in turnover rates. To mitigate this risk, nursing leaders should prioritize job satisfaction, reduce burnout, and promote work-life balance by investing in nursing jobs, education, and safety and leveraging technology to extend nursing care virtually. With the high rate of nurse shortages, hospital leaders need to find practical risks to mitigate the risk of losing

current nurse employees.

Faculty Mentoring and Coaching Programs

Mentoring and coaching programs are essential in developing nurses' professional growth. Mentoring programs provide opportunities for workplace learning for nurses throughout their careers, such as nurse education, preceptorship, staff development, or clinical supervision (Tuomikoski et al., 2020). Mentoring programs can enhance teaching skills and improve the overall quality of education. The programs may facilitate a structured framework and increase the impact of patient care (Spinelli et al., 2019). A nurse mentoring program can help alleviate stress, burnout, or job dissatisfaction, contributing to high turnover rates.

Nurse Job Satisfaction

Nurse job satisfaction plays a crucial role in maintaining a high standard of patient care and the overall effectiveness of the healthcare system. Job satisfaction is a person's positive or negative reaction towards their job (Scandura & Meuser, 2022). The relation between job satisfaction and burnout is when burnout increases, job satisfaction decreases (Gonderen & Yucens, 2020). Studies have demonstrated that satisfied nurses are more likely to provide quality care, exhibit a strong commitment to their roles, and experience lower levels of burnout (Gonderen & Yucens, 2020). Tong et al. (2020) indicated that supportive work environments, adequate staffing, and professional development opportunities contribute to nurse job satisfaction.

Evidence-Based Practice

Evidence-based practice (EBP) integrates the best available evidence with clinical expertise and patient preferences, achieving better patient outcomes, increased patient satisfaction, and reduced healthcare costs. Ramos‐Morcillo et al. (2015) stated that nurses' EBP interventions have proven effective. Patient education and empowerment can provide appropriate education, positively impacting their health outcomes by involving them in decision-making. Incorporating technology into nursing practice, such as electronic health records, telemedicine, and mobile health applications, has shown promising results in improving efficiency and patient care. Emotional support and compassionate communication positively influence patient outcomes and satisfaction.

Nurse Burnout

The consequences of nurse burnout and stress include low morale, high levels of mental fatigue, absenteeism, and exhaustion (Lönnqvist et al., 2013). Nurse burnout affects patient care, as higher worker caseloads correlate to increased burnout and job dissatisfaction. More than 40% of hospital nurses would leave their jobs due to burnout (Lönnqvist et al., 2013). Burnout is associated with adverse health outcomes for nurses, such as psychological distress, somatic complaints, and alcohol and drug abuse (Vahey et al., 2004). Burnout can also affect organizational-related outcomes: patient safety, quality of care, nurses' organizational commitment, nurse productivity, and patient satisfaction (Jun et al., 2021). Recognizing the consequences of nurse burnout

emphasizes the urgent need for comprehensive strategies that address individual well-being and organizational dynamics. In doing so, healthcare institutions can mitigate these adverse effects and foster a healthier, more sustainable work environment for nurses, thus improving patient outcomes.

Nurses undergoing burnout often experience diminished personal accomplishment and job satisfaction. The job-related stressors nurses deal with may eventually propel them to leave their positions, thus causing potential disruptions in patient care. The loss of a nurse causes significant financial ramifications, ranging from $11,000 to $90,000 per nurse, with up to $8.5 million in associated more comprehensive costs (e.g., unfilled vacancies, agency nurse costs, patient deferment, training and orientations; Salem et al., 2016). The high rate of nurses experiencing burnout marks the importance of nurse leadership to address and mitigate burnout patterns proactively. Burnout and work stress are correlated in nurse retention rates.

Consequences of Excessive Workloads

Patient safety is critical to ensuring quality nursing care and the overall healthcare system. Paolo et al. (2017) described several consequences of excessive workloads, including stress and burnout, contributing to increased medical errors. Quality of work life (QWL), a complex, multidimensional, generic concept (Hsu & Kernohan, 2006), is compromised when nurses experience higher workloads, widening the margin for medical mishaps. The correlation between nursing workload and patient care is undeniable, as heavy workloads affect decision-making processes. Augmenting

the number of nursing staff can significantly mitigate the risk of patient care mishaps (Ali, 2016).

Nurses are responsible for providing quality patient care yet often overlook their QWL responsibility (Hsu & Kernohan, 2006). Studies have linked excessive workloads to hypertension, cardiovascular events, metabolic syndromes, and work-related accidents (Kamardeen, 2022). Overworked nurses face both mental and physical harm due to these demanding workloads. Mitigation strategies include mindfulness, stress management, communication skills training, exercise programs and self-care efforts, and participation in small-group programs that promote community, connectedness, and meaning (West et al., 2018). For medicine to fulfill its mission for patients and public health, all stakeholders in healthcare must work together to develop and implement effective remedies (West et al., 2018). Addressing the existence and cause and then mitigating the occurrence of excessive workloads will benefit the effectiveness of healthcare systems. It is imperative to collaborate with various healthcare stakeholders to develop and implement strategies that will remedy the instances of excessive workloads, ensuring that nurses can continue to fulfill their roles of providing high-quality patient care and maintaining a healthy QWL in the workplace.

Individual-Directed Approaches

Individual-directed approaches are a great tool to help nurses decrease burnout. A few techniques can help decrease nurse burnout and increase retention. Individual approaches include mindful practices, confidence skills, communication skills, exercise,

or a combination. Nurses who did not seek help and attempt to address burnout alone, tend to experience higher stress levels (Dos Santos, 2020). Nurses must find support when facing burnout. By embracing individual-directed strategies, nurses can enhance their resilience across four domains – emotional, mental, spiritual, and physical. Promoting these individual-directed approaches can help mitigate burnout among nurses, foster overall well-being, and, ultimately, improve patient health outcomes and experiences.

Stress management is an essential tool for nurses to reduce burnout. Nurses can take responsibility for their stress management by utilizing strategies including stress management classes, individual therapy, practicing mindfulness, and physical exercise.

Mindfulness, a self-directed strategy of calming and relaxing the mind, connects the mind to the body and can reduce stress and anxiety (Klevos & Ezuddin, 2018). Six studies on mindfulness training in healthcare professionals spanning 2 to 8 weeks demonstrated a significant decrease in nurse burnout (Spinelli et al., 2019). Physical exercise has proven effective in reducing depression and increasing self-confidence (Knapen et al., 2015). Employing stress management tools benefits individual nurses and can contribute to a more resilient and satisfied nursing workforce (Knapen et al., 2015). Prioritizing stress management through these approaches is pivotal for mitigating nurse burnout. Both individual and organizational strategies play crucial roles in ensuring the well-being of nurses and, by extension, the quality of patient care.

Nursing leaders can implement strategies to enhance QWL among nurses. These

strategies require nursing leaders to reduce work hours and provide a flexible provider schedule (Shanafelt et al., 2016). Reducing work hours acknowledges the importance of a balanced work-life dynamic, allowing nurses to allocate more time to personal life and self-care.

A flexible provider schedule provides adaptability, enabling nurses to address personal needs without compromising their professional commitments. Adopting such strategies demonstrates leadership's commitment to the well-being of nursing staff. By acknowledging the significance of work-life balance, healthcare leaders contribute to a positive work environment, potentially reducing burnout and enhancing overall job satisfaction.

Strategies for Promoting Nurse Well-Being

The promotion of nurse well-being can mitigate employee retention among organizations (Prakash & Philimis, 2022). Companies invest time and money in training individuals to understand the culture, expecting that trained individuals will contribute to company success by staying within the organization (Warrick, 2017). To benefit from the investments made in training, nurses must maintain well-being. This enhances their ability to fulfill their work duties and contributes significantly to employee retention. Prioritizing strategies that foster nurse well-being aligns with organizational goals and creates a supportive environment that enhances retention and, consequently, the organization's overall success.

Managers need help to retain hard-working employees due to economic

competitiveness. To retain nurses, nursing leaders need to be attentive to nurses' mental health and provide access to counseling (Kitamura & Nakai, 2023). Nursing leaders must also focus on nurses having time outside work to find relaxing activities. Leadership must interview nurses to ensure they have time to relax outside of work. Healthcare leaders should pay attention to increased workloads and overtime.

Healthcare Leadership

Nursing leaders are essential in establishing a safe and healthy work environment for nurses, primarily focusing on building trust to mitigate nurse turnover. Eric Erickson's eight-step theory emphasizes the fundamentals in healthcare settings to reduce nurse turnover (as cited in Maree, 2022). Effective leaders prioritize creating an environment that encourages nurse growth, motivation, collaboration, and coordination (National Academy of Medicine, 2019). The five key elements are staying calm, communicating effectively, collaborating, coordinating, and providing support to help leaders guide and lead their teams in high-stress environments such as hospitals. Building trust is critical for nurse retention, as emphasized by Erickson's theory and these five elements. Proactivity among leaders and nurturing an environment conducive to trust-building and growth is vital to nurse retention. Healthcare leaders who prioritize and embody these essential leadership elements are instrumental in creating a supportive workplace in challenging healthcare environments.

Nurse Recruitment Program

Traditionally, there are three main ways to become a nurse. The first and most

popular is attending nursing school and obtaining a bachelor's degree. Another option is to obtain an associate degree in nursing. Finally, students who have earned a high school diploma can enroll in a vocational school, earn a nursing certificate, and become licensed vocational nurses. In the future, nurses may not need to attend a four-year degree program, which can save time and speed up recruitment. A future nurse can attend a 2-year nursing program for a lower cost and less time in school.

A nurse recruitment program, also known as The Student Leadership Track (SLT) program, proposes a solution to improve nurse retention rates for Certified Registered Nurse Anesthetist (CRNA) education faculty (Garey, 2007). The SLT program allows student nurse anesthetists close to graduation to be mentored by a CRNA leader in politics, research, administration, or education over an extended period. This program enables CRNAs to explore effective leadership styles and allows students to promote all areas of CRNA leadership (Mensah, 2024).

This proactive approach not only enhances the skills of future CRNAs but also contributes to improving the recruitment and retention of faculty in nurse anesthesia education, addressing both the immediate challenge of nurse retention and contributing to the long-term sustainability of CRNA education faculty. As the healthcare landscape evolves, initiatives like the SLT program are crucial in fostering leadership skills and ensuring a robust pipeline of qualified educators.

Initiatives to Decrease Nurse Dissatisfaction

A study conducted in 2011 found that nurses who work at hospitals tend to have

higher job dissatisfaction than nurses who work in different environments (McHugh et al., 2011). These work conditions include work hours, work pace, organizational culture, adverse patient outcomes, and administrative obstacles. Other critical factors in nurse dissatisfaction were staffing issues and lack of support (Senek et al., 2020). Nurses have also expressed dissatisfaction with their health benefits. Career ladders, better wages, flexible hours, and better healthcare can decrease nurse dissatisfaction rates. Various complex factors contribute to nurse dissatisfaction, including work-related and personal factors. Addressing these issues is crucial for improving job satisfaction and retaining nursing staff. To tackle these factors influencing nurse dissatisfaction effectively, healthcare leaders can explore strategic initiatives for nurse hiring. By implementing targeted approaches in recruitment, organizations can address specific challenges and create an environment that fosters job satisfaction and retention among nursing staff.

Strategies for Nurse Hiring

The increasing challenge of attracting and retaining nurses necessitates careful consideration and recruitment practices. With the growing demand for nursing professionals, recruiters must hire suitable candidates. According to Piotrowski et al. (2022), 194,000 open nursing positions need to be filled by 2030, and the recent pandemic has led 66% of nurses to contemplate leaving the profession. Effectively addressing this situation requires recruiters and leadership staff to consider strategies that better market the workplace to nursing candidates. Recognizing the escalating

challenge of attracting and retaining nurses, recruiters and leadership staff must carefully consider recruitment practices, such as competitive compensation and attractive benefits, to better market the workplace to nursing candidates.

Compensation emerges as an additional crucial factor, as nurses often express dissatisfaction with adequate pay structures for their work (McHugh et al., 2011). Thus, recruiters should market competitive compensation packages, including tuition reimbursement and higher salaries. Flexible schedules can also promote healthy work-life integration and appeal to nursing prospects. Workplace violence poses a concern across the nursing industry, so recruiters should consider emphasizing workplace safety measures. Implementing these strategies mitigates the threat of nursing shortages by offering a more appealing job opportunity for rising nursing professionals.

Transition

Section 2 included a review of the professional and academic literature and the identified conceptual framework of the job embeddedness theory. Section 2 also included supporting theories: (a) stakeholder theory, (b) PP model and (c) Maslow's hierarchy of needs. As part of the literature review, I researched articles that related to my research topic of reducing nurse retention in healthcare organizations. Section 3 includes a detailed review of (a) research project methodology, (b) project ethics, (c) nature of the project, (d) population, sampling, and participants, (e) data collection activities, (f) interview questions, (g) data organization and analysis techniques, (h) validity, (i) reliability, and (j) trustworthiness.

Section 3: Research Project Methodology

Turnover among bedside registered nurses in the United States was 17.8% compared to Canada nurse retention, which was similar at 17% (Thomas et al., 2022). According to Salem et al. (2016), healthcare leaders should formulate an action plan to reduce the risk of nurse turnover. This section consists of the following subsections: project ethics, nature of the project, participants, interview questions, data collection activities, data collection technique, and data organization technique, reliability, and viability. Nursing leaders can use the results of this study to proactively address the challenges associated with nurse turnover and lay the foundation for a more resilient and satisfied nursing workforce.

Project Ethics

In qualitative studies, researchers explore problems using the participants' perspectives and experiences in providing solutions to the defined business problem in this study. Ethical guidelines are designed to protect the participants from exploitation and harm and will allow participants to withdraw from the studies without penalty (Spinelli et al., 2019). According to Ngozwana (2018), ethical guidelines can lead to ethical dilemmas. In this study, to ensure ethical compliance, participants signed an IRB-approved (09-23-24-1089554) consent form as one of the inclusion criteria. The informed consent ensured participants that the interview is not mandatory and could be stopped at any time. I followed the Belmont Report. These ethics include that the participants would be treated as autonomous agents. My study caused no harm to the

participants. Furthermore, to ensure justice is equal, I did not recruit participants based on different races, ages, and gender. All participants were allowed to withdraw from the interview at any time.

I have added additional strategies to maintain the ethical integrity of this study and protect and inform participants thoroughly. My connection to this topic stems from listening to the challenges faced by RNs working in hospital environments, which shed light on the difficulties in retaining nursing staff. Throughout this study, I did not offer participants any incentives or monetary rewards. The absence of inducements such as gift cards or money will reduce the potential for bias. Before collecting data, I informed the participants of the absence of risks and noninterference with their employment, highlighting the commitment to ethical conduct. I informed participants of their right to inquire about the study's parameters and ask questions. As the study findings become publicly accessible through publication, participants and readers could benefit from the research, gaining a comprehensive understanding of the proposed solution.

In qualitative studies, researchers are ethically responsible for safeguarding the participants' autonomy and privacy and informing them that their data will be confidential (Ngozwana, 2018). The participants, organization, and location were kept confidential. I complied with Walden University’s IRB requirements by encrypting the research data on my laptop and cell phone and deleted the raw digital data that was not encrypted.

According to Yin (2018), proper data storage practices are critical to

maintaining the integrity of the data. This storage and destruction plan demonstrates my commitment to data integrity and commitment to data integrity, ethics compliance, and confidentiality. The steps to protect participant rights align with ethical principles and demonstrate a commitment to upholding confidentiality and the researcher's ethical methods. Ethics in this project will be evidentiary in the nature of the project: both method and design elements.

Nature of the Project

Gog (2015) distinguished qualitative research by using nonnumerical data expressed through words, while quantitative and mixed methods researchers generate and use numeric data. Mixed methods researchers collect and analyze a combination of quantitative and qualitative data. Mixed methods researchers focus on controlled, randomized selection and interpretation of numerical data based on measurement interpretation and statistical processes (Wei et al., 2018). In this study, I focused on identifying strategies for retaining nurses rather than using assumptions and ideas to test hypotheses, so a quantitative research method would not have been inappropriate.

I considered four research designs for a qualitative study on nurse retention strategies in hospital facilities: narrative, phenomenological, ethnography, and pragmatic inquiry (Gog, 2015). Narrative researchers use stories based on participants' lives to find answers to explore problems (Willis et al., 2016), so the narrative design would not have helped identify nurse retention strategies. Phenomenological research would not be useful for identifying successful retention strategies because my focus in

this study is about practical, successful strategies to improve a known business problem, not on the empirical meanings of phenomena for study subjects, which is how Willis et al. (2016) described the application of the phenomenological design. Ethnography research is subjective and involves observing participants' cultures and behaviors in common situations (Hammersley, 2006), but in this study, I required the obtainment of factual evidence, not opinions. I chose a qualitative study with a pragmatic inquiry design to recruit participants who helped me understand nursing leaders' best retention strategies.

Population, Sampling, and Participants

Participants included six participants including nursing leaders in the Midwest United States whom I recruited from my own personal network to discover and understand strategies to reduce hospital nursing turnover rates. To be a part of the study, subjects needed to demonstrate that they previously identified and used successful strategies to retain nursing staff. In this study, successful strategies are defined as those that result in a registered nurse of 15% or better turnover rate. I recruited and interviewed departmental nursing leaders who had a demonstrated success of retaining nurses substantially better than the 2023 national average turnover rate of 18.4%.

Data Collection Activities

I primarily collected the data in a qualitative method study with pragmatic inquiry design. I obtained data by conducting semistructured interviews with six

participants. Researchers who use pragmatic inquiry design may conduct interviews to observe the participants, use open-ended interview questions, collect, review, interpret the data, and develop themes (Yin, 2018). Farooq and de Villiers (2017) believed interviews should be conducted face-to-face with participants in their natural settings to help researchers collect collective data. I conducted the interviews over a phone app called Voice Recording because of the diverse locations of the participants. I recorded all the participants' responses to the interview digitally. I supplemented those findings by examining organizational documents to collect secondary data. I gathered secondary data that was publicly available or that was shared by participants during the interviews. According to Wei et al. (2018), various recording strategies help ensure the data collection process's accuracy, reliability, and validity. The use of audio recordings while conducting interviews helps researchers understand the data accurately by capturing the full context and detail of the participants' experiences

Member checking, a practice where researchers give all participants copies of their own transcribed responses to ensure the data is correct and accurate, and any error confirmation on the reliability and validity of the research. Bernard (2013) stated that recorded interviews help conduct the interviews. I required participants to sign the informed consent and remit to me via e-mail. To ensure accuracy, researchers must consider using multiple data sources (Scandura & Meuser, 2022). I utilized interviews and documents to answer the research questions, as Yates and Leggett (2016) recommended. I conducted semistructured interviews and reviewed the supporting

documents.

Interview Questions

1. What strategies have you used to increase nurse retention in your hospital? For instance, how did you use exit interviews to reduce turnover and burnout?
2. How did you assess the effectiveness of your strategies for improving nurse retention within your hospital?
3. What main obstacles did you encounter when implementing the strategies for improving nurse retention?
4. How did you address those main obstacles to implementing the strategies for improving nurse retention?
5. What initiatives have internal stakeholders provided to improve nurse retention in your hospital?
6. How did you succeed in garnering team support to make changes for the better regarding nurse retention?
7. How have the nurse retention strategies you implemented played a role in reducing nurse burnout within your hospital?
8. How did your nurse retention strategies affect the promotion of a positive work-life balance for your nurses?
9. What other information would you like to add regarding nurse retention in your hospital?

Data Organization and Analysis Techniques

According to Anyan (2013), research data integrity requires proper handling of all transcribed interview recordings and all backup copies of data. During field data collection phase, I video recorded the interview questions and the participants' responses on the computer application. To maintain confidentiality and maintain correct order, I assigned alphanumeric codes (e.g., P1, P2, and P3) to identify participants (Gibson et al., 2013). After I collected my data, I coded the data to facilitate data organization and data analysis, which helped me ensure the accuracy and confidentiality of the data.

In this qualitative study, I analyzed the data through semistructured interviews and data collection with nurse leaders. Joslin and Müller (2016) identified four types of data triangulation and methodological triangulation. Triangulation for this qualitative case study involved combining information for research purposes. According to De Massis and Kotlar (2014), in methodological triangulation, researchers can combine findings from various data sources to better understand a phenomenon. I used methodological triangulation in this qualitative method study with pragmatic inquiry design to facilitate richness of data and enhanced study credibility and depth. By using the stakeholder theory as my lens for exploring this important topic, I was able to gather rich data to support study reliability and validity.

Reliability and Validity

Reliability

In qualitative research scholars require consistency and repeatability of conclusions to gain credibility, an essence of reliability (Yin, 2018). Yin (2018) outlined the goal of developing a research study with minimal biases and errors. To achieve this true reliability, Yin (2018) proposed two techniques: protocol and the study database.

To increase the dependability of my study, I first increased the trustworthiness of this study. This allowed transferability. Trustworthiness is a requirement for an effective study. Techniques utilized in this pragmatic inquiry design study–such as member checking, data saturation, and triangulation with multiple data sources, which increased the study's trustworthiness.

Validity

Validity strategies are important for any research study. Yin (2018) identified three types of validity tests to strengthen pragmatic inquiry design study: internal, external, and construct. Trustworthiness is essential in qualitative research integrity. Marufu et al. (2021) divided trustworthiness into several criteria: credibility, dependability, confirmability, and transferability. Rich data, data analysis, member checking, mitigation of investigator and subject biases, and the like are the bases of study trustworthiness (Marufu et al., 2021). Yin (2018) described the pragmatic inquiry design protocol as consisting of four sections: an overview of the pragmatic inquiry

design study, data collection procedures, protocol questions, and an outline. To increase the credibility of the case study and provide clarity for fellow researchers to follow an audit trail, I documented the process that I used.

I employed two data sources to facilitate data saturation, increase internal validity, and strengthen reliability. Standardized interview questions will help participant understanding. For external validity, I used *what, how,* and *why* questions for the semistructured interviews. Validity is the state of being justifiable, relevant, meaningful, logical, and adhering to the principles of being sound, just, and well founded (Yin, 2018). I achieved validity by using various data sources of evidence that match the concepts with the original objectives of this study. Obtaining no new information from additional data sources is data saturation, which is crucial for ensuring the reliability of qualitative method study with pragmatic inquiry design (Fusch et al., 2018). For this study, I established confirmability through data saturation. Researchers can gain credibility with the participants by developing trust and rapport with the profound responses to the interview questions (Pearlson et al., 2019). I achieved transferability by utilizing member checking. I established credibility, dependability, confirmability, and transferability as these elements are the foundational tenets researchers use to establish study trustworthiness and credibility.

Transition

In Section 3, I discussed the difference between reliability and validity practices and principles, data organization and analysis techniques, data collection activities

population, sampling, and participants and interview questions. In Section 4, I will begin with a discussion of the presentation of the findings. Then, I will explain the application to professional practice, implications for social change, recommendations for action, suggestions for further research, reflections, and an overall conclusion.

Section 4: Findings and Conclusions

Presentation of Findings

The purpose of this qualitative, pragmatic case study was to explore strategies used by nursing leaders in hospitals to improve nurse retention. Six senior nurse leaders responsible for nurse management in hospitals across the United States participated in the study. Each leader responded to 10 questions that focused on nurse retention within their organizations. The research question for this study was as follows: What effective strategies do some nursing leaders in the Midwest United States use to improve nurse retention? The topics covered included challenges in implementing retention strategies, budget constraints, strategies for preventing nurse burnout, and promoting a positive work-life balance.

Data collection began with video-phone interviews using a phone app conducted with six participants. I transcribed the data with Otter.ai. Using thematic analysis, I examined the interview responses to identify recurring codes and themes. The six major themes that emerged from the data analysis included (a) onboarding improvements, (b) competitive pay, (c) staffing, (d) professional development and staff recognition, (e) administrative time, and (f) stakeholder support.

Through qualitative data analysis, I identified six key themes for nurse retention strategies, including offering competitive pay, improving the onboarding process, requesting additional staffing, recognizing staff contributions, providing professional development opportunities, and allocating administrative time for nurses. Six

participants provided informed consent via email and responded to 10 open-ended interview questions about their nurse retention strategies and experiences within their respective military healthcare organizations. I transcribed the interviews and identified recurring themes throughout the transcripts.

Thematic Analysis and Their Support in the Literature

In this section, I share the themes from the thematic analysis while providing supporting references from the literature. I created a table with each theme, detailing their respective quotation counts and including participants' quotes. Within the table, I included references, representing the frequency with which each code appeared in the quotations. The primary focus is on the themes I identified, while the secondary details include the general codes that were combined to form each theme. Themes are presented in the order they emerged during the analysis rather than based on their frequency of mention by participants, as shown in Table 1.

Table 1

Frequency of Theme-Indicator Codes

Major/Minor	Count of code
Effective communication	15
Recognition	10
Relationships	12
Pay raises	6
Flexible scheduling	7

Theme 1: Onboarding Process Improvement

Retention begins with the initial applicant contact during recruitment. Recruitment is challenging because of the high demand for and limited pool of qualified nurses. Some participants suggested using a recruitment coordinator who remains engaged throughout the process as an effective strategy. One leader emphasized that recruitment coordinators were instrumental in attracting and retaining nurses. Another participant stated that providing financial incentives such as location allowances, compensation for on-call shifts, and travel reimbursement for interviews helped are helpful for retention.

Nurses who resigned within a year often cited unclear roles during the onboarding process. Suggestions such as pairing new hires with mentors and sending welcome letters from CEOs prior to their start date were mentioned as ways to improve retention from the outset. A participant recommended that ongoing communication, especially during the first 180 days, is essential to addressing concerns early. Successful onboarding practices from other healthcare facilities included pairing new hires with mentors for tours, answering questions, and providing administrative support. As stated by P3, “I also developed a new plan for the onboarding process to help the hiring process. The onboarding process must be precise and clear. The new process has a checklist, and expectations are listed on their onboarding packet checklist.” The onboarding process is a great tool for leaders to find effective strategies to hire the right candidate and retain them.

The stakeholder theory indicates the importance of considering and addressing the interests and concerns of all stakeholders who are affected by or can influence an organization's actions. In the context of nursing and healthcare, stakeholders include new hires, existing staff, leadership, patients, and the broader organization. Applying stakeholder theory to the onboarding process highlights the mutual benefits of aligning organizational practices with the needs and expectations of all involved parties.

Hospitals that prioritize these areas build a more sustainable and engaged nursing workforce, which ultimately leads to improved patient care and reduced turnover rates. My literature review connects to the six themes. The theme of fostering growth and engagement. The improvement of the onboarding process and providing opportunities for professional development ensure that nurses feel engaged and invested in their roles. A strong onboarding experience helps new nurses integrate into the team more effectively, while continued professional growth opportunities can offer them a clear path for career advancement. Onboarding processes were one of the themes discussed in my study. Recognizing staff contributions ties directly into retention, as it shows that the organization values its nurses. This recognition, paired with a supportive work environment fostered by competitive pay and career development opportunities, creates a positive culture where nurses feel motivated to stay and contribute.

Theme 2: Competitive Pay

All participants highlighted the importance of competitive pay for job satisfaction and retention. Asghari et al. (2020) found that financial incentives are crucial in the

recruitment and retention of healthcare providers. One participant stated that flexible work hours and manageable call schedules were identified as appealing features that help retain staff. Both objective and subjective factors, such as salary comparison with peers and perceived fairness based on contribution, influenced job satisfaction. Another participant stated that higher incomes were consistently linked to greater satisfaction and lower turnover intentions. P5 shared that paying well and having good benefits with a work life balance can help retain nurses.

Salary caps and limitations on financial incentives make it difficult to retain qualified nurses (Gray & Grefer, 2012). Pay is important to nurses. They tend to work long hours, which can impact which hospital they choose to work at. Hospital leaders should be aware of pay scales in local areas to be competitive to ensure the nurses will stay. Leaders need to stay competitive in their pay to retain nurses. With multiple career opportunities, pay is one of the most important aspects to hire and retain nurses. P2 made a strong point in competitive pay: "So, we had to develop a pay scale that was comparable to the other hospitals in the local area. Not to mention the pay scale for traveling nurses. We cannot compete with that." P5 discussed how they cannot compete with the other hospitals, which can be a huge issue for nurse retention. Pay increase and incentives can also help increase nurse staffing.

Theme 3: Staffing

Staffing shortages and burnout were major concerns, especially following the COVID-19 pandemic. The participants noted that inadequate staffing leads to increased

workloads, medical errors, and diminished patient safety (Oppel et al., 2017). Burnout was recognized as a key factor in nurse turnover, with significant financial implications for healthcare organizations.

P3 stated,

> Allowing people to definitely practice at the upper end of their scope or completely within their scope so that they have more autonomy and feel like they're a more valuable member of the team and can provide more benefits to patients and helping out each other.

P1 stated,

> You know, they've been very well received by members that had things come up in their family life and their personal lives. And I would have to say that that's allowed them the flexibility to be able to prioritize and then come back to the monthly sessions with a little bit more energy and buy in because they knew that we cared about them.

Flexible scheduling for nurses can help retain nurses and allow them the opportunity to want to stay with the organization.

Assigning nonnursing staff to handle administrative tasks and optimizing workload distribution were recommended strategies to address burnout. Staffing was an important theme that was discussed multiple times with participants. P2 used the exit interview to understand why nurses were leaving. P3 also stated that using flexible schedules to help staffing retain retention. Flexible schedules allowed the participating

members to take time off to attend to family needs. P3 thought flexible scheduling helped with nurses who wanted to stay longer at their current position.

Theme 4: Professional Development and Staff Recognition

Participants emphasized the importance of professional development in nurse retention. Budget cuts and staffing shortages may impact the availability and opportunities for nurses to attend conferences or pursue further education. Leaders agreed that supporting ongoing learning is vital for reducing burnout and maintaining high job satisfaction. Professional development helps enhance leadership skills and improves the quality of care delivered. Recognizing staff contributions and engaging them in decision-making were also highlighted as effective retention strategies. Leaders who seek input, mentor staff, and recognize their accomplishments were shown to reduce burnout and improve job satisfaction. P6 mentioned how employees like different recognition and discussed how celebrating the small things, such as recognizing employees for doing a job well done is one way some employees like to be recognized while others just like a private *thank you* or a note. P6 also mentioned how it is important to understand the staff and to know what the employees want for recognition to stay motivated and feel valued.

P4 discussed one of the challenges that they had is when they would have nurses go back to school to get advanced degrees, and they felt unable to be able to find a way to keep the nurses. Rewards are important to some people. Some nurses feel the need to be recognized and awarded for their hard work. There are hospital awards that are given to help their staff feel important and validate their work. P3 stated, “I also made sure to

celebrate small wins to help people feel appreciated.” Staff recognition is an important tool for recognition and to help with increase in nurse retention.

The stakeholder theory, professional development and staff recognition are vital components of addressing stakeholder needs in nurse retention. The literature highlighted the interconnectedness of leadership practices, nurse satisfaction, and organizational success, aligning with the theory's emphasis on balancing diverse interests to achieve positive outcomes. Adequate staffing is essential for nurses to decrease burnout and increase morale. Dinibutun (2020) highlighted the importance of reducing administrative burdens and ensuring appropriate staffing levels to alleviate workload pressure on nurses.

Nurses, as critical stakeholders, value opportunities for professional growth. Budget cuts and staffing shortages, which limit these opportunities, create a disconnect between stakeholder expectations and organizational practices. Stakeholder theory indicates that organizations must prioritize professional development to align with nurses' aspirations and improve job

Theme 5: Administrative Time

Allocating administrative time for nurses to manage their workload effectively and engage in professional development is another important retention strategy. The American Medical Association recommends several strategies to mitigate burnout, including minimizing redundancy and interruptions, streamlining data management, and allocating protected time for staff (Berg, 2021). Providing nurses with dedicated time for

administrative tasks and professional development can significantly enhance their well-being and reduce turnover.

P1 stated,

> I know for one nurse, we let her for a year come in only on go greens as long as she remained green, and just so that way she could kind of start balancing this new job and a lot of expectations and family stuff as well, and just kind of relaying that across the board to let everybody know that, hey, you know, stuff comes up.

Flexible work hours and the ability to adjust schedules were also identified as important factors for improving nurse satisfaction (Shanafelt et al., 2016). One participant described a strategy where nurses were given a flexible schedule, which allowed the member not to report to work on the regular schedule because they were having family issues which needed to be balanced with work. This helped the member with job burnout. The participant also stated that they ensured other members were given the same respect and could have a flexible schedule if they needed to. Flexible scheduling and administrative time are a key tool leaders try to implement. P5 mentioned, “Sometimes it's hard to give people the time that they need, especially in, you know, settings where nurses are necessary. So sometimes you can't, you can't always help them with their work life balance, which upsets them.”

When leaders are not able to give time to their staff, there are other ways to help balance their schedules. P5 shared their concern of not being able to give their staff the

time off they need. They mentioned one of the things that they always tried to do was find a way to give people the time off they wanted so they could all take their vacations when they wanted to, to try to find someone to cover for them. Leaders who understand their limitations with time off and increase administrative time can find better opportunities to support their staff using a different retentive strategy.

Theme 6: Stakeholder Support

The study participants emphasized the importance of stakeholder support for successful nurse retention strategies. Collaboration with healthcare leaders and nursing leaders was critical in securing necessary resources, including staff and financial incentives. Stakeholders in hospitals, such as chief nursing officers and management, have a critical role in shaping recruitment and retention efforts.

Stakeholders are important to the hospital's setting. The work environment significantly impacts overall job satisfaction. The work environment encompasses the physical, psychosocial, and social characteristics of an organizational setting, which helps support the overall environment for hospitals. In nursing, values, attitudes, and ethical stances are a few key practices to factor in when creating a positive and safe work environment. Poor work conditions can induce stress. A positive work environment is crucial for the well-being of employees.

P6 said,

> We made a I don't know what you want to call it, like a quiet room, and so the nurses could go and, you know, sit or cry or, you know, just kind of zone out for a

> little bit that was actually very, very helpful, too, and I think that that was helpful in reducing burnout.

Raziq and Maulabakhsh (2015) stated that to increase job efficiency, the organization must identify factors that attend to the needs of its employees and promote a pleasant working environment. When nurses can cultivate a positive professional identity in their roles, they tend to demonstrate dedication and enthusiasm for their work, which can help in reducing dissatisfaction arising from a challenging work environment. If stakeholders can understand that a positive work environment is beneficial, then they will have a positive psychological outcome for nurses in the organization dealing with the average customer. According to Kabeel and Eisa (2017), professional identity can create a sense of belonging to the profession and increase job satisfaction. P3 discussed how internal stakeholders were important to leadership development programs for nurses, offering wellness initiatives like mental health support, and creating more career advancement opportunities. Nurses feel valued and supported in their roles, which leads to better retention. Internal stakeholders can play a valuable role in nurse retention and can help the work environment become a more positive environment.

Internal stakeholders, including leadership and peers, directly influence the work environment, tying to the theme of engaging stakeholders for retention and job satisfaction. When leadership actively involves stakeholders in decisions about wellness initiatives, professional growth, and mental health support, they create a workplace where nurses feel supported, valued, and motivated to stay. Additionally, fostering collaboration

among internal stakeholders strengthens communication, builds a sense of community, and aligns organizational goals, which enhances teamwork and overall job satisfaction. This collective effort not only reduces turnover but also promotes a culture of mutual respect and shared responsibility for success.

Reducing burnout is another theme that was recognized in my study based off of the interviews. Burnout can cause a reduction in nurse retention. The stakeholder theory pertains to the idea that the primary stakeholder in nurse retention are the nurses themselves. They seek job satisfaction, professional growth, recognition, competitive compensation, and a supportive work environment. Addressing these needs helps to foster engagement. The participants recognized the importance of nurses being stakeholders in their organization. The stakeholder theme also recognizes the importance of hospital leaders as well. Hospital administrators and leadership are stakeholders who are concerned with reducing turnover costs, maintaining quality care, and ensuring operational efficiency. By understanding the needs of nurses and aligning them with the organization's goals, management can develop strategies that both enhance nurse retention and improve overall organizational performance which aligns with the themes collected by the participants.

Themes of This Study Related to Literature Review and Conceptual Framework

Hospital leaders who work in accordance with the findings/themes of this study, can build a more sustainable and engaged nursing workforce, which ultimately leads to improved patient care and reduced turnover rates. Within my study, the six themes

identified closely relate to the literature review. In the literature review, I discussed the different theories with stakeholder theory being the theory used for my study. The six themes I identified are each confirmatory to the themes that I uncovered during my literature review.

The improvement of the onboarding process and providing opportunities for professional development support that nurses feel engaged and invested in their roles. Strong onboarding experiences help new nurses integrate into the team more effectively, while continued professional growth opportunities can foster a clear path for career advancement. Onboarding processes were one of the themes discussed in my study. Recognizing staff contributions ties directly into retention, as it shows that the organization values its nurses. This recognition, paired with a supportive work environment fostered by competitive pay and career development opportunities, creates a positive culture where nurses feel motivated to stay and contribute.

Reducing burnout is another theme that was recognized in my study based off the interviews. Burnout can cause a reduction in nurse retention. Having administrative time to allow nurses to have time to do any administrative work or training opportunities can help reduce burnout. The stakeholder theory reinforces the idea that the primary stakeholders in nurse retention are the nurses themselves. Nurses seek job satisfaction, professional growth, recognition, competitive compensation, and a supportive work environment. Addressing these needs helps to foster engagement and relates to the theme of recognition. The participants recognized the importance of nurses being stakeholders

in their organization. The stakeholder theme also pertains to the importance of hospital leaders as well.

Hospital administrators and other employees are stakeholders who can make positive changes which result in reducing turnover costs, maintaining quality care, and ensuring operational efficiency. Another theme addressed by the participants is competitive pay. The literature review also included this theme by describing the impact of low pay resulting in higher nurse turnover. By understanding the needs of nurses and aligning them with the organizational goals, hospital leaders can develop strategies that both enhance nurse retention and improve overall organizational performance, which were themes clearly explicated by participants.

Implications for Social Change

The positive societal impacts that result from improving nurse retention strategies within healthcare organizations can have a huge advantage. A more stable and satisfied workforce is enhanced when nurse retention is taken into consideration. The improved patient care in retaining experienced and skilled nurses contributes to higher quality and continuity of care, ultimately improving patient outcomes and satisfaction. Consistent staffing reduces medical errors, fosters better communication, and strengthens nurse-patient relationships which can also help with reduced healthcare costs.

High turnover is costly because recruitment, training, and onboarding of new nurses cost the hospital additional money. Additionally, high turnover disrupts team cohesion, increases workload for remaining staff, and can negatively impact patient care

quality due to inconsistent staffing and loss of institutional knowledge. Effective retention strategies not only lower these costs but also enhance team stability, boost staff morale, and improve continuity of care. By reducing turnover, healthcare organizations can allocate resources more efficiently, invest in long-term staff development, and ultimately contribute to better healthcare delivery, patient satisfaction, and affordability.

Retaining nurses contributes to improved work-life balance, reduced burnout, and greater job satisfaction. Satisfied and healthy nurses are better equipped to provide compassionate care, reducing staff absenteeism and turnover rates. Retaining nurses ensures that healthcare facilities are sufficiently staffed, reducing wait times and increasing appointment availability. This is especially critical in underserved or rural areas where healthcare access may already be limited. A more stable nursing workforce leads to a more resilient and reliable healthcare system, which benefits society by ensuring the availability of high-quality care during crises, such as pandemics or public health emergencies. Leaders and policymakers who understand the effects of nurse retention can drive social change through systemic improvements that benefit both healthcare workers.

Recommendations for Further Research

I identified a few limitations during my research. Researchers identify potential study weaknesses, which are limitations out of the researchers' control (Theofanidis & Fountouki, 2018). One limitation with my interviews was the inability to interview all the nursing leaders or hospital administrators responsible for managing nurses in the

hospitals. All my participants were nursing leaders. A second limitation was the amount of time available for interviews, which may have precluded the revelation of additional information. The final limitation was the inability to conduct interviews in person because of interviewing participants in different locations, which is the reasoning video interviewing was used.

All six interviews were conducted using an app that allows video and voice recording which may have limited my ability to build genuine rapport. The lack of depth with telephonic video interviews may have also created difficulty in establishing a lasting impression. Future researchers should include personnel in all hospital departments. Different hospital personnel may have additional nurse retention strategies or experience with nurse turnover.

Reflections

I started this DBA journey believing that it would be a simple process and that I had a good idea on how to become a doctorate student. Walden's DBA program has been the most challenging program I have experienced, and I was not expecting it to take over 4 years to complete this degree. The faculty has high expectations of their students and ensured their students were not taking any short cuts. During this journey, I left active duty, moved twice, got married, started a new management job, found out I was pregnant with a baby girl, and went on too many vacations. There were many times that I have had issues with time management and making numerous revisions to my work. I have learned

so much and I am so appreciative of the attention to detail and support from the Walden DBA faculty.

I believe my findings can assist nurse leaders with new strategies and best practices that are not currently being implemented throughout many hospitals. My study has helped me grow academically and helped me to push myself to become a better student, leader, and supporter. My research on nurse retention can be beneficial to nurse leaders, nurses, administrators, and healthcare beneficiaries throughout the healthcare hospital systems

Conclusion

The findings of this study indicated that active involvement by nursing leaders may significantly influence nurse turnover intentions, reduce burnout, and enhance nurse job satisfaction by fostering a deeper understanding of the connection between nurse well-being and job satisfaction. Integrating a nurse's work-life balance into healthcare workforce planning is critical for improving retention and hospital organizational effectiveness. The experiences shared by the six nursing leaders interviewed for this study highlighted both successful nurse retention strategies and key challenges within their respective organizations.

A consistent theme throughout the interviews was the importance of promoting a positive work-life balance to mitigate burnout. The participants emphasized that healthcare institutions should prioritize the regular assessment of nurse well-being as a key performance metric. High-level organizational leadership is essential for driving

progress in these areas, ensuring that nurse well-being is not only acknowledged but actively supported as a strategic priority for healthcare organizations.

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Appendix: Interview Protocol

What Will I Do	What Will I Say
● **Watch for verbal cues** ● **Paraphrase** ● **Clarify any unclear questions**	1. What strategies have you used to increase nurse retention in your hospital? For instance, how did you use exit interviews to reduce turnover and burnout? 2. How did you assess the effectiveness of your strategies for improving nurse retention within your hospital? 3. What main obstacles did you encounter when implementing the strategies for improving nurse retention? 4. How did you address those main obstacles to implementing the strategies for improving nurse retention? 5. What initiatives have internal stakeholders provided to improve nurse retention in your hospital? 6. How did you succeed in garnering team support to make changes for the better regarding nurse retention? 7. How have the nurse retention strategies you implemented played a role in reducing nurse burnout within your hospital? 8. How did your nurse retention strategies affect the promotion of a positive work-life balance for your

	nurses? **9.** What other information would you like to add regarding nurse retention in your hospital?
I will be sending you the transcript and recording of your interview within the next week for you to review. Please let me know of any transcription errors that you discover. Once again, thank you so much for joining and participating in this interview.	