

2019

# Strategies Nurse Managers Use to Reduce Voluntary Turnover of New Registered Nurses

Ayanfemi M. Ayanwale  
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# Walden University

College of Management and Technology

This is to certify that the doctoral study by

Ayanfemi Martins Ayanwale

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2019

Abstract

Strategies Nurse Managers Use to Reduce Voluntary Turnover of New Registered Nurses

by

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MBA/MS, University of Maryland, 2013

BS, Southern Illinois University, 2011

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

April 2019

## Abstract

Employee voluntary turnover is a management problem that impacts the strategic sustainability goals of health care organizations. Thirty-three percent of newly qualified graduate registered nurses (RNs) in the United States leave their profession within the first year of employment. As a result, health care organizations pay over \$85,000 per nurse and up to \$6.4 million annually to replace RNs in hospitals with more than 600 beds. The purpose of this single case study was to explore strategies nurse managers used to reduce voluntary turnover of RNs. The study population comprised 5 nurse managers from a hospital in Texas, United States. The conceptual framework included Herzberg's 2-factor theory and Maslow's hierarchy of needs. The data collection process included semistructured, face-to-face interviews and review of organizational documents. The data analysis process included thematic and matrix coding queries and keyword clustering. Yin's 5-step process of data analysis was used to identify 3 themes: job satisfaction, leadership support, and training and development. The implications of this study for social change include improvements in the quality of patient care and increased employment opportunities in health care organizations. An increase in economic growth may result in the stabilization of health care organizations' competitive compensation and opportunities to reinvest in the communities' educational programs, health, and wellness.

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## Dedication

Over the course of completing the DBA degree and study, my family and I encountered a life-altering event. There was no way I would have been able to achieve this task without the people mentioned below who have stood beside me during the ups and down of life-changing events. I dedicate this doctoral study, first and foremost to God, and my family—my wife Cecilia and my four children, Damilola, Sylvester, Bolanle, and Abiola. Thank you for your patience with me. The five of you have always supported me in everything I have tried to accomplish, this venture being no different. Damilola, Sylvester, Bolanle, I hope that I have provided an example of the persistence and dedication needed to accomplish your goals. Also, to my mother Segilade, father Albert, and sister Margaret & Tundu. All of you guided me in the right direction and set me on the path in life that I am currently on; I cannot thank you enough for your love. Next, are the Aderohunmu's, Ojo's, and others who have contributed immensely to my progress, you are one of a kind! Thank you for your unconditional love and support. Blood is not the only way to develop a bond, all of you have proven that. I appreciate the brotherhood we have formed over the years. Your trust and friendship have become a staple in my life. Thank you all for your motivating support for me during this journey.

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## Section 1: Foundation of the Study

Approximately 20% of newly qualified graduate nurses in the United States leave the profession during their first year of employment (Kovner, Brewer, Fatehi, & Jun 2014). Collectively, 80% of new nurses experience transition and work-related dissatisfaction challenges that have resulted in the number of available employment opportunities in the medical profession in the United States (Zhang, Wu, Fang, Zhang, & Wong, 2017). A few challenges include unmatched expectations with transitioning into new roles, assuming responsibilities, integrating with teams, and adjusting to the theoretical and practical aspect of the job (Philips, Esterman, & Kenny, 2015). Other challenges include dissatisfaction because of high patient needs, increased workload demands, ineffective working relationships among nurses and physicians, gaps in leadership support, and impact on nurses' health and well-being (Hayward, Bungay, Wolff, & MacDonald, 2016). Newly graduated nurses often experience occupational stress and shift rotation between the fourth and 12th month of practice (Zhang et al., 2017). Eighty-five percent of nurses are fatigued before the end of a 12-hour shift, and 98% of nurses have indicated that 12-hour shifts are more mentally and physically exhausting than an 8-hour shift (Brooks, 2017). As a result, 81% of new graduate nurses express continuous degree of work inference with their personal life (Boamah & Laschinger, 2015).

The best way to retain qualified employees is to emphasize new employee training and integrating employees into the organization's culture at the time of appointment (Trossman, 2016). Nurse managers can retain nurses within the first year of

practice by paying attention to various interruptions to personal life such as shift rotations, which can be managed to decrease stress levels and cut down on occupational stressors (Edwards, Hawker, Carrier, & Rees, 2015). Additionally, nurse managers can provide a tailored program to manage stress, provide mentoring programs, recognize employees, emphasize positive transition outcomes, increase retention, and reduce turnover rates (Phillips et al., 2015).

### **Background of the Problem**

Employee voluntary turnover is a management problem that impacts the strategic sustainability goals of health care organizations (Collins, McKinnies, Matthews, & Collins, 2015). The Bureau of Labor Statistics (2015) estimated that by the year 2024, a total of 600,000 RNs including highly skilled RNs would need to fill the shortage of RNs. The financial cost associated with RN turnover in health care organizations in the United States is \$82,000 to \$85,000 per nurse (Schroyer, Zellers, & Abraham, 2016). The cost includes recruiting and training a newly hired RN, who leaves within the first year, costing the organization thousands of dollars yearly (Schroyer et al., 2016).

Hospital employers who assess employee turnover need to address the primary organizational resource affecting its economic interests, which includes nursing care practices, patient outcomes, and a positive healing environment for patients (Collini, Guidroz, & Perez, 2015; Hayes et al., 2012). However, there is little research on factors and control measures that contribute to the turnover of RNs within the first 12 months of practice (Zhang et al., 2017). Health care organizations that invest in recruitment, mentorship, and retention programs that can retain high-quality nurses are essential

(Schroyer et al., 2016). Regardless of the attitudes and perceptions health care workers have concerning the workplace, there is a positive correlation between high employee turnover, job satisfaction, and the ability to give high-quality patient (Collins et al., 2015).

### **Problem Statement**

Thirty-three percent of new registered nurses (RNs) leave their first job within their first year of employment (Kovner et al., 2014). The estimated cost of organizations to replace new RNs is over \$82,000 per nurse and up to \$6.4 million annually in hospitals with more than 600 beds (Kovner et al., 2014; Schroyer, et al., 2016). The general business problem is that voluntary employee turnover of RNs can have an adverse effect on the organization's profitability. The specific business problem is that some nurse managers lack strategies to reduce voluntary turnover of new RNs within their first year of employment.

### **Purpose Statement**

The purpose of this qualitative single case study was to explore strategies some nurse managers use to reduce voluntary turnover of RNs within their first year of employment. The targeted population consisted of five experienced hospital managers in Fort Bend County, Texas, who had a minimum of 2 years working experience and who had successfully implemented strategies that reduced voluntary turnover of new RNs within their first year of employment. The implications for social change consist of the potential to strengthen the health care workplace environment throughout local communities by improving the quality and continuity of patient care. Reduction in the



turnover of new RNs may help stabilize health care organizations' performance to increase mating resources, money, time, and skills to charities. Other implications for positive social change include improvement in health care practices that contribute to patient's improvement toward wellness, and enhance growth and profitability, which in turn might lead to employment opportunities for both the families and the communities.

### **Nature of the Study**

There are three major types of methods when conducting research: qualitative, quantitative, and mixed methods (Maxwell, 2016). Researchers use qualitative methods to obtain a rich understanding of the lived experiences of the participants (Marshall & Rossman, 2016). The selection of a qualitative approach was best suited for a survey with the same sample size, which allowed me to understand and manage complex issues that emerge when talking directly to participants. In contrast to the qualitative method, researchers use the quantitative approach to examine relationships and differences between two or more variables (Groeneveld, Tummers, Bronkhorst, Ashikali, & van Thiel, 2015). Quantitative methods were not suitable for this study because I was not testing hypotheses or examining relationships among variables. Likewise, a mixed method design consists of a researcher using a combination of qualitative and quantitative research, using deductive and inductive strategies when one method is not enough to answer the research questions (Halcomb & Hickman, 2015). Therefore, a mixed method was not appropriate for exploring the strategies nurse managers use to reduce turnover and improve retention levels of RNs. Because I explored the participants' experiences

with strategies to reduce voluntary turnover of first-year RN employees, a qualitative research method was appropriate.

I selected a single case study design for this study. Researchers use a single case study design to conduct an in-depth study of a specific case to understand simple or complex problem using reinforce knowledge and past research (Merriam & Tisdell, 2015). A case study is appropriate to researchers studying groups, organizations, situations, or individuals over a period to gain a holistic appreciation of the factors contributing to the phenomenon (Keenan, Teijlingen, & Pitchforth, 2015). I considered three other qualitative designs: (a) narrative, (b) phenomenology, and (c) ethnography. A narrative design involves the understanding of experiences and actions of individuals over a period through the sharing of participants' experiences through their stories (Seal & Mattimore, 2016). However, a narrative design was not appropriate because it involves group conversations, documents as primary sources, and a full examination of participants' stories (Paton, 2015). I did not choose a phenomenological design, which involves researching the lived experiences of the participants and human experience from the views of those living the phenomenon (Miettinen, 2015), because it did not fit the purpose of this study. Similarly, an ethnographic design was not suitable for this study because its emphasis is on exploring cultures and shared a pattern of a group (Marshall & Rossman, 2016; Patton, 2015). Therefore, a case study research was chosen because it enhanced the opportunities for numerous sources to select from, which strengthens a project (Patton, 2015). Hence, a single case study design was appropriate to explore the

strategies that nurse managers use to reduce voluntary turnover of first-year, RNs and increase retention, productivity, and efficiency of the organization.

### **Research Question**

The central research question of this study was “What strategies do nurse managers use to reduce voluntary turnover of new RNs within their first year of employment?”

### **Interview Questions**

1. What is your experience with the turnover of new nurse graduates in your organization?
2. Based on your experience, why do new registered nurses leave their job within their first year of employment?
3. What strategies have you used in the past to improve retention and reduce employees' voluntary turnover?
4. What successful strategies are you using to reduce voluntary turnover of new RN graduates?
5. What strategies did you find least effective in reducing turnover of RN graduates?
6. How did you assess the effectiveness of the strategies for reducing employee turnover?
7. What were the key barriers to implementing your organizations' successful retention strategies for registered nurses during their first year of employment with your organization?

8. What additional information can you share about your strategy to reduce voluntary nurse turnover of newly registered nurses during their first year of employment with your organization?

### **Conceptual Framework**

The conceptual framework for this study was Herzberg's two-factor theory, which was introduced in 1959. Herzberg's two-factor theory describes satisfiers and dissatisfiers that affect employees within a work environment. Herzberg developed his two-factor theory after interviewing accountants and engineers to understand what makes employees satisfied or dissatisfied with their jobs. The Herzberg two-factor theory is based on a foundation for underscoring employee job satisfaction as well as motivators and factors that affect retention and voluntary turnover. Herzberg's two-factor theory was known as a motivation-hygiene theory and itemized motivational factors included (a) advancement, (b) recognition, (c) achievement, (d) personal/professional growth, and (e) responsibilities. Further, Herzberg, Mausner, and Snyderman (1959) identified hygiene factors as job dissatisfiers that include (a) work conditions, (b) relationship with subordinate, (c) wages, and (d) job security.

Herzberg's two-factor theory was a guide to understanding employee job satisfaction or job dissatisfaction as it relates to the nature of work performed. The basic proposal for Herzberg's two-factor theory was that a leader may increase employee job satisfaction and job performance by first pinpointing and discussing factors that affect not only employee job satisfaction but also job dissatisfaction (Herzberg, 1987). Therefore, Herzberg's two-factor theory aligned with the purpose of this study to explore the

strategies nurse managers used to reduce voluntary turnover of new RN graduates within their first year of employment. The theory was also suitable for comparing, contrasting, and exploring the experiences and perceptions of factors that affect work experience.

### **Operational Definitions**

*Burnout:* Burnout is a psychological response to chronic job stress, emotional exhaustion, cynicism, and inefficacy as the result of the lack of time and support to accomplish a task (Boamah & Laschinger, 2015).

*Extrinsic rewards:* Extrinsic rewards are financial rewards like wages and salaries and other financial supplements or fringe benefits such as health care insurance, 401K matching, life insurance, transportation benefit, short and long-term disability, paid maternity, and child benefits (Lissitsa & Chachashvili-Bolotin, 2017).

*Intrinsic reward:* An intrinsic reward is the source of pleasurable motivation to enhance job performance such as promotion and more paid responsibilities (Waqas & Muneer, 2017).

*Knowledge management:* Knowledge management is a process whereby management create, disseminate, and maintain competitive advantages in knowledge-driven human capital leverage to achieve competitive advantage (Santoro, Vrontis, Thrassou, & Dezi, 2018).

*Mentoring:* Mentoring is a fostering process by which a well-experienced mentor provides one-on-one dyadic relationship through face-to-face teaching in order to improve career satisfaction and increased personal and professional development to a less experienced mentee (Schnader, Westermann, Downey, & Thibodeau, 2016).

*Nurse orientation:* Nurse orientation is the development of competent newly employed graduate nurses' well-being in their place of employment (Pasila, Elo, & Kääriäinen, 2017).

*Organizational justice:* Organizational justice is a perception of an employee toward the fairness of treatment by subordinate, policies, as well as the organization (Gosser, Petrosko, Cumberland, Kerrick, & Shuck, 2018).

### **Assumptions, Limitations, and Delimitations**

#### **Assumptions**

Assumptions are fundamental perceptions or beliefs assumed to be true without having the support of the truth (Merriam & Tisdell, 2015; Schoenung & Dikova, 2016). Four assumptions guided this qualitative single case study. The first assumption was that all the participants understood the overall context, purpose, and the direction of this study. The second assumption was that the information provided by the managers was correct, honest, and reflected an overall belief of the phenomenon. The third assumption was that the participants would be willing to share their experiences during the interview. The fourth assumption was that the number of interviews would lead to data saturation.

#### **Limitations**

Limitations are uncontrollable weaknesses and constraints to the generalizability of the problems that may affect the validity of a study (Locke, Spirduso, & Silverman, 2014; Singh, 2015). This qualitative case study consisted of methods used to help understand the phenomenon of the individual nurse managers. As a result, the following limitations restricted my ability to complete the study. The first limitation was the risk of

not finding qualified nurse managers to participate in the study; however, this was not an issue for this study. Second, the structure of the design limits the possibility of generalizability of the research results. The findings of this study reflect the perceptions of a small and experienced population of nursing managers and their experiences, which may not be the generalization of a broader community but are enough to form an opinion. Finally, the sampling method could have been a limitation that also limits generalizability. To address this, snowball sampling was suitable method for planning to interview participants who were ready to provide valuable information (see Abdullah, Patterson, Pegg, & Abdullah, 2015).

### **Delimitations**

Delimitations refer to the boundaries set by researchers to limit the extent of a study (Nelms, 2015). The first delimitation was that the population excludes nurse managers with various specializations and who have fewer than 5 years of experience in health care settings. To gain knowledge of relevant information valuable to this study, I included nurses who have served in nurse management positions in a hospital setting. The knowledgeable nurse managers answered what was needed to improve retention. Finally, the populations' geographic location may be a delimitation, as I only interviewed the nurse managers residing in Fort Bend County, Texas. As a result, the transferability of the study's finding is limited only to the hospital setting and only to newly licensed RNs, not licensed vocational nurses.

### **Significance of the Study**

The findings of this study may be valuable to health care managers because organizational sustainability and survivability depend on the ability of nurse managers to manage and keep their employees in the organization. The high cost associated with employee turnover in the hospital organization may affect employee staffing quantities and nurse to patient ratios (Collini et al., 2015). Hence, the new insights from studying the strategies to mitigate voluntary employee turnover may help increase recruitment and minimize termination expense as well as reduce learning curve errors (Collins et al., 2015).

The study may also be valuable to organizations interested in catalyzing the growth and profitability by ensuring retention of employees. Achieving retention has been evident through effective communication, hiring a diverse workforce, and recruitment of appropriately skilled individuals (Cloutier, Felusiak, Hill, & Pemberton-Jones (2015). Furthermore, enhancing employee development and training programs are important for ensuring employee retention (Cloutier et al., 2015).

### **Contribution to Business Practice**

The inability of leaders to manage working conditions and provide leadership to employees can affect workplace productivity and organizations' bottom-line. Nurses' intention to leave their profession has been the result of high patient acuity increased in workload demands, ineffective working relationships, and gaps in leadership support (Hayward et al., 2016). The findings from this study may enable health care leaders to find effective strategies to reduce turnover and increase retention of experienced health



care workers. The results may prompt organizational leadership to revise their recruitment and hiring process to reduce the number of high-performing employees resigning from their positions. An increase in employee workload may force dissatisfied workers to leave their current work environment, leading to a decrease in productivity, morale, and high-performing workers (Strom, Sears, & Kelly, 2014). Insights gained from the findings of the study may help improve standard procedures that health care leadership employ to create a suitable environment that promotes employee job satisfaction for remaining with the organization. The decrease in employee turnover may significantly lead to cost savings of both direct and indirect cost expenses associated with staffing replacements and a decline in productivity (Collins et al., 2015).

### **Implications for Social Change**

The results of the study may contribute to positive social change by helping leaders to foster collaboration within a team as well as enhanced organizational commitment and improved community relations (Guerrero, Hahn, Khachikian, Chuang & Brown, 2017). Reducing the turnover of nurses might sustain corporate growth and improve the overall social condition of people in local communities. Furthermore, the results from the study might improve patient care. The findings may equip health care leaders with insight on how to manage and address socioeconomic factors such as stress and burnout issues that affect the quality of a nurse's life. Finally, the success of the organizations may provide an opportunity to reinvest in the communities by promoting educational programs such as scholarships, health, and wellness.

### **A Review of the Professional and Academic Literature**

The purpose of this qualitative case study was to explore the strategies that nurse managers use to reduce voluntary turnover of new RNs, which would answer the research question that guided the study. The literature has shown that organizational leaders have faced considerable costs related to employee turnover (Alhamwan, Bt Mat, & Al Muala, 2015). Understanding the reasons why an employee leaves an organization is significant in addressing its economic and social costs (Qazi, Khalid, & Shafique, 2015). The professional and academic literature was relative to the topic under investigation and provided a foundation for this study involving RN job motivation, retention, and satisfaction. The literature were obtained through academic libraries, websites, databases, and books that were peer-reviewed. The purpose of the literature review was to ensure depth and consistency of a topic before a research start. The organization of the literature review consists of five significant categories: (a) literature search strategy, (b) critical analysis and syntheses of literature, (c) application to the applied business problem, (d) criticism of the Herzberg two-factor theory, and (e) the phenomenon of turnover retention, impact of turnover, and retention strategies.

The strategies for searching for peer-reviewed literature included a search using a variety of scholarly resources within multidisciplinary databases such as management, health sciences, government websites, dissertations, and a human resources journal to explore the phenomenon of this study. I found literature by conducting searches using the following databases: (a) Walden University Library, (b) Google scholar, (c) Emerald, (d) ABI/INFORM, (e) Source complete, (f) ProQuest, (g) Sage, (h) Science Direct. I used the

following search terms: *registered nurse, employee turnover, turnover cost, employee retention, RN's retention strategies, RN job satisfaction, job dissatisfaction.*

*Organizational commitment, employee turnover costs, employee engagement, work-life-balance, Herzberg's two-factor theory, and work environment.* Other search terms included *Vroom Expectancy motivation theory and Maslow's hierarchy of needs.*

The initial literature search resulted in 285 articles. I narrowed the search to specific keywords relevant to the study, which resulted in a total of 272 references used in the literature review. Ninety-three percent of the total cited references are peer-reviewed journal articles. I used Crossref and Ulrich's Global Series Directory to cross-reference all peer-reviewed sources. Ninety-five percent of the sources were published within 5 years of the anticipated graduation date of 2015 through 2019. The number of references I used in this study included 265 journal articles (95%), 12 books (4%), three dissertations (3%), four government references.

### **Herzberg's Two-Factor Theory**

The conceptual framework for this qualitative single case study was Herzberg's two-factor theory. Herzberg's two-factor theory is well known because it highlights the importance of job satisfaction and relates to employee motivation (Hilmi, Ali, & Nihal, 2016). The theory was initially introduced by Herzberg in 1959 after interviewing 203 accountants and engineers working in nine factories in Pittsburgh, which helped identify what makes an employee's satisfied or dissatisfied with their jobs (Herzberg et al., 1959). Herzberg's two-factor theory consists of motivation and hygiene factors. Motivators or satisfiers are intrinsic to situations such as personal achievement and growth, recognition,

or advancement opportunities. Dissatisfiers consist of hygiene factors that are extrinsic to duties such as company policy, job security, compensation, salaries, or subordinate relationship (Herzberg et al., 1959; Holmberg, Caro, & Sobis, 2018). Herzberg concluded that employees experience satisfaction with their jobs when their work environment conforms to either their intrinsic or extrinsic needs (Bayl-Smith & Griffin, 2015; Herzberg et al., 1959).

The fundamental proposition of Herzberg's two-factor theory is relative to leaders increasing employee job satisfaction and job performance. A leader must first pinpoint and discuss factors that affect not only employee job satisfaction but job dissatisfaction (Herzberg, 1987). Individual elements can lead to positive or negative attitudes toward work environment. Herzberg hypothesized that motivational intangible rewards such as (a) advancement, (b) recognition, (c) achievement, (d) personal/professional growth, and (e) responsibilities are factors that affect job satisfaction (Herzberg et al., 1959). Working conditions, relationship with subordinate, compensation, job security, supervision, and negative workplace assessment can lead to job dissatisfaction (Herzberg et al., 1959). Studies have supported the theory regarding motivational factors that contribute to job satisfaction. For example, Raziq and Maulabakhsh (2015) posited that working conditions, career growth opportunities, and developments are significant factors that motivate workers to achieve job success. The presence of motivational factors enhances job satisfaction, whereas the absence of job satisfaction can lead to job dissatisfaction (Chaudhury, 2015).

Herzberg's two-factor theory serves as a guide to understanding employee job satisfaction or job dissatisfaction as it relates to the nature of work performed (Ismail, Romle, & Azmar, 2015). Herzberg's two-factor theory was applicable for this study of exploring the strategies nurse managers used to reduce voluntary turnover of RN graduates within their first year of employment. Herzberg two-factor theory served as a platform to compare, contrast, and explore experiences and perceptions of factors that affect work experiences during the first year of employment. The conceptual framework allowed me to explore nurse managers' strategies as well as employees' job satisfaction, motivators, and factors that affect retention and voluntary turnover.

### **Application of Herzberg's Two-Factor Theory**

Researchers have used Herzberg's two-factor theory to determine the level of job satisfaction. Researchers often implement Herzberg's theory to align with a conceptual framework to understand the employees' motivating factors as it relates to retention (Shinde, 2015). Previously, Herzberg's two-factor theory has been used to establish a relationship between job satisfaction, motivation, retention, and employee turnover (Chiles, 2015; Shinde, 2015). Many researchers have used the Herzberg two-factor theory to validate their research (Alshmemri, Shahwan-Akl, & Maude, 2016; Datt & Washington, 2015; Mahzan & Abidin, 2017). Researchers have also indicated that Herzberg's motivation-hygiene theory is a good foundation for understanding employee job satisfaction and dissatisfaction (Derby-Davis, 2014; Lumadi, 2014; Mahzan & Abidin, 2017).

Improved retention, motivation, and job satisfaction are the result of a manager's ability to understand employees' needs, which can be improved through using Herzberg's theory. For example, Shinde (2015) used Herzberg's theory to highlight the nature of employees' motivating factors and how the motivating factors correlate with job satisfaction and employee retention. Using Herzberg's theory, Alshmemri (2016) surveyed 272 Saudi nurses in three major hospitals in Saudi Arabia and determined that hygiene factors are less important to job satisfaction; however, motivation is the most important factor that leads to job satisfaction.

Understanding the impact of stress and burnout of nurses in their workplace may help health care leaders implement policies that help manage and retain employees. Datt and Washington (2015) used the motivation-hygiene theory by Herzberg et al. (1959) to compare distress (i.e., harmful stress) to eustress (i.e., positive stress), suggesting how managers can deal with pressure to increase employee motivation and satisfaction levels. Stressed employees lack motivation, which may lead to demotivation and result in decreased productivity and profits and an increase in turnover (Datt & Washington, 2015). Therefore, managers and employees must work collectively to manage distress.

An encouraging work environment may reduce workplace stress and increases employee motivation and retention levels. In health care organizations, an employee who achieves job satisfaction and is dedicated to the mission of the organization will stay longer with the organization. For example, as the result of improving motivation and hygiene factors in an academic setting, the value of nursing education becomes maintainable, leading to increased faculty retention (Derby-Davis, 2014). When there is a

significant relationship between motivation and hygiene factors and the intent to stay, nurses are satisfied with their jobs (Derby-Davis, 2014).

### **Criticism of Herzberg's Two-Factor Theory**

Herzberg's two-factor theory has been considered controversial in the history of management. The followings are some of the identified criticisms of Herzberg's theory: (a) biased research methodology, (b) inconsistency in the use of the term, and (c) exclusion of individual differences (Ewen, Smith, Hulin, & Locke, 1976; Lin, Cai, Xu, & Fu, 2015). King (1970) noted that the five interpretations of Herzberg's theory are inconsistent, and it is impossible for a researcher to test the hypothesis because no one can be sure which version of the theory is proper. Additionally, Parson and Broadbride (2006) criticized Herzberg's two-factor theory because it does not address individual differences of needs and values when explaining work motivation, and people have different ways of achieving their needs and motivators.

When an interpretation of a theory is ambiguous, the challenge may be in how to use the approach to justify the hypothesis. Herzberg's two-factor theory has also been criticized because of the ambiguous interpretation and clarification of the factors that cause job satisfaction and dissatisfaction (Tuch & Hornbæk, 2015). Conflicting perspectives on the theory exist among researchers regarding job satisfaction and job dissatisfaction. For example, Holmberg et al. (2016) identified a positive correlation with job satisfaction rather than merely preventing job dissatisfaction.

Despite these criticisms, many researchers have used Herzberg's two-factor theory to examine job satisfaction. Matei and Abrudan (2016) highlight the significance

of two-factor theory but advised that the motivational theory should be used in the cultural environment where the researchers considered them. Herzberg's two-factor theory may serve as a tool to help management implement more flexible interventions that ensure long-term satisfaction, employee growth, and development. Hence, Herzberg's theory was a suitable framework for this study.

### **Alternative Motivational Theory**

There are several well-known motivational theories aside from Herzberg's theory. Maslow's (1943) hierarchy of needs is one of many prominent motivational theorists during the 20th century. Maslow developed the hierarchy of needs theory based on how humans satisfy various personal needs (Md & Nurullah, 2014). Maslow theorized that humans aspire to attain five types of needs, which are categorized in order of preference: (a) physiological, (b) security, (c) love and belonging, (d) esteem, and (e) self-actualization. Physiological needs include needs such as food, air, eating, drinking, sleeping, and sex, which must be satisfied before the individual can progress to the next level of satisfaction. According to Maslow, management must meet this need by providing reasonable salaries that workers can use to get suitable housing and food. Next are safety and security, which means free from danger or threats. When social needs such as love, friendship, family, and affections are present, this will activate esteem needs, which enhance respect, appreciation, and recognition by colleagues. Maslow argued that people enjoyed higher orders of need if the lower needs are sustainable. Self-actualization is the apex of the hierarchal pyramid and refers to an individual attaining fullest potential.



Theory is often implemented by organizational leaders to improve the business doctrine. Maslow's (1943) motivational theory has been a business doctrine that encourages high employee retention and a suitable working environment for both the employees and their customers. For example, Lee, Kruger, Whang, Uysal, and Sirgy (2014) used Maslow's theory as a guide on how wildlife leaders can meet customer needs by contributing to the well-being index as it pertains to wildlife tourism, positing that meeting the hierarchal needs will create the opportunity for high rebooking. Additionally, Fisher and Royseter (2016) gathered feedback from four mathematics teachers that supported Maslow's hierarchy and identified the best ways to support teachers effectively in various stages of their professions. When school administrators or management are in constant communication, this can encourage good rapport among the employee and employer.

Herzberg's two-factor theory is similar to and supported by Maslow's hierarchy of needs in that both create motivation for the employee; however, the theories have a slight dissimilarity. Maslow (1943) and Herzberg et al. (1959) both suggested that an individual must achieve a precise set of needs to be satisfied. But in Maslow's theory, it is through a hierarchy of needs, whereas in the two-factor theory it is through a two-way premise (i.e., hygiene and motivators) at which people achieve two specific needs. Maslow was also more specific in identifying the categories of human needs including low areas such as emotions, though Herzberg et al. were more particular in the specific physiological and specific needs that humans must be present to produce motivation. Herzberg et al. indicated that people are more motivated when they attain self-

actualization rather than what Maslow considered in his hierarchy of needs. Herzberg et al.'s objectives were that motivation should be the central attitude among individuals, whereas Maslow's suggested that an individual's needs are achievable when a healthy lifestyle develops.

Turnover Intention Phenomenon Leaders can address high employee voluntary turnover rates in organizations when they are aware of the contributing factors. Researchers have indicated that high employee turnover can increase recruitment and orientation cost, low quality of patient care and a shortage of enough experienced nurse to train new nurses (Hayward et al., 2016). Factors that contribute to an increase in employee voluntary turnover rates include human capital, quality patient care, and contained cost. In this qualitative case study, I explored the strategies leaders of health care organizations used to reduce persistent, voluntary turnover of RNs within their first year of employment. The findings from the study may aid in mapping out the causes of employee turnover and creating a plan to build awareness of turnover. Furthermore, the findings can be used to increase ways to improve the organizational business practices and sustainability.

RNs continue to be an essential part of the global workforce. RNs are in the country's largest health profession, which is increasing in size, and improve patients with chronic conditions (Bauer & Bodenheimer, 2017). RNs serve as an integral part of primary care teams, are responsible for triaging patients, monitor electronic medical records in box messages, engage in office functions such as wounds care, and educate the patients (Bodenheimer et al., 2015). RNs play a vital role in the management of chronic

diseases for patients with diabetes and hypertension and monitor of risk factors as well as assess the effectiveness of treatments and medications (Planas-Campmany et al., 2016; Rondinelli et al., 2014). RNs are also the first point of contact between the patient and the physician.

Despite the contribution of nurses to the field of health care, the profession continues to experience the shortage of experienced nurses. The Bureau of Labor Statistics (2015) estimated that by the year 2024, a total of 600,000 RNs would be needed to fill in the shortage of over 923,000 RNs. This shortage of nursing is not exclusive to the United States; there is a global shortage of 7.2 million health care workers (World Health Organization, 2014). Because the scarcity of RNs can influence the quality of patient care, managers must focus on developing a leadership style that increases motivation and satisfaction of staff. Training opportunities, rewards program, recognition, career advancement, and other retention strategies help to reduce turnover and increase other motivational factors that increase employee retention (Chen, 2017; Neckermann & Yan, 2017).

The effective retention strategy begins with how well the management promotes a positive and inclusive culture. Egener et al. (2017) suggested that organizational culture must reflect the overall behavior of patients and employees, which can lead to employee retention, improve quality of care, promote healthy outcomes, and reduce medical error. It is also crucial for the nurse managers and educators to address the lack of social support and increased work barriers that contribute to RNs' intention to leave so that preventive measures can be taken to control the turnover rate (Ishihara, Ishibashi,

Takahashi, & Nakashima, 2014). There is a need to understand the reason behind the phenomenon of turnover. Neglectful attitudes of health care managers lead to an increase in voluntary employee turnover, which can be a detriment to the organizational sustainability.

Factors that impact the effectiveness of organizations have become an interest among many. Turnover can lead to capital drain for any organization as the business and hiring managers spend the major part of their time, money and resources on recruitment and training of qualified nurses which as a result may lead to loss of profit. Therefore, understanding the reasons behind employees' voluntary turnover is needed by leaders who seek to find solutions to mitigate losses (Borah & Malakar, 2015). Losses are often incurred due to the decrease in productivity and profitability in the organization (Borah & Malakar, 2015). The phenomenon of turnover occurs when employees consider ending his or her employment voluntarily with their present organization (Borah & Malakar, 2015; Radomski & Belkin, 2015, Tziner & Rabenu, 2015). Cohen, Blake, and Goodman (2016), and Azanza, Moriano, Molero, and Mangin (2015) agree that turnover intention is an individual's behavior intention to leave the company. Khan (2015) hypothesized that turnover intention is the last decision-making process before a worker makes a move to leave a job. Chauhan (2014) asserted that managers should focus on retaining the workers that contribute to the value of the organization. The followings are some of the specific reasons for employee high turnover rate: (a) employee morale, (b) job dissatisfaction, (c) organizational culture and commitment, (d) management, (e) burnout, (f) knowledge management, (j) lack of leadership, and (k) impacts of health and well-being of nurses

(Cloutier et al., 2015; Collins, et al., 2015; Hayward et al., 2016; Kasenga & Anna-Karin, 2014).

**Job dissatisfaction.** Several factors exist that contribute to high retention as the result of job dissatisfaction. Gilmartin (2013) indicated that over 40% of hospital nurses who are dissatisfied with their jobs noted extreme job stress levels, shock, and threats associated with job dissatisfaction. The nurses often demanded a job design that promotes autonomy that reduces system failure, increases leadership development, and team training as the satisfying need for their pleading. Employees become dissatisfied with their job when they cannot balance their work and family lives because of competing demands (Gozukara & Colakoglu, 2016). McHugh, Kutney-Lee, Cimiotti, Sloane, and Aiken (2011) posited that an organization whose employee experienced job dissatisfaction or burn-out would experience lower patient satisfaction which as a result affect the quality of care. Herzberg theorized hygiene factors, such as working conditions, job security, supervision, and compensation (Herzber et al., 1959). Some of the causes of job dissatisfaction is linked to achieving job satisfaction and the opportunity to reduce the possibility of employee dissatisfaction.

Improving job satisfaction and address job dissatisfaction may consist of the development of a more comprehensive strategy's that will help to increase the comfort of employees. When employees are satisfied with their pay, leadership support, and the daily decision of the organization, they will be less likely to leave the job for reasons other than retirement (Leider, Harper, Shon, Sellers, & Castrucci, 2016). According to Elanain (2014) promoting an environment that is self-assured and assertive to share their

problem with leaders is equally desirable (Elanain, 2014). Employees who are dissatisfied with their job will find a way of leaving the job with or without notice. There by leaving the organization to scramble to quickly look for a new nurse or pay double to other workers for working overtime, therefore, costing the department to spend more money on stay-over.

**Management.** The management within organizations has the responsibility to ensure a suitable work environment. To mitigate the anxiety caused to nurses, and in responding to these needs, organizations must recognize and address the significance of the workplace environment (Bungay, Wolff, & MacDonald, 2016). Organizational leadership which is committed to fair treatment, better opportunities for growth, training, and education opportunity, enticing compensation with benefit packages would experience less employee turnover rate (Egener et al., 2017). However, health care managers making ineffective leadership decisions can lead to high employee dissatisfaction and turnover (von Knorring, Alexanderson, & Eliasson, 2016). Bungay et al. (2016) suggested that it is crucial for a nurse manager first to understand the impact of nurse turnover. Healthy workplace environments, leadership, and nurses' health and well-being intercede in providing support to employees within the workplace. Similarly, management must create a culture build on trust, and align the mission and value with effective strategies. Strategies that promote a better reward system, job satisfaction, educational opportunity, and the avenue to improve the value while discouraging unprofessional act by the employer are critical (Egener et al., 2017).

## **Organizational Culture and Commitment**

Organizational culture may help to achieve job satisfaction, employees' commitment and retention of employees in the organization. According to Habib et al. (2014) employees with a good understanding of Organizational Culture (OC) can enjoy job satisfaction and commit to the organizational goals and mission. Organizational culture and commitment are noted to build a healthy working relationship. However, organizations with a negative corporate culture may lose employee commitment (Habib et al., 2014). Organizational culture is defined as a set of behavior, attitude, and value expected by employees to abide (Habib et al., 2014). The corporate culture is reflected in the overall behavior of patients and employees, enhance employee retention, improve quality of care, promote healthy outcomes, and reduce medical error (Egener et al., 2017). Compton, Jones, and Baldwin (2016) asserted that organizations that acculture new employees required professional skills and expected to exhibit behavioral norms. The behavioral norms serve as a "normative glue" that hold organizational processes together, and it affects internal corporate policies, employee commitment to achieving goals (Habib et al., 2014).

A committed employee is the one who shares the same value and dedicated to stays with the organization during the fortunate and unfortunate time and is ready to help accomplish the organizational goal. Increase in organizational commitment served as an excellent recipe for the decrease in turnover rates (Patil & Ramanjaneyalu, 2015; Saeed et al., 2014). The organization must commit to their employee's well-being by encouraging and ensuring modesty, and respect in day-to-day interactions between the employer and

employees' dealings, and the staff is empowered and valued at their place of work (Egener et al., 2017). Strom et al. (2014) indicated that valuable employees who are committed, energetic, cognitively alert and emotionally engaged would save the U.S. organizations an estimated amount of over \$300 billion per year in lost productivity.

### **Burnout**

Low nurse retention in the hospital has been attributed to challenging assignments and extraordinary intensities of job-related burnouts. According to Zhang, Wu, Fang, Zhang, and Wong (2017), burnouts or occupational stress occurs to newly graduated nurses during their transitional period from school to work environment due to lack of interpersonal relationships, and overwhelming workload forcing them to engage in a career change from the nursing profession. Burnout is a psychological response to chronic job stress, leading to emotional exhaustion, attitude and lack of power to effect a purposeful change, and lack of time to accomplish a task, resulting in exhaustion (Leiter & Maslach, 2004; Boamah & Laschinger, 2015). Most organizations are service-oriented, who believed that customers are always right yet, workers must walk the trendline because some customers are sometimes illogical to tolerate. However, employees do not have a choice than to face the reality which sometimes increases stress (Su Bonn & Cho, 2016). Among the many factors that contribute to the nursing shortage, job dissatisfaction, and leadership problem are some of the major issues identified during my study. Many nursing units are becoming stressful and demanding, resulting in employee burnout, and compassion fatigue (Rushton, Batcheller, Schroeder, & Donohue, 2015). This has triggered managers to place nurse with experience to the right job to reduce



burnout and increases nurse retention (Boamah & Laschinger, 2015). According to Su Bonn, and Cho (2016), organization expect up to 62.6% of employee turnover to occur because of employee burnout.

An employee may transition through several stages when experiencing job-related burnout. Yanchus, Beckstrand, and Osatuke (2015) suggested that employee transition through three stages of brain drain burnout and include: (a) emotional exhaustion (b) depersonalization, and (c) reduced personal achievement. All the above drains can tremendously affect the overall productivity of employees and may sometimes lead to medical error if not properly monitored. Not being able to perform their statutory responsibility because of stress or burnout can render the employee useless, and employees may forfeit their organizational loyalty, affect retention and job satisfaction (Elegido, 2013; Masakure, 2015).

### **Knowledge Management**

Leadership in the health care organization needs a knowledge management system to continue to improve the knowledge base of their employees if they want to compete in the global market. Creating a useful knowledge sharing system will help improve employee satisfaction and job performance, as well as productivity and profitability of the organization (Hee & Kamaludin, 2016). This goes with the saying that education will become a key factor in the fight for global innovation, and creativity, competence, ‘Knowledge is power’ [“*Nam et Ipsa Scientia protestas est*”], (Bacon, 1597/1996). Knowledge management (KM) is a process whereby management create, disseminate and maintains competitive advantages in knowledge-driven human capital

leverage to achieve competitive advantage (Santoro, Vrontis, Thrassou, & Dezi, 2018). Chong and Besharati (2014) survey highlighted the need for knowledge sharing among management and their employee. The advancement of an employee's knowledge could lead to higher performance, leading to increased compensation (Wang, Noe, & Wand, 2014). However, some variables can hinder employees to share their knowledge with either the employer or among fellow peers. Variables include; employees' lack of trust to share knowledge, or employer intentionally not sharing information with his employees leading to loss of institutional memory and decrease technological and organizational barrier (Chong & Besharati, 2014).

### **Consequences of Turnover**

Employee turnover impacts the strategic sustainability goals of health organizations. Employee turnover is a serious business and a management problem, which cost an organization a lot of needed resources through overtime wages (De Mesquita Ferreira, & de Aquino Almeida, 2015). A correlation between high employee turnover and job satisfaction exist (Collins et al., 2015). Collins et al. (2015), Haan, (2015), Jang, and Kandampully (2017) asserted that organizations who failed to assess the seriousness of low employee turnover rates would face a significant profit and sustainability reduction. Voluntary turnover has a negative connection between low organizational profitability and productivity (Kraemer & Gouthier, 2014). Reduction of employee turnover will help both the employees and the organization since increased turnover leads to reduced productivity and higher stages of stress level among employees

(Mawanza, 2017). Turnover among nurses will hurt the economy and threaten the quality of patient care.

Defining and measuring factors responsible for increased turnover can help hospitals to create a progressive work environment and affect hospital and nurse staffing. Nurse turnover does lead to the unsafe working environments which compromise patient safety, reduced employee morale and increase the cost to the organization's bottom line (Dawson, Stasa, Roche, Homer, & Duffield, 2014). Patient and financial measures within the organization are equally critical (Kurnat-Thoma, Ganger, Peterson, & Channell, 2017). Nurse's physical and psychological health and underpayment are also the significant problems discovered during research (Al-Hussami, Darawad, Saleh, & Hayajneh, 2014).

### **Turnover Cost**

Turnover cost impact many areas within the organization. The mean turnover rate of RNs is at 13.9%, which include the total number of employee terminations, both voluntary and non-voluntary (Roche, Duffield, Homer, Buchan, & Dimitrelis, 2015). Resulting in an estimated cost ranging from \$25,000 to 88,000 billion dollars annually for employee replacement (Roche et al., 2015). High employee turnover also increases the cost of recruiting, time and resources (Cloutier et al., 2015). Hence, replacing a qualified surgical nurse is estimated to be \$48,000 to replace critical care nurses is approximately \$64,000 which extend up to 125% of the nurse's annual salary. Associated expenses with staffing replacement, accrued time paid off, temporary coverage costs, and costs of orientation, mentoring, reduce productivity, and cost (Beecroft, Kunzman, & Krozek,

2001; Cline et al., 2003). As a result, leaders in these organizations are increasingly acknowledging just how costly it is to replace an employee rather than retain them (Guilding, Lamminmaki, & McManus, 2014). Research also supports a correlation between employee turnover and decreased employee morale, diminished employee engagement, and reduced efforts toward corporate citizenship workforce in the form of involuntary departures such as layoffs (Collins et al., 2015).

### **Retention Strategies**

Organizations in today's business environment continue to face challenges. Challenges consist of complications in retaining their workers most especially the younger generations who are also known as the generation Y (Shahrudin & Daud, 2018). Hopson, Petri, and Kufera (2018) indicated that, by highlighting more on retention strategy instead of a turnover, an organization could find significant information about the reason why nurses stay so that adequate resources can be allocated to retain employees successfully. Researchers highlight various strategies for retaining employees, including employee engagement, training and development, leadership style, rewards and recognition, and employee, employer relationship. Organizational culture helps to achieve job satisfaction, and enhance retention (Bareket-Bojmel, Hochman, & Ariely, 2014; Zhang, Qian, Wu, Wen, & Zhang 2016; Collins, et. al., 2015; Habib, Aslam, Hussain, Yasmeen, & Ibrahim, 2014; Strom et. al., 2014). Purohit and Bandyopadhyay (2014) equated job satisfaction with job security and compensation and inferred that hygiene and motivation factors equally motivate employees. A well instituted Employee engagement will lead to balanced accountability between the employees and employer,

help set a clear mission, vision, values that will motivate employees (Shahid & Azhar, 2013). Rewards, recognition, training opportunities, career advancement, excellent compensation and, other retention strategies can help reduce turnover, increase other motivational factors that influence employees, and support positive work atmosphere (Neckermann & Yang, 2017; Chen, 2017). According to Egener et al. (2017), nurse managers can also reduce turnover by committing to fair treatment, better opportunities for growth, training and educational opportunity, and enticing compensation with excellent benefits packages.

Management ability to introduce change initiatives such as a retention strategy may help the organization to directly influence the retention of employees. Burke, Flanagan, Ditomassi, and Hickey (2017) concluded that attracting and retaining RNs is critical to ensuring quality patient care delivery, as a result, contributes to job satisfaction and RNs retention.

**Job satisfaction.** Job satisfaction has been known to have a tremendous influence on employee performance. Kakar, Raziq, and Khan (2015) implied that “pleasure in the job puts perfection in work.” Therefore, if employees are satisfied with their job, it can lead to employee commitment to work as well as boost intention to stay (Kakar, Raziq, & Khan, 2015). Platis, Reklitis, and Zimeras, (2015) asserted that, among the many factors that can influence employee performance, job satisfaction is one of the best retention strategies to reduce employee turnover. Furthermore, from a business and health care organization’s perspective, job satisfaction is significant to improving health care organization’s performance (Correia, Dinis, & Fronteira, 2015; Ismail et al., 2015).

An employee, who enjoy their jobs and dedicate to the mission, will work harder and stay longer with their organizations. Job satisfaction and work-life satisfaction are strongly correlated with commitment (Shahid & Azhar, 2013). Kakar, Raziq, and Khan, (2015) noted that Herzberg (1974) hypothesized that job satisfaction is the individual driving force that affects worker satisfaction. Hence, Job satisfaction has a positive correlation with the intention to stay (Yurumezoglu & Kocaman, 2016). Job satisfaction relatively has a positive relationship with organizational commitment, while the relationship between job satisfaction and turnover intention are harmful, but not significant (Wang, Tsai, Lei, & Lai, 2016).

Employee satisfaction or motivations can be achieved in various ways or forms. Purohit and Bandyopadhyay (2014) equated job satisfaction with job security and compensation and inferred that hygiene and motivation factors equally motivate employees. Job satisfaction and salary satisfaction are driving forces that affect employee satisfaction (Herzberg, 1987). A research conducted on retail employees to explore the relationship among intrinsic motivation, pay satisfaction, and job satisfaction concluded that intrinsic motivation is relative to pay satisfaction and job satisfaction, while extrinsic motivation did not correlate to the job and pay satisfaction. Employees do not only get satisfaction from their salary but from other wages paid to other relevant groups considered as essential (Montero & Vasquez, 2015). Kifle (2014) indicated that employees' general satisfaction depends on how his current salaries compare to others; because the more one's rank rises by one position, the more that individual indicate higher overall job satisfaction, compared to low overall job satisfaction. An employer

must make a policy that is aimed to meet the needs of employees, enhance job satisfaction, and motivate them (Kakar, Raziq, & Khan, 2015).

**Employee engagement.** A lack of employee engagement, professional autonomy or inclusion in the day-to-day operations of the organization, can lead to employee turnover. Employee engagement is a significant strategy that improves health service delivery (Wutzke, Benton, & Verma, 2016). Strategic leaders use employee engagement to focus on establishing a conducive atmosphere supportive of employees, keeping them motivated and confident (Strom et al., 2014). Wu and Chen (2015), Namasivayam, Guchait, and Lei (2014) defined employee engagement as the unequivocal positive experience of state of mind, and conducive environment that allows flows of exchange of knowledge, information and thoughts to flow smoothly from employees down to the higher chain of leadership hence, increase decision making skills and job autonomy. Many health care managers ascertain the significance of employee engagement as the tenet of patient satisfaction (Lowe, 2012). Pattakos and Dundon (2017). Employee experience job satisfaction when they feel protected and have interpersonal relationships with their employers which can results in significant accomplishment.

Effective leaders are likely to develop a well-engaged employee. Employee engagement requires leadership, commitment to pass down from higher management level to lower manage an employee by setting clear mission, vision, values and balance accountability to motivate employees (Shahid & Azhar, 2013). To strengthen this climate of engagement, leaders must create a precise plan that will address and engage workers (Davenport, 2015). Leaders should not only involve employees that have the direct care

to the patient, but also to other employees in charge of the administrative task which support the patient (Shantz, Alfes, & Arevshatian, 2016). Finally, strategic leaders must also have a full understanding of the benefits gained from the engaged labor force and commit to retaining those employees (Nasomboom, 2014).

**Rewards and recognition.** Rewards and recognition are some of the tools a manager can use to motivate their employees. The idea of rewarding and recognizing employees for their quality performance is backed by psychological and economic theories which come from performance-based incentives, gains sharing, profit sharing, and bonus (Bareket-Bojmel, et al., 2014). Parker and Morgeson (2017) asserted that incentivizing employees with rewards and security may counter job demands and might stimulate growth and foster success. The use of rewards or recognition serves as motivational factors that influence employees and support a positive work atmosphere (Neckermann & Yang, 2017). Less opportunity for rewards and recognized program in an organization may lead to lesser motivation (Graves, 2015). The effectiveness of rewarding and recognizing employees helps to impact employee performance (Malik, Butt, & Choi, 2015). De Gieter and Hofmans (2015); Malik, Butt, and Choi (2015); and Khan, Waqas, and Muneer (2017) identified two types of rewards; intrinsic rewards (i.e. Recognition, promotion, responsibility, training, recognition), and extrinsic rewards (i.e. Pay, bonus, benefit, promotion opportunities). The organization uses intrinsic and extrinsic rewards to motivate their employees to achieve the organizational goals, but too many of these could be harmful to the organization (Khan, Waqas, & Muneer, 2017).



Health care managers can reduce employee turnover and increase retention when the necessary mechanism is in place to encourage and motivate the employee. Chang, Hsu, and Wu (2015) asserted that monetary rewards will improve the individual well-being, increase employees' motivation and reduce higher employee turnover. A'yunnisa and Saptoto, 2015; Chen, 2016; Siyanbola and Gilman, (2017) suggested that for a leader to improve employees' behaviors and job performance, they must have an effective monetary reward system in place. Recognition is cheap, and efficient substitutes for financial incentives (Hoogveld & Zubanov, 2017). Levitt et al. (2016) attested to this after performing a series of experiments with Chicago school students, using a symbolic award, a trophy and a photo on the wall in the class cost about \$3 to improved grade 2 to 5 students' test score by 0.12. Recognition takes many forms, announced or unannounced. A good example is highlighted in the research by Bradler, Dur, Neckermann, and Non (2016) where unannounced recognition had a bigger effect on nonrecipients' than the actual recipients.

### **Training**

Employees are the backbone of a company and can positively affect the outcomes of the organization when adequately trained. Training serves as an essential part of organizational performance because it improves employee productivity, successful mentoring program, career advancement, core organizational strategy to influence employee retention and enhance nursing competency (Zhang, Qian, Wu, Wen, & Zhang 2016). Employees recognized training as the most satisfying rewards (De Geiter & Hofmans, 2014). Providing training and development opportunity to employees by the

leadership will help increase employees' commitment and motivation, (Chakrabarti & Guha 2016). Adequate employee training and development, help keep talented workers, preserve knowledge within the organization, increase the job satisfaction, loyalty, sense of security, employee engagement, and help employees to satisfy psychological contracts between their employer resulting to organizational commitment (Rodriguez & Walters, 2017). As much that employees needed training, likewise, nurse managers should also receive training in other to be aware of their staff's and personal needs for the older nurses to better help the nurse managers in providing valuable training and support to both the employee and managers Armstrong-Stassen, Freeman, Cameron, & Rajacic 2015).

The cost of training per employee continues to rise yearly, leading to a significant challenge to many organizational leaders. For example, in a research conducted by the Association for Talent Development (ATD), they concluded that organization invested up to \$1,208 in 2014, \$1,229 in 2015 and \$1,252 in 2016 (Rodriguez & Walters, 2017). Shantz, Alfes, and Latham (2016) noted that Investing in human capital, and supportive work environment will increase organizational success, improves employee productivity, reduce wastages, improve motivation, and reduce employee turnover. Employers must continue to keep up with the rapid advancement of technological improvement with continued training of their employees to keep up with the skills necessary to compete in the 21st century.

## **Work Environment**

A nurse work environment can impact the bottom line of an organization. The nursing work environment was a significant predictor of both job satisfaction and intent to stay. (Al-Hamdan, Manojlovich, & Tanim, 2017). RNs' work environment has a strong relationship between healthy work environments, nurse outcomes from job satisfaction and the intent to stay (Abu, AlRub, El- Jardali, Jamal, & Al-Rub, 2016). A work environment defined as the working conditions at a particular work location which the workers are encouraged or discouraged to stay, as a result of the physical environment, supervisor to employee relationship, subordinates, and peer groups (Shravasti & Bhola, 2015). According to Olausson, Ekebergh, and Österberg (2014), physical work environment serves as an integral part in ensuring job satisfaction as a result of the architectural design of the intensive care unit which enhances positive effects on the RN's well-being, job satisfaction and eagerness to provide humanistic patient care. The favorable working environment in an organization will help to improve productivity, increase efficiency, and reduce the monotony, boredom, fatigue, and anxiety (Shravasti & Bhola, 2015). The results of the study support an empirically tested theory, which suggests that the intent to stay in the product of nurses' emotion as well as cognitive responses to their work environments (Al-Hamdan, Manojlovich, & Tanim, 2017).

Apart from the physical, cost and work safety impact, there are other factors that can seriously affect the productivity of an organization. Hayward et al. (2016) indicated that the nurses' intention to leave their job influenced by the work environment and personal or social factors. The factors include high patient awareness, added workload

demands, unproductive working relationships between nurses and physicians, lack of leadership support, and negative impacts on nurses' health and well-being. Hence, leaders are responsible for making sure that job demands-resources and improved employee's work environment (Nylen, Lindfors, Le Blanc, Aronsson, & Sverke, 2017).

The impact of high stress was evident in the health and emotional well-being of nurses. The study highlights the need for health care leaders to re-examine how they promote the collaborative practice, enhance supportive leadership behaviors, and reduce nurses' workplace stress to retain the skills and knowledge of experienced nurses at the point-of-care (Hayward et al., 2016). Managers influence the working environment by ensuring that employees have access to enough resources, and flexibility within the organization is reciprocal. Al-Hamdan, Manojlovich, and Tanima (2017) suggested that to improve these outcomes, regular assessment and systematic evaluation of the nurse work environment.

The conducive work environment has been known to promote quality of care and job stability in the place of work. A favorable work environment can help nurses to understand their roles and responsibilities in providing safety and quality of nursing practices (Lake et al., 2016). Anåker, Nilsson, Holmner, and Elf (2015) emphasize that nurses as a member of their profession, experienced a great sense of individual responsibility to influence the environment in a positive direction. The ability to prevent risks, errors, and increase patient safety relies on forefront nurses, who scuffle to apportion nursing care to patients because of limited health care reimbursements, environmental impediments, and personal burdens of demanding and busy hospitals

(Chiang, Hsiao, & Lee, 2017). The organization has used trait such as workload management and increase job satisfaction as a primary strategy to improve workforce stabilization and nursing quality improvement (Lin & Huang, 2014). Furthermore, Magnet hospitals serve as a positive working environment because they provided better working environments and retained more newly graduated nurses in the organization leading to up to 30% reduced intention to leave (Ishihara et al., 2014).

**Work–life balance.** Employees in small or larger organization desired a well-structured work-life balance to decrease burnout and stress in the work environment. Akintayo (2010) and Parasuraman and Greenhaus (1997) posit that work-life interference in the organization is a significant factor to be considered when determining organization commitment, job satisfaction, employee turnover; when there is a conflict between one's job and demands of personal life, it can lead to personal disaster. In the qualitative research survey conducted by Jawahar and Soundria (2015) concluded that when managers fail to take the problem of work-life balance seriously, it can affect the stability and professional success of an employee.

A nurse should be involved in the day-to-day decision-making process especially when it requires the balancing of personal and job functions. Family plays a vital role in nurse' decision-making regarding his or her career (Hopson, Petri, & Kufera, 2018). Thacker, (2015) noted that a lack of balance between work and family could result in conflict, exhaustion, an increase in employee turnover. Idris (2014) supported the assertion that when employees work schedules conflict with life activities, that can lead to the employee getting stressed-out and planning to leave the organization. Managers

can avoid this problem by finding a solution to help employers address their commitment at home and work by providing flexible working hour opportunities (Chowdhury Abdullah Al Mamun, Hasan, Al Mamun, & Hasan, 2017).

Managers can also encourage an employee to have autonomy to make individual decisions by allowing them to work at their pace, but that does not mean that employees will always exercise good judgment to increase productivity (Wilson, Perry, Witt, & Griffeth, 2015). Other factors considered as an essential variable in retaining employees. Some of these factors have a direct effect on employee retention including career opportunities and work environment (Boamah & Laschinger, 2015).

### **Compensation**

Gupta and Shaw (2014) asserted that from a psychological standpoint, compensation could influence the quality of employees, employee attitudes, and behaviors which may hinder quality, creativity, innovation, and other myriad outcomes critical to successful operations. Employee compensation remains the most powerful tool for successful engineering management of human capital and thereby promotes organizational effectiveness, enhance payroll expenses to be targeted better to achieve the recruitment, selection, and retention of a highly motivated, high-performing workforce (Gupta & Shaw, 2014). Compensation should be the most significant factor that motivates employees to stay in the organization since retention matters a lot to organizational effectiveness. The caveat to this initiative according to the author is that performance-enhancing compensation practices can lead to workplace bullying and can be counterproductive (Gupta & Shaw 2014). There is also a famous saying that money

does not always lead to desirable outcome has some people thought. Furthermore, Kavitha, Geetha, and Arunachalam (2011) asserted that compensation does not always appear as an essential factor in employee's motivation.

### **Leadership Style**

The inability of a leader to motivate employees to stay in the organization, and increase the quality of care, can be attributed to the leadership style of that leader.

Leadership style will direct employee's attention to either towards the organizational goals or away from the organizational justice (Strom et al., 2014). Cheng, Bartram, Karimi, Leggat, and Cheng (2016); Mikkelsen, York, and Arritola (2015) asserted that transformational leadership style plays a significant role in enhancing employee job satisfaction, improve employee's commitment and relationships within organizations, healthy work environment, and favorable climate that enhance employees' well-being and reduce turnover intentions. As indicated by Idris (2014), lousy leadership style will affect the performance of the organizational mission and increase turnover rate.

Leadership defined as the act of inspiring, directing, guiding and influencing a group of personnel to achieve organizational goals and objective (Elanain, 2014; Waldman, Carter, & Hom, 2015). Leadership style founded on the principle of social exchange which the relationship between leader and employee is based mainly on the understanding that performance provided in exchange for economic gain (Strom et al., 2014). Furthermore, the affirmation of respect, trust, and loyalty are some of the primary measures of high-quality relationships between the leaders, and the employees (Oren, Tziner, Sharoni, Amor, & Alon, 2012). Hence, leaders must build loyalty among their employees by

creating an environment that attracts and energize employees to commit to the organizational goals, engage, motivate, and bond culture needed to attract and keep talented employees (Bartlett & Ghoshal, 2013).

Nurse managers are directly responsible for the day-to-day leadership, Administrative, and operations activities of their unit. Health care leaders must be comfortable in cutting down the old barriers and foster shared leadership models, participative leadership styles that make employees feel valued as participants in the decision-making process (George, 2015). A leader with transformation ability has a positive effect on employee satisfaction and can enhance a robust collective style that empowers and engage employees' organizational culture and a sustainable future for the company (Collins et al., 2015). Scholars describe a transformational leader as having the capability of motivating employees to emphasize feelings of social identification and affiliation within the workgroup (Strom et al., 2014). Waldman, Carter, and Hom (2015) indicated that through inspirational earnest request, a transformational leader might talk hopefully and self- assured about the unit's future, despite the dissatisfaction and turnover intentions that this action can trigger. Therefore, the concept of transformational leaders can guard against a plan to quit by reducing the prospect of voluntary employee turnover in the organization (Waldman et al., 2015). For managers to implement dynamic, innovative and retain their employees, they must create a conducive environment that will promote employee engagement, improve reward and compensation, increase opportunities for advancement, and improve work-life system and promotion.



## **Mentorship and Orientation Needs**

Mentoring and orientation, are useful career management tool and individual career development used to integrate employees in any organization. Newly licensed nurses, who observed that they are well received and supported by their employer, acknowledge the high level of satisfaction (Strauss, Ovnat, Gonen, Lev-Ari, & Mizrahi, 2016). Rush, Adamack, Gordon, Janke, and Ghement, (2015) asserted that new graduates that participated in the transition program that was put in place by the organization would have a smoother transition compare to that nonparticipant. Orientation identified as an essential part of the development of competent newly graduated nurses' wellbeing at their place of employment (Pasila, Elo, & Kääriäinen, 2017). There is a significant benefit that can be derived when organizational leadership initiates orientation programs for newly graduated nurses. Strauss et al. (2016) posited that about 50.6% of the nurses surveyed reported having a structured orientation program, which had resulted to job satisfaction and retention of RNs working at the ward, and with effective orientation programs, nurses can provide a safe and improved patient care need. Pasila, Elo, and Kääriäinen, (2017) concluded that broader assessment is needed by management to gain a greater understanding of how recent graduate nurses experience the need for orientation so that proper orientation program can be developed purposely for newly hired needs. A new graduate should be giving up to four weeks of orientation with at least 49 hours in two weeks period with adequate resources to support the shift scheduling period (Rush et al., 2015). Although orientation program has prepared new nurses to develop leadership skills and competent during their orientation, more focus should be on increasing the

practical skills development to be available for up to six months after post hired, with assigned peers (Strauss et al., 2016). Phillips, et al. (2015) also noted that though a growing body of evidence indicates that aftermaths of new graduates remain poor despite the existence of transition program in place, conversely, there is significant correlation between having a structured orientation program to adaptation, satisfaction, and support of newly licensed nurses on the ward.

Mentoring programs have proven to be a success in aiding the transition of new RNs (Zhang et al., 2016). Mentoring is a fostering process by which a well-experienced mentor provides one-on-one dyadic relationship through face-to-face teaching in order to improve career satisfaction and increased personal and professional development to a less experienced mentee (Schnader, Westermann, Downey, & Thibodeau, 2016). Deepali, Jan, and Chaudhary (2016) indicated that mentoring program helps increase employee's retention, promote commitment and serve as motivators for mentors. Holt, Markova, Dhaenens, Marler, and Heilmann (2016) also noted that employee who are exposed to mentorship experience better job satisfaction and pay, better promotion opportunities, and boost self-confidence. While Sanyal and Rigby (2017) posit that face-to-face mentorship enhanced secure communication medium for transitioning of new nurses and allows mentees to have instantaneous feedback and prompt cues in natural language from the mentors. Leadership should spend more time in mentoring their subordinates in order to better increase the organizational commitment of the staff will, in turn, increase productivity, retention and reduces employee turnover (Ugoani, 2016; Yang & Zheng, 2015). Finally, taking part in mentorship program helps the mentors to feel satisfied that

he or she can prepare the novice mentee to be ready to face the future success and challenges that profession holds (Holt et al., 2016).

### **Transition**

The first part of Section 1 is comprised of (a) the background of the problem, (b) the problem statement, (c) the purpose statement, (d) nature of the study, (e) research question, (f) conceptual framework, (g) operational definitions, (h) assumptions, limitations, and delimitations of the study, (i) significance of the study. The second part of Section 1 is the exhaustive review of the professional and academic literature, which highlight the conceptual framework followed by the full analysis of turnover intention phenomenon, and retention literature.

The specifics of Section 2 include the study method and design. The section will consist of the following description: (a) role of the researcher, (b) identification of participants, (c) qualitative research method, (d) research design, (e) population and sampling identification (f) ethical research, (g) data collection process, (h) data analysis, (i) organization and (j) reliability, and validity. In Section 3, (a) presented my findings, (b) deliberated my findings' application to professional practice, (c) highlight the implications for social change, (d) offer recommendations for action, (e) recommendations for further research, (f) provided personal reflection and (g) conclusion address a deficit in business practice and offered best practices to organizational leaders to retain their high-performing health care employees.

## Section 2: The Project

Section 2 contains the purpose statement, the role of the researcher, description of the participants, research method and design, population and sampling, and description of the ethical steps that were taken and approved by the institutional review board (IRB) administration. In this section, I gave in-depth analysis and justification of the chosen research method. I also justify employing a single case study design and purposeful sampling. Section 2 also contains a description of the data collection process, data collection instruments, data collection technique, data organization approach, data analysis, and the reliability, and validity of data.

### **Purpose Statement**

The purpose of this qualitative single case study was to explore strategies some nurse managers use to reduce voluntary turnover of RNs within their first year of employment. The targeted population consisted of five experienced hospital managers in Fort Bend County, Texas, who had a minimum of 2 years working experience and who had successfully implemented strategies that reduced voluntary turnover of new RNs within their first year of employment. The implications for social change consist of the potential to strengthen the health care workplace environment throughout local communities by improving the quality and continuity of patient care. Reduction in the turnover of new RNs may help stabilize health care organizations' performance to increase mating resources, money, time, and skills to charities. Other implications for positive social change include improvement in health care practices that contribute to

patient's improvement toward wellness and enhance growth and profitability, which in turn might lead to employment opportunities for both the families and the communities.

### **Role of the Researcher**

In qualitative case study research, the researcher serves as the data collection instrument (Kim, Deatrick, & Ulrich, 2016). The researcher also analyzes the data collected from the participants in an unbiased manner (Tella, 2015). I facilitated semistructured, face-to-face interviews throughout the data collection process with each of the study participants. The priority was to protect the integrity of data. Throughout the research process, to reduce bias (a) I documented nonverbal cues, (b) asked for clarification to verify the accuracy of data, (c) used interview procedures, and (d) set aside personal experiences, opinions, and attitudes.

I do not have any direct experience or relationship with the participants because the participants are from a pool of nurse managers whom I have never met. However, I made sure that each participant received fair treatment as prescribed by the Belmont Report. I adhered to the ethical guidelines and procedures from the IRB protocol listed in the Belmont Report (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). A researcher must adhere to three basic ethical principles when dealing with human participants (Skolnik, 2015). These principles are respect for persons, beneficence, and justice when conducting research (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). I called and e-mailed participants to start the first contact and provided a consent form, which is an agreement between the researcher and participants that data

collected will be confidential and kept in a secure place (Pletcher, Lo, & Grady, 2015).

The privacy of the participants, data collected, and trust was protected and maintained by me.

A researcher in qualitative studies must reduce any bias that may affect data collection and data analysis (Peck, Olsen, & Devore, 2015). Interviewers must be at alert to detect when their prejudices, assumptions, and biases conflict with their study (Chamberlain, 2016). The first thing is to ensure trustworthiness in data collection process and complete the National Institute of Health Human Research Protections Course and cut down the bias through bracketing (Raglan & Schulkin, 2014). Bracketing is an essential part of a qualitative research process that allows researchers to understand the participants' responses. As the primary data collector through interviewing the participants and transcribing the response, I analyzed the results of themes (see Moustakas, 1994).

To reduce bias during the interview, I did not choose participants whom I had a prior relationship within the hospital organization, and I limited any unrelated communication that may have interfered with the participants' responses. I also used bracketing to avoid bias, which helped me better appreciate the views of participants within the phenomenon (Marshall & Rossman, 2015). I also followed an interview protocol, which helps to have procedural prompts ready and consistent throughout each interview (Peck et al., 2015). The interview protocol is also essential for increasing the reliability of a case study (Yin, 2015). An interview protocol (see Appendix B) was

established to properly structured interview question and script, so I maintained full concentration during the interview.

Member checking was used to gain feedback from the study participants and validate the perceptions, thoughts, opinions, and intentions of the study (see Roth, Theriault, Clement, & Worthington, 2016). To cut down on the bias and improve the credibility of and trustworthiness of the study, methodological triangulation from numerous sources was used to enhance the reliability and validity of the study (see Yin, 2015).

### **Participants**

Researchers can choose to conduct a study by mirroring multiple participants in a larger population within a setting (Katz, 2015). Researchers consider the addition and exclusion of the benchmark for choosing and recruiting participants (Killawi et al., 2014). The targeted population for this research study consisted of five nurse managers in primary health care facility in Fort Bend County, Texas who have a minimum of 2 years of managerial experience and were full-time employees and at least 18 years of age. I started by conducting an introductory and informational session face to face or through e-mail or telephone requesting for help with the research study. During the interview, the objective was to garner information from participants regarding the timeframe of employment. Participants received a consent form before participating in the study. I waited for 14 days for the participants to return the form via e-mail, whereas others hand delivered them to me before the interview.

The fundamental function of the researcher and the participants' relationship involves giving full disclosure (Peters, Abraham, & Crutzen, 2015). Full disclosure involves making available information pertinent to the data collection techniques used during the research study (De Poy & Gitlin, 2015). I developed a working relationship with the identified participants by letting them know the intent of my research as a part of the informed consent process. The primary task was to ensure that participants' confidentiality as well as acting ethically. I interviewed the targeted population, analyzed documents from the hospital about employee turnover and the possibility of retention until I reached data saturation, and labeled the participants' interview response using coded designators.

### **Research Method and Design**

There are three essential types of methods when conducting research: qualitative, quantitative, and mixed methods (Maxwell, 2016). Researchers use qualitative methods to obtain a rich understanding of the lived experiences of the study participants (Marshall & Rossman, 2016). I selected qualitative research method and a single case study research design because the method was best suited for a study with small sample size, as I explored strategies that nurse managers used to reduce nurse turnover in hospital organization in Fort Bend County, Texas.

### **Research Method**

Researchers use the case study design and qualitative research method as an investigation of a phenomenon and presentation of data from multiple sources of evidence such as semistructured interviews and a review of available documentation. The



qualitative research methods have an advantage over the quantitative method including mixed methods because researchers can use an in-depth interview that align with the research study (Yin, 2017). I chose a qualitative research method to gain an understanding of retention strategies used by health care managers with the consideration of real-life experiences and strategies used to improve employee retention. Qualitative research also allows researchers to ask questions of the participants who have experiences relating to *why*, and *how* the phenomenon under study affects them (Yin, 2015).

Quantitative research involves the use of testing to verify or disprove the hypothesis (Murshed & Zhang, 2016). Quantitative methods were not suitable for this study because the research question did not involve testing hypotheses or examining relationships between variables (see Lastad, Berntson, Naswall, Lindfors, & Syerke, 2015; Sukcharoen & Leatham, 2016). Researchers use the quantitative research method to examine causal relationships between two or more variables (Groeneveld et al., 2015), but I explored perspectives related to strategies for retaining employees. A qualitative approach also enables the participants to freely express their experiences using their own words (Berger, 2015). Mixed methods research consists of a combination of quantitative and qualitative approaches to data collection analysis data, which sometimes has challenges (Saunders, Lewis, & Thornhill, 2015). Mixed methods research is time consuming, complex, and may lack existing data (Scott, 2015). Using a mixed method approach was not suited for this study because the goal was to explore strategies health care managers use to reduce voluntary turnover while keeping experienced RNs.

## Research Design

I selected a single case study design for this qualitative study. A case study design is used to explore real-world circumstances by collecting data through sources such as observation, interviews, and documents (Lunnay, Borlagdan, McNaughton, & Ward, 2015). The other available designs for qualitative research include (a) ethnography, (b) narrative analysis, (c) phenomenology, (d) grounded theory, and (e) case study (Colorafi & Evans, 2016). A case study encompasses *what, where, how, and why* questions and does not need the researcher to control behavior events (Yin, 2017). The case study approach allows the researcher to explore and conduct a comprehensive analysis of experience to gain a full understanding of the real-world perspective (Yin, 2015). The case study design also helps to focus on a smaller population to gather reliable information. Therefore, I used a case study research design to gain insight into the environmental conditions and collect multiple sources of data from participants in the phenomenon. I used semistructured interviews with the prospect for expansion of conversation into different areas of interest through follow-on and additional questions to the interview participant (see Lord, Bolton, Fleming, & Anderson, 2016).

Narrative researchers aspire to capture the historical experiences and activities of individuals over time (Seal & Mattimore, 2016). However, a narrative design was not proper for this study because a narrative design does not relate to the real and present situation and I was not seeking to use accounts from participants to restate stories. Phenomenological designs involve researching the lived experiences of the participants and human experience from the views of those living the phenomenon (Miettinen, 2015).

A phenomenology design was not fit for this study because the purpose was not to explore the lived experiences of participants who share a phenomenon or event, and the design would not have worked for exploring a complex phenomenon within its real-world context (Yin, 2017), which was the intent of this study. Ethnography is a qualitative design that involves observing the culture, perspective, and practices of participants to understand shared experiences (Kaplan et al., 2014). Researchers use an ethnographic design to understand and explore social processes within a company and culture based on *how* and *why* questions (Aij, Visse, & Widdershoven, 2015; Reich, 2015). These aspects of ethnography did not fit with the purpose of the study, and the design can sometimes be costly and time-absorbing (Siwale, 2015). Based on the nature of the study, it was not suitable to use an ethnographic design due to time constraints and financial limitations.

Data saturation is the point in data collection and data analysis at which information from data collected has little or no change to the already found themes (Boddy, 2016; Fusch & Ness, 2015; Leoni, 2015). A population sample size of two or three case studies could be enough to explore a phenomenon if the researcher's applied theory is straightforward and the degree of certainty is not extreme (Yin, 2017). I interviewed five participants for my research, using open-ended interviews with five health care managers and comparing their responses to other information and themes are present.

### **Population and Sampling**

The targeted population consisted of five health care managers from a mid-sized hospital organization in Fort Bend County, Texas. A small population sample is adequate

when conducting a case study (Molenberghs et al., 2014). However, a researcher must make sure that participants represent the total population as possible as well as be small enough to allow an in-depth, case-leaning analysis (Boddy, 2016). A sample size of at least five participants was applicable because it provided data and insight into how an organization can reduce voluntary turnover. I used a single case study design to understand the turnover strategies of participating leaders of health care organization within their natural environment.

### **Population**

The population is a statistical expression that represents the total data set (Gravette & Walnau, 2016). The targeted population for this case study consisted of a purposeful sample of five nurse managers who have worked at a health care organization in Fort Bend County, Texas on a full-term rotational basis who had implemented strategies for reducing voluntary employee turnover. I ensured that participants represented the population and was small enough for analysis (see Boddy, 2016). I classified managers as a supervisor, director of nursing, or nurse managers who have managed nurses and have served as a leader in their various abilities.

### **Sampling Method**

Using a qualitative research method, researchers must not compromise the credibility of their study by providing a rationale for their sampling choices (Marshall & Rossman, 2016). There are many sampling methods available to use in a research study. Some of the most used sampling methods include random sampling, convenience sampling, snowball sampling, stratified sampling, and criterion sampling, (Suri, 2011). A

researcher uses a purposive sampling technique to select participants based on the purpose of the research study and maximize the knowledge of the population (Apostolopoulos & Liargovas, 2016; Barratt, Ferris, & Lenton; Marshall & Roman, 2016). Purposeful sampling was appropriate for selecting participants for this study (see Hoeven, Janssen, Roes, & Koffijberg, 2015), which allowed me to identify and select the participants who had background knowledge, had worked in hospital organization more than 2 years, and have used strategies to reduce employee turnover (see Palinkas et al., 2015). Additionally, the sample size is important to determine data saturation (Fusch & Ness, 2015). In order to reach data saturation, I sampled five experienced participants. An experienced participant helps researchers to collect useful data that result in a rounded and thoughtful information about the phenomenon (Hoyland, Hollund, & Olsen, 2015). Case study researchers may collect data from several sources including interviews, direct participant observations, and documents (Yin, 2015). I contacted potential participants through their contacts, calls, and a recruitment letter. After I sent the consent letters and the participants agreed, a suitable location was agreed on to meet.

To qualify for the study, I looked for participants in hospital facilities who met specific requirements. The criteria were (a) 18 years of age and older (b) nurse manager in a mid-size hospital with a record of implementing retention strategies of nurses, (c) have introduced strategies that reduce voluntary turnover of employees, (d) permanent staff of the hospital, and (e) minimum of 2 years working experience and licensed as a RN or has bachelor of nursing degree. These characteristics helped guide the selection

process to experienced managers who varied in their perceptions and lived experiences with employee retention issues.

### **Ethical Research**

Before starting any interview, I ensured the ethical protection of the participants by getting approval from Walden University's IRB before conducting any research. The study will not begin until approval from Walden University IRB. The Belmont Report ethical guidelines when adhered to assist the researcher in protecting the rights and confidentiality of research participants (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979).

Upon approval of IRB (approval no. 12-24-18-0618318), I sent the consent form to potential participants who met the criteria of the study to assess their willingness to take part voluntarily through the informed consent form via mail. A consent form guarantees the participants that any data collected from them is confidential and will be stored in a secure place (Pletcher, Lo, & Grady, 2015). In the Participant Consent form, I explained in detail to participant on the (a) purpose of the study, (b) procedures, (c) participants right to withdraw at any time from the study with no penalty either verbally, in-person, or telephone (d) confidentiality, (e) my contact, (f) risk and benefits of participating in the study and, (g) compensation (Check et al., 2014). The interview questions are in Appendix A.

The basis of the ethical protection of participants is to provide confidentiality of the participants and the information that they will provide to the researcher (Fisher, 2015). The gathering and storing of data are mandatory to protect the privacy of the

participant (Johnson, 2015). The participant's name and organization's name must not appear on the consent form in order to protect the identity of the participants and organizers. To protect the privacy of the participant's names or organization, I labeled their names as JP1, CP2, EP3, NP4, KP5. The data collected remain in a cabinet on a password-protected flash drive. I kept documents related to the study in a locked file storage cabinet to which only I maintain access to. The files will be maintained in the location for at least 5 years, at which point I will remove the data from the hard drive and shred the written data.

### **Data Collection Instruments**

In the qualitative study, I served as the primary data collection instrument. Yin (2017) noted that a researcher in qualitative research is the primary data collection instrument because he or she can efficiently hear, see, and interpret the collected data. Interviewing through a semistructured face-to-face interview process was my primary method for collecting data. Dasgupta (2015) asserted that semistructured interviews advance the gathering of major information from respondents and encourage the interviewees to give further information on the study concept. The purpose of using the interview method is to gather data using a purposeful selection to interview nurse managers in various departments within the hospital facility in Fort Bend County, Texas. The interview questions (see Appendix A) was used to measure how employee personal perceptions of the job influenced their decision to quit their job, and strategies used by their managers to retain them. The interviews protocol (see Appendix B) consist of open-ended questions and consist of an established structure that promote consistency of the

approach during the interviews. The use of open-ended questions provides consistent data.

I initially contacted each participant by phone or e-mail to schedule appointment and date for the interview. I administered semistructured interview in-person lasting not more than 45 minutes. Before the interview started, I seek permission to record the interview. Additionally, during the interview, took note and documents the response to questions and study the body language of the respondents. Tunheim and McClean (2014) noted that the audio recordings and note taking are two steps aid in conducting effective interviews. After the interview, I reviewed the notes and listen to the audio recording of the interviews, so to identify and classify the emerging themes from all the responses from the participants. The feedback from the note and the interviews (data collection) were re-confirm through a member checking process from the participants. Member checking serves as a quality control process in qualitative research to improve the reliability and validity of data collected during the interview (Harvey, 2015).

As the researcher, I reviewed documents and describe the participants' responses to ensure reliability and make sure that there is no bias in the proposed study. The process for accessing reliability and validity involved receiving feedback from participants, the triangulation of multiple data collections methods and interpreting a descriptive analysis of the case study result.

### **Data Collection Technique**

The data was collected using in-depth semi-structured face-to-face interviews adhering to interview protocol such as archived documents, direct participant



observation, secondary data relating to turnover rate from the United States Bureau of Labor Statistics website, hospital public sites, and performance evaluation used by the nurse managers who participated in the study. The use of multiple sources identified above, enhance the validity of my study (see Fusch & Ness, 2015; Oleszkiewicz et al., 2017).

Interviews in a case study enhanced the participants to describe the phenomenon independently (Seidman, 2015). As part of my technique, I ensured that the meeting location is well prepared and meeting times are communicated far enough in advance to plan accordingly. The device was tested to make sure that it is working right, and enough space is available to store information. Before starting the interview, I answered questions that participants might have at the beginning of the interview. I asked for permission before audio recording and reminded the participants about their right to withdraw at any time during the study. I noted the date, time, and meeting location of the participant's choice, at the same time observe the nonverbal, pause, and tone. I used my iPhone six mobile and a recording device as a secondary recorder as a backup.

Finally, I requested for the employee's handbooks from the participants as part of the secondary data. I also got approval from the IRB, and collect potential participants contact information. Initial contact with the potential participants will be through the email which contains consent forms and the invitation letter. After receiving the consent feedback, I scheduled a face-to-face semi-structured interview appointment with the time, date, and location of the first meeting. Prior to the interview date, discussion question sent to the participants. I followed up with each participant a day before the scheduled

interview to remind them about the meeting through email. On the day of the interview, I elaborated in full detail about the study and reminded them of their right. While implementing member checking, after the meeting, I sent the participants a transcription of the interview with a request for feedback regarding the clarity of the data collected. Data saturation occurs when the researchers have gotten to the depth of data collection, and there is no new information, but the repetition of the same answer is occurring.

A semi-structured interview technique is employed as one of the best methods when conducting face-to-face interviews. Dasgupta (2015) reasons include: (a) complicated interview question is simplified, so participant doesn't look confused during the meeting, (b) enjoys full communication both verbal and non-verbal communication to depict nonverbal cues, (c) visual aids may be available to ascertain the participants viewpoint fully, and (d) The interviewer's physical presence help to understand any discomfort from participant. Hence, it is an ethical way to conduct (McIntosh & Morse, 2015). The disadvantages of using face-to-face interviews include the inability of the researcher to have the required skill to involve the participants in a meaningful discussion. A face-to-face interview is costly, and distraction may result in low quality of information. A third disadvantage consists of the physical presence of the interviewer that may affect the participant's response to some answers. Similarly, the participants may feel unease or self-conscious when asked to respond to a sensitive question during the interview (Vogl, 2015).

### **Data Organization Technique**

Johnson (2015) suggested that a researcher using a qualitative method will assign a generic code to each of the participants in order to protect the identity of the participants. The identity of the participants was masked using JP1, CP2, EP3, NP4, KP5 to label the participant. I am the only person that has access to the information after the data collection process. The data collected is filed and secure in a password locked computer to ensure they were not lost or misplaced. I also kept a research spreadsheet log and updated the data as I collect it. The stored data were secured and locked in two distinct locations, along with a backup file of which only I will have access. The transcribe data from the recording is formatted in a word document and data collected is stored in a flash drive electronic password-protected (see Camfield & Palmer-Jones, 2013). The received data are stored in a secure location and kept for five years. Elimination of irrelevant data is desirable. At the end of five years, I will delete the information in the flash drive, and shred the paper data in order to conform with the IRB requirements to protect privacy and confidentiality of those that will participate.

### **Data Analysis**

Analyzing research data entails organizing the data, reviewing, coding, and then develop themes. Marshall and Rossman (2016) posit that the reason for data analysis is to establish meaning out of the data through the interpretation of data during a research process. Yin (2017) described data analysis to include a researcher working with the research data to uncover essential themes, patterns, and descriptions that answer the central research question. A well-established interview protocol and a semi-structured

interview technique to collect information appropriate for answering research questions and analyze the descriptions of their experiences to explore the phenomenon in a real-life setting (Leskovec, Rajaraman, & Ullman, 2014). Answering questions that depict the central research question will enhance relevant information confirming data saturation (Fusch & Ness, 2015).

At the end of the interview, relevant documents such as the employee's evaluation, seminal work, an employee's handbook will be used as part of my reference when analyzing the final report. A methodological triangulation is used by the researcher to ensure valuable and in-depth information is received (Pucher et al., 2015; Wilson et al., 2014). Van Dijk, Vervoort, Van Wijk, Kalkman, and Schuurmans (2015) asserted that methodological triangulation sources consist of the comparison from different sources including document review, and interviews to help determine consistency and in-depth data findings.

NVivo 12 software is used to analyze and understand analytical data (Hutchison et al., 2010). I organized, mapped, and sort the collected data using NVivo 12 to analyze the data. The advantage of using NVivo software is to store, organize and categorize data into themes, labels, ensure that coding is consistent with achieving study conclusion (Adewunmi, Koleoso, & Omirin, 2016).

Data analysis involves several steps: (a) compiling, (b) disassembling, (c) reassembling, (d) interpreting, and (e) concluding (Yin, 2017). The conceptual framework for this study is Herzberg's two-factor theory. The research questions used to

understand the multiple perspectives on why employees' leave their job derived from the central research question.

### **Reliability and Validity**

LoBiondo-Wood and Haber (2014) stated that reliability and validity are two analytical measuring instruments used by the researcher to test a theory and have a broad impact on the strength and extent to which bias is present and how the result can affect the study's internal and external validity. A researcher ensures validity and reliability in qualitative research using the following four steps to assess reliability, validity, soundness, and trustworthiness; (a) dependability, (b) credibility, (c) reliability, and (d) confirmation (Elo, Kaariainen, Polkki, Utriainen, & Kyngas, 2014; Soy, 2015)

#### **Reliability**

Member checking is a tool used to establish the validation and reliability of the study (Hadi & Close, 2016). Anney (2014); De-Vault (2016); and Yin (2017) highlights the importance of using member checking to validate the participants' opinion after the interview, and to identifies and reduces the possibility of researcher's bias particularly during collection, interpretation, and analysis of data. Researchers use member checking to reach in-depth information and boost creditability (Simpson & Quigley, 2016). I arranged to see the participants for member checking meetings to certify my interpretation of the interview data were correct.

The evaluation measurement used in data collection must be consistent and dependable (Anney, 2014). Dependability occurs when a researcher can replicate the findings of research and document the specifics of research processes in the following

method (Byrman & Bell, 2015; Matamonasa-Bennett, 2015; O'Brien et al., 2014). Fusch and Ness (2015) indicated that the researcher should use member checking after a qualitative interview to confirm and increase the dependability of a study and to ensure the accuracy of the participant's data has transcribed. Gunawan (2015) posit that researchers establish dependability to fathom how reliable the research methods are. The interview findings, interview notes, and company records used to develop the dependability of the data. Also, to validate a diverse perspective and enhance dependability and credibility, I will pay attention to any personal biases that may influence the findings.

### **Validity**

Methodological triangulation and member checking were used to measure the study results and establish the validity of the inquiry. Validity in qualitative research is contingent on a researcher's experience and trustworthiness (Marshall & Rossman, 2016; Merriam & Tisdell, 2015). Four factors contribute to the validity of qualitative research: (a) credibility, (b) transferability, (c) dependability, and (d) confirmability (Marshall & Rossman, 2016). Morse (2015); Miller, Moon, Anders, Walden, Brown, and Montella , (2015) posit that validity of qualitative research can be achieved when there is enough information that is credible and supports the transferability, dependability, and conformability of a study. Triangulation is another evaluation tool used to validate data when using multiple sources. To achieve triangulation, a researcher asks similar questions to diverse study participants and gather data using multiple sources to improve the reliability and validity of findings (Yin, 2015; De-Vault, 2016).

**Credibility**

The credibility of research occurs when the participants deduct and confirm the research findings from the researchers to be true after conducting an extended verification (Cope, 2014). To ensure credibility in a qualitative study, researchers establish the credibility of their research through their capabilities and research efforts (Olson, McAllister, Grinnell, Walters, & Appunn, 2016). Patton (2015) noted that triangulation enhances credibility when a variety of data are collected from various sources to collaborate evidence as a result leading to consistency in the outcome of the study. It is essential for a scholar to use member checking instead of a transcript to validate the participants' opinion after the interview in order to be credible (Yin, 2017).

**Transferability**

Transferability indicates that a study can be the transfer or use by future researchers other than the original researchers (Yilmaz, 2013). Marshall and Rossman (2016) highlighted the importance of transferability as the ability of future researchers to acknowledge and utilize the knowledge gained from exploring the initial. Researchers should provide enough information on the participants and the research perspective to facilitate the reader to establish the findings' capability of being transferable (Cope, 2014).

**Confirmability**

When a researcher demonstrates that the data collected during the interviews represent the participants' responses and not including any researchers' biases or personal viewpoint (Cope, 2014). Confirmability is possible when the accuracy of research results

findings can be check, corroborate and ascertain by numbers of independent scholars. To verify the data collection process, member checking and probing during the interview will be conducted. Marshall and Rossman (2016) asserted that techniques such as follow-up member checking interviews, methodological triangulation, and probing questions during the interview process are used to confirm the overall results of the study and improve the confirmability of research results. The data collected by the participants should continue until follow-up member checking interviews, evaluation of organization's records and no new information or themes are detected in the data, leading to data saturation (Boddy, 2016).

Data saturation in qualitative research occurs when no new themes, information, coding or patterns emerge by the study participants and the possibility to replicate the study is possible especially if participants respond to the same question within the time frame of the study (Fusch & Ness, 2015; Ragab & Arisha, 2014). Data saturation occurs when the researchers have gotten to the depth of data collection, and there is no new information, but the repetition of the same answer is occurring. Yin (2015) emphasized the significance of data saturation in qualitative case study designs. In a case study design, data saturation is not about the sample size large or small but based on the need study, and the more modest sample size is quicker to reach data saturation because there is a fixed limit of the sample size (Fusch & Ness 2015).

### **Transition and Summary**

In Section 2, I provided a comprehensive account of the qualitative research study method, including the justification for a qualitative single case study research design and



methodology. I described the role of a researcher, the purpose, participants, research method and design, population and sampling method, the need for ethical research, data collection, data analysis, and data organization techniques. I discussed the significance of data reliability, and validity which includes dependability, and credibility of the study. Lastly, Section 2 also consists of details regarding credibility, transferability, dependability, methodological, and data saturation.

Section 3 contains eight subheadings elements beginning with an overview of the study which includes the presentations of the research study's results, application to professional practice, and implications for social change. Section 3 also details my recommendations for a further research study on employee turnover and nurse retention strategies. I chose section 3 with my personal reflections, summary, and conclusions.

### Section 3: Application to Professional Practice and Implications for Change

#### **Introduction**

The purpose of this qualitative single case study was to explore the strategies that nurse managers used to reduce voluntary turnover of new RNs within their first year of employment. I conducted in-depth, face-to-face interviews with open-ended questions with five nurse managers employed by a hospital in Fort Bend County, Texas. In addition to the semistructured interviews, I collected organizational documents such as policy letters, training records, and memorandum. The conceptual framework that grounded the study was Herzberg's two-factor theory and Maslow's hierarchy of needs. NVivo 12 Pro was the central research database for all qualitative data collected for this study. The themes were amassed using NVivo 12 Pro thematic and coding. The findings revealed three themes that nurse managers used to reduce nurse turnover: (a) job satisfaction, (b) leadership support, and (c) training and development. The findings have implications of effective professional practices relating to strategies that nurse managers use to reduce employee turnover and retain their high-performing nurses.

#### **Presentation of the Findings**

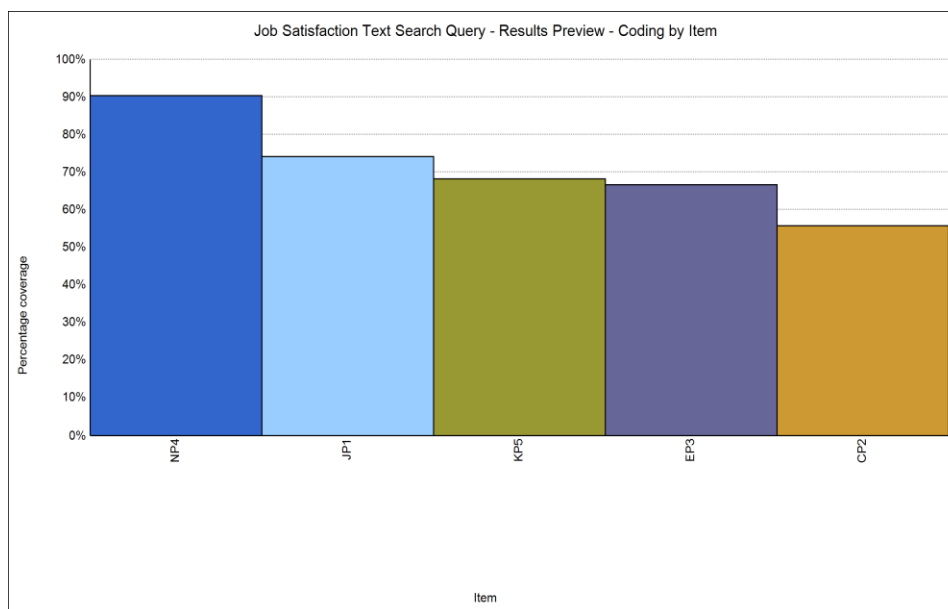
The overarching research question for this qualitative single case study was: What strategies did nurse managers use to reduce voluntary turnover of new RNs within their first year of employment? To answer the research question, I conducted face-to-face, semistructured interviews with open-ended questions with five experienced hospital nurse managers in Fort Bend County, Texas who 2 years of management experience in had at least reducing employee turnover as well as retaining their high performing

employees. The analysis of the organization's policy, memorandum, website, training records, policy documents and interviews with many participants constituted methodical triangulation. Methodological triangulation sources including document review and interviews help determine consistency and in-depth data (Van Dijk, Vervoort, Van Wijk, Kalkman, & Schuurmans, 2015). I transcribed the interview data into Microsoft Word files and uploaded the file into NVivo 12 Pro to categorize codes and create themes. I used member checking to ensure data saturation and authenticity of the participants' responses. I reached data saturation after the fifth interview; therefore, no new information, themes, or codes emerged. The themes developed from the findings aligned and supported the central research question, conceptual framework, and literature review. Three significant findings emerged that are critical and support the strategies necessary for nurse managers to reduce voluntary turnover of new RNs. The findings indicated that all participants acknowledged that (a) job satisfaction, (b) leadership support, and (c) training and development are critical strategies that nurse managers use to reduce voluntary turnover of new RNs within their first year of employment. Each of the themes is addressed and discussed individually in the next section.

### **Major Themes**

Thematic analysis, charts, and graphs were developed using NVivo 12 Pro to provide a visual aid to help analyze and identify patterns in the data. Figure 1 is a word cloud map from the analysis of the data collected.





*Figure 2.* Job satisfaction text search query

### **Theme 1: Job Satisfaction**

Managers who understand the needs of their employees and strive to achieve these needs will eventually improve retention, motivation, and job satisfaction. Job satisfaction has been known to have influence employee performance (Kakar, Raziq, & Khan, 2015). If employees are satisfied with their job, it can lead to employee commitment to work as well as boost the intention to stay (Kakar et al., 2015). Among the many factors that can influence employee performance, job satisfaction is one of the best retention strategies that reduces employee turnover (Platis, Reklitis, & Zimeras, 2015). Each participant (JP1, CP2, EP3, NP4, and KP5) acknowledged the impact of voluntary turnover and recommended that improving employees' job satisfaction will increase worker dedication to the mission and motivate employees to work harder and stay longer with their organizations.

Mentoring and orientation can help integrate employees into an organization and improve individual career development, which increases job satisfaction. Newly licensed nurses who have observed that they are well received and supported by their employer have acknowledged high levels of satisfaction (Strauss et al., 2016). Further, new graduates who have participated in the transition program put in place by an organization have had a smoother transition compare to those who did not participate (Rush et al., 2015). Support for new employees was also indicated by participants in this study. JP1 noted that she met weekly with each new employee going through orientation to make sure they were where they needed to be and were bonding with the team. EP3 also noted the importance of having a routine of checking in with the nurses at the beginning and end of each shift to make sure that they are meeting the organizational goals of quality patient care. JP1 agreed with EP3 and noted the importance of quarterly, by-quarterly, and yearly progress meetings with each member of the nursing staff to provide them with an assessment of their job performance. Although CP2 expressed the importance of meeting regularly with staff to listen to their needs, CP2 highlighted the importance of building relationships with everyone on the team.

The need for adequate supervision, compensation, interpersonal relations, achievement, competency, personal growth, assessment, and working conditions are some of the factors that affect job satisfaction (Herzberg et al., 1959). NP4 expressed frustration after being transferred to the medical–surgical unit, noting that the turnover rate on that unit was 138% with many nurses fired, quitting, or resigning. NP4 was responsible for identifying the causes of the turnover in the unit. After thorough

questioning from the staff and other working in that unit, NP4 identified the leading causes to be lack of trust with leaders and staff and lack of flexibility and support from their managers and experienced nurses. NP4 further emphasized the importance of the charge nurses building relationships with their staff, knowing the names as well as strengths and weaknesses of each team member. NP4 also noted that increased job satisfaction leads to lower turnover because employees with high job satisfaction are less likely to look for another job opportunity. JP1 and NP4 concluded that as much as leaders are responsible for the job satisfaction to their employees, employees are also responsible. The theme of job satisfaction supports Herzberg et al. (1959) and Yurumezoglu and Kocaman (2016) and has links to the subtheme, communication.

### **Communication**

Communication is a subtheme referenced by all participants as a key factor in retaining new RNs long-term. Table 1 reflects a thematic synthesis of patterns noted in frequency and references based on the level of importance from the participants' perspectives. The aggregated findings were produced through a text query of the theme job satisfaction that was conducted in NVivo 12 Pro. The text query narrowed the content to multiple variations of generalizations to detect patterns within the job satisfaction theme. As a result, NVivo 12 Pro produced references and frequency patterns of the training and development themes from the inputted interview recording, transcriptions, and company documents. NP4 had the highest references and frequency of noted job satisfaction throughout the collected data, which indicated that NP4 placed a higher value than other participants did for this theme. JP1 and KP5 had the lowest levels of reference

noted for job satisfaction throughout the collected data, which may indicate a lower ranking of importance when identifying critical strategies used to reduce voluntary turnover of new RNs.

Table 1

*References and Frequency of Job Satisfaction*

Source	Reference	Frequency (%)
JP1, Interview Questions/Company Documents	14	22.97
CP2, Interview Questions/Company Documents	11	22.16
EP3, Interview Questions/Company Documents	20	26.78
NP4, Interview Questions/Company Documents	23	27.68
KP5, Interview Questions/Company Documents	11	22.12

The fundamental proposition of Herzberg's two-factor (1987) theory was relative to leaders increasing employee job satisfaction and job performance through effective communication. The participants highlighted the importance of communication as a strategy for retaining experienced employees. Communication builds credibility with workers and leaders who are consistent, concise, and clear in interacting with their subordinates. Most of the participants highlighted the importance of honest communication from leadership with clear expectation critical to success. The five participants stated that all the employees desire organizational acceptance and believe communication promotes a positive organizational culture. KP5 noted that the lack of honest dialogue between management and employees could lead to distrust. As a result,



the lack of confidence in management was noted to lead to dissatisfaction and increase the turnover of the employee. Honest and sincere communication from a higher hierarchy that promotes cooperation and trust between the chain-of-command and employees, as a result, fosters job satisfaction (JP1, CP2, and EP3).

Leaders must engage employees through one-to-one communication to improve employees' confidence and perception of the organization (Li, Kim, & Zhao, 2017). CP2, EP3, and KP5 noted that nurse managers should communicate with their nursing staff by engaging in daily unit meetings and update the team in any current policies or changes so that everyone can speak in one voice. JP1 encouraged nurse managers to conduct daily meetings with their nursing staff to discuss the issues of the day. All participants noted that it is critical for management to build relationships with staff and implement a reliable communication system. JP1 further observed that establishing consistent support is also crucial to the quality of patient care. All participants concurred that communication reduces turnover. Furthermore, JP1 emphasized that going beyond staff expectations was another form of positive support for a nursing team.

Effective communication is not interpreted only by speaking words but through nonverbal gestures, attitudes, demeanors, and frequency of contact constituted the employer's communication style (Lou, Song, Gebert, Zhang, & Feng, 2016). Lack of appreciation is another factor linked to communication that affects work-life balance (Lopamudra, 2017). Participant EP3 stressed that some organizations do not treat staff members well on the unit, especially in front of patients or family members. KP5 further implied that many hospitals neglect to appreciate staff members in the workplace for

the sake of pleasing the patient or families. As a result, of poor management and lack of support nurses leaving rapidly.

There is an increase in dissatisfied workers because of negative evaluations by upper management (Herzberg et al., 1959). CP2 indicated that using constructive criticism does not have to be in the form of punitive only but can come in the form of recognition and praise. A sentinel event is an unanticipated event that occurs in health care facilities often leading to patient death or permanently injury (Joint Commission on Accreditation of Health care Organizations, 2019). EP3 argued that managers could conduct quality assurance and training after the consequences of a sentinel event instead of employee termination. Overall, communication is a subtheme referenced by all participants as a critical factor in retaining new RNs long term, which is supported by Herzberg et al. (1959).

### **Compensation**

The subtheme compensation was also referenced by all participants as important in retaining new RNs long term. Staff members can achieve employee satisfaction in various ways. Job satisfaction has been equated with job security and compensation that motivates employees (Purohit & Bandyopadhyay, 2014). Researchers have identified two types of rewards that motivate employees: intrinsic rewards (i.e., recognition, promotion, responsibility, training, recognition) and extrinsic rewards (i.e., pay, bonus, benefit, promotion opportunities; De Gieter & Hofmans, 2015; Khan et al., 2017; Malik et al., 2015). All the participants stated that competitive salary and bonuses appreciations are a vital part of retaining nursing staff long term. CP2 stated that compensation is a tool to

manage human capital, especially nurses employed with jobs that are stressful and demanding. From a psychological standpoint, compensation can influence the quality of employees, employee attitudes, and behaviors, which may hinder quality, creativity, innovation, and other outcomes critical to successful operations (Gupta & Shaw, 2014). KP5 asserted that competitive compensation is an effective strategy to reduce voluntary employee turnover and increase productivity.

JP1, CP2, and EP3 suggested that insufficient compensation is a contributing factor to why nurses quit their jobs. JP1, CP2, and EP3 further exclaimed if the organization offers better attractive salaries and bonuses, the probability of retaining employee may increase. On the other hand, NP4 and KP5 implied that compensation was not a determinant factor of why nurses leave a job. CP2 noted that new graduates initially start at a lower salary range and move to a new position after gaining more experience. The effectiveness of rewarding and recognizing employees helps to impact employee performance (Malik et al., 2015). Similarly, EP3 suggested that the element of incorporating financial incentives is crucial in retaining nurses' overtime. However, EP3 noted that incentives are also often unfairly distributed as it is initially given to top performing RN.

Leadership can reduce employee turnover and increase retention by encouraging and motivating employees. The idea of rewarding and recognizing employees for their quality performance is backed by psychological and economic theories which come from performance-based incentives, gains sharing, profit sharing, and bonus (Bareket-Bojmel et al., 2014). JP1 suggested that proper staff management is crucial, particularly the

ability to accurately assess employee needs, and ensure that employee salaries match experience, credentials, and qualifications. Likewise, CP2, EP3, and NP4 also articulated that competitive compensation should be part of the organization's retention strategy. The use of intrinsic and extrinsic rewards to motivate employees is encouraged, but too much of these could be harmful to the organization (Khan et al., 2017).

Compensation is supported by Herzberg's (1974) positive link to job satisfaction which identified salary as one of the hygiene factors that increase job satisfaction. Herzberg suggested that when workers are happy with their compensation, they satisfied and tended to stay at the organization longer. Job satisfaction and salary satisfaction are driving forces that affect employee satisfaction (Herzberg, 1987). Herzberg et al. (1959) emphasized that factors such as the pay act as a satisfier; which have a positive effect on job satisfaction. A vital element of the two-factor theory is that the pay structure should be appropriate and reasonable. It must be equal to a competitive pay structure offered by other members in the same organization in the same locality.

## **Theme 2: Leadership Support**

The second theme to occur from the findings highlights insights of the participants' experience with leadership support as a key strategy used to reduce voluntary turnover of new RNs. The theme leadership support emerged from the participants Interview responses from questions 3, 4, 5, 6 and 7 as shown in figure 3 below.

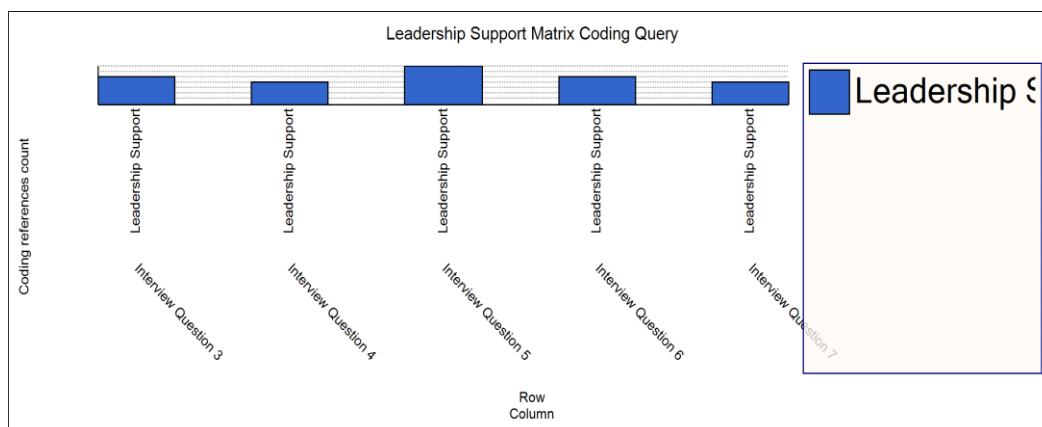


Figure 3. Leadership support matrix coding query.

One-hundred percent of all participant (JP1, CP2, EP3, NP4, KP5) agreed that ongoing support from leadership is a critical strategy in mitigating voluntary turnover of new RNs. Figure 4 reflects over 100% of the theme leadership support referenced and 100% coverage in each participant (JP1, CP2, EP3, NP4, KP5) transcript.

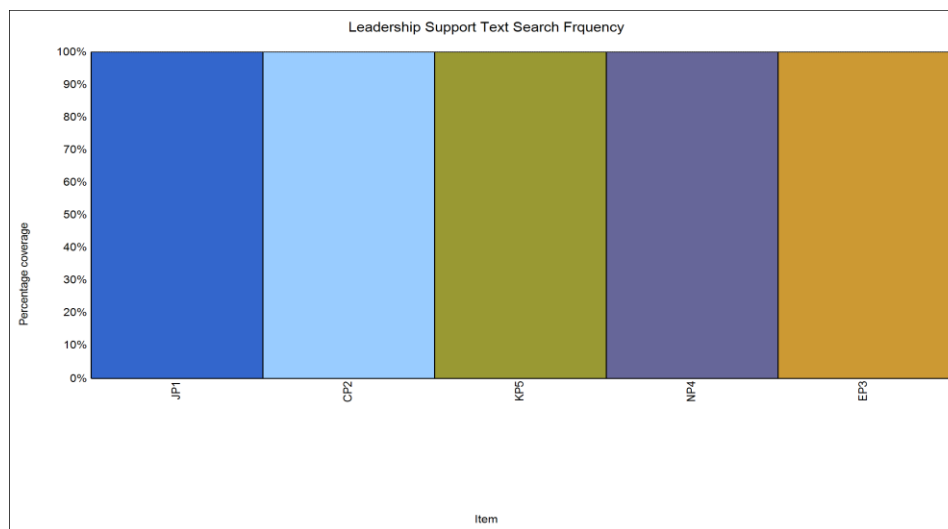


Figure 4. Leadership support text search query.

The nurses often demanded a job design that promotes autonomy that reduces system failure, increases leadership development, and team training as the satisfying need

for their pleading. When employees are satisfied with their pay, leadership support, and the daily decision of the organization, they will be less likely to leave the job for reasons other than retirement (Leider, Harper, Shon, Sellers, & Castrucci, 2016). The inability of a leader to motivate employees to stay in the organization, and increase the quality of care, can be attributed to the leadership style of that leader. Cheng, Bartram, Karimi, Leggat, and Cheng (2016); Mikkelson, York, and Arritola (2015) asserted that transformational leadership style plays a significant role in enhancing employee job satisfaction, improve employee's commitment and relationships within organizations, healthy work environment, and favorable climate that enhance employees' well-being and reduce turnover intentions. Nurse managers are directly responsible for the day-to-day leadership, the Administrative, and operations activities of their unit.

Okan and Akyuz (2015) posited that employees resign their positions not because of the job requirement, but because of the way and manner that their managers treat them. NP4 stated that for a manager to employ a corrective action to the staff, he or she must know their strength and weakness and build a relationship. Participant JP1 Stated that managers should always engage leadership styles that are impartial and supportive of to their staff, while CP2 posit that managers should always listen and be attentive to their subordinates' needs and provide necessary tools needed to succeed in their capacity. Hence, leaders should make sure that their followers understand their purpose in the organization and what constitutes goal achievement. According to Hussain, Akram, Haider, Hussain, & Ali (2016L) leadership support and involvement, help in retaining high-performing employees. Participant CP2 argued that employing an open-door policy

support system is crucial for nurses. Participant KP5 re-affirmed the importance of managers to always appreciate the employees for what they do. The ability of leaders to inspire, motivate, and praise their employees in public, will encourage subordinate to take ownership of their jobs (Aldatmaz, Ouimet, & Van Wesep, 2018; Eberly et al., 2017). Furthermore, nurses desire support from management that is involved and willing to assist where needed.

Unstable leadership, lack of communication and care are some of the problems identified by CP2, EP3, and NP4. CP2 stated that they work endless hours weekly and often neglect self-care due to the demanding nature of the work. Participant KP5 noted that appreciation reduces burnout. Although participant NP4 argued the importance of positive recognition, NP4 emphasized honesty and taking advantage of opportunities to build trust through rapport are critical to nurse retention.

### **Burnout**

The theme of leadership support is supported by Herzberg et al. (1959) and have a definite link to the sub-theme, nurse burns out. Nurse burn-out is a subtheme referenced by all participants as a critical factor in the reasoning for ongoing leadership support. Health care leaders are comfortable in cutting down the old barriers and foster shared leadership models, participative leadership styles that make employees feel valued as participants in the decision-making process (George, 2015). For managers to implement dynamic, innovative and retain their employees, they must create a conducive environment that will promote employee engagement, improve reward and compensation, increase. A leader with transformation ability has a positive effect on

employee satisfaction and can enhance a robust collective style that empowers and engage employees' organizational culture and a sustainable future for the company (Collins et al., 2015).

Table 2 reflect a thematic synthesis of patterns noted in frequency and references based on the level of importance from the participants perspective. The aggregated findings were produced through a text query of the theme Leadership and Support that was conducted in NVivo 12 Pro. The text query narrowed the content to multiple variations of generalizations to detect patterns within the Leadership and Support theme. As a result, NVivo 12 Pro produced references and frequency patterns of the training and development themes from the inputted interview recording, transcriptions, and company documents. Participant (EP3) had the highest frequency of leadership and support references throughout the collected data which dictated that (EP3) placed higher value then other participants did for this theme. Conversely, participant (JP1) had the lowest reference of leadership and support noted throughout the data which indicated a lower ranking of importance when identifying critical strategies used to reduce voluntary turnover of new RNs.



Table 2

*References and Frequency of Leadership Support*

Source	Reference	Frequency (%)
JP1, Interview Questions/Company Documents	18	38.83
CP2, Interview Questions/Company Documents	31	64.43
EP3, Interview Questions/Company Documents	32	68.43
NP4, Interview Questions/Company Documents	33	41.85
KP5, Interview Questions/Company Documents	26	57.86

Nursing is a physically and emotionally demanding profession that requires commitment and dedication (Su Bonn & Cho, 2016). Low nurse retention in the hospital is attributed to challenging assignments and extraordinary intensities of job-related burnouts. According to Zhang, Wu, Fang, Zhang, and Wong, (2017), burnouts or occupational stress occurs to newly graduated nurses during their transitional period from school to work environment due to lack of interpersonal relationships, and overwhelming workload forcing them to engage in a career change from the nursing profession. Participant, EP3 stated that the first year is the most critical period due to high demands and expectations of the job. Participant, KP5 further noted that the nursing profession has become more challenging due to the use of technology, charting, customer services with patient and family needs.

When organization experienced an increase in workload and lack of support, employees are prone to leave, and organizations may encounter loss of productivity, low

morale of high-performing workers (Strom et al., 2014). Participant, KP5 implied that the nursing profession has become more challenging due to more extended working hours and back-to-back shifts. Nurses are experiencing extreme fatigue and burnout. JP1 referred to numerous events relating to staff indicating burn out due to emotional stress from the job. On the other hand, participant, CP2 argued that nurses leave the workplace due to workplace injuries from long periods of standing, and even loss of sleep.

According to Su Bonn, and Cho (2016), organizations expect up to 62.6% of employee turnover to occur as a direct result of employee burnout. Participant, CP2 empathically stated that new nurses rarely get proper support from seasoned nurses, and as a result, become overwhelmed are dissatisfied and leave. Participant EP3 also agreed with CP2 regarding the lack of support received from season nurses, but implied that seasoned nurses could not provide additional support due to the ratio of six patients to one nurse. JP2 emphasized that nurses accomplish a high volume of task daily that often threatens patient health and safety, and so the support from management is critical. Participant, KP5 suggested that the nursing profession is stressful, because of the short staff that affects the overall productivity of employees and may sometimes lead to medical error if not properly monitored.

Job satisfaction and work-life satisfaction are strongly correlated with commitment (Shahid & Azhar, 2013). Kakar, Raziq, and Khan, (2015) noted that Herzberg (1974) hypothesized that job satisfaction is the individual driving force that affects worker satisfaction. Hence, Job satisfaction has a positive correlation with the intention to stay (Yurumezoglu & Kocaman, 2016).

Nurse burn-out is a subtheme referenced by all participants (JP1, CP2, EP3, NP4, KP5) as a significant factor in voluntary turnover of new RNs. In the qualitative research survey conducted by Jawahar and Soundria (2015) concluded that when managers fail to take the problem of work-life balance seriously, it can affect the stability and professional success of an employee. Nantsupawat, Nantsupawat, Kulnaviktikul, and McHugh (2015) posited that an organization whose employee experienced job dissatisfaction, emotional exhaustion, and burn-out would experience lower patient satisfaction which as a result affect the quality of patient care and nurses' health and well-being. Herzberg et al. (1959) theorized that hygiene factors (i.e., working conditions, job security, supervision, and pays) are some of the causes of job dissatisfaction, and to achieve job satisfaction and reduce the possibility of employee dissatisfaction, leaders must pay attention to each job factor.

### **Teamwork**

A team is composed of members who are dependent among each other and share common goals by coordinating their activities to accomplish these service goals (Northouse, 2016). Participants, JP1, CP2, and NP4 stated that creating supportive teamwork foster friendship and improve the relationships between the nurses and their leaders, which in turn may help reduce employee turnover. Participant, KP5 implied that support should be displayed by providing the necessary tools nurses need to perform their job functions properly. KP5 and EP3 also suggested that management look for positive synergy that allows their organization to increase performance. All participants agreed that it is crucial for management to provide clarification, mentorship, training and any

other resources and tools that will promote job satisfaction and completion (JP1, CP2, EP3, NP4, and KP5). The extensive use of team creates the potential for an organization to generate higher output with no increase in input (JP1, CP2, EP3, NP4, and KP5). Effective team leaders ensure that they have a meaningful and common purpose that provides clear direction, momentum, and commitment to their Team (CP2 and KP5).

Participant JP1 suggested that a dedicated leader creates a conducive working environment that encouraging training and development of a seasoned nurse. Teamwork builds confidence and reduces turnover (JP1, CP2, EP3, NP4, and KP5). For a team to achieve his main objectives, the company's culture needs to support the member's involvement and help achieve the overall goals of the organization (Northouse, 2016). Support is not limited to, adequate staffing, timely information, proper equipment, and administrative assistance. However, the consensus of all the participants shows that, by creating a supportive work environment, leaders can improve teamwork and increase retention.

Participant, JP1, and CP2 suggested that team leader should attempt to initiate a path-goal mentality in such that they are available to assist their fellow teammate in attaining the overall goals of the organization. Thus, the provided direction and support for the team helps to reduce roadblocks. Some of the factors identified to affect the well-being of the team include the use of technology, and positive group interaction (Gilson, Maynard, Young, Vartiainen, & Hakonen, 2015). The theme teamwork supports the Herzberg et al. (1959) concept of leadership support. Teamwork is a subtheme referenced by all participants as a critical factor mitigating the voluntary turnover of new RNs.

### Theme 3: Training and Development

The final major theme to emerge from the data highlighted the concept of training and development as a critical strategy used to reduce voluntary turnover of new RNs.

Using the matrix coding query as shown in Figure 5, the theme training and development a large amount of data emerged from the participant's interview responses from Questions 1, 2, 4, 7 and 8.

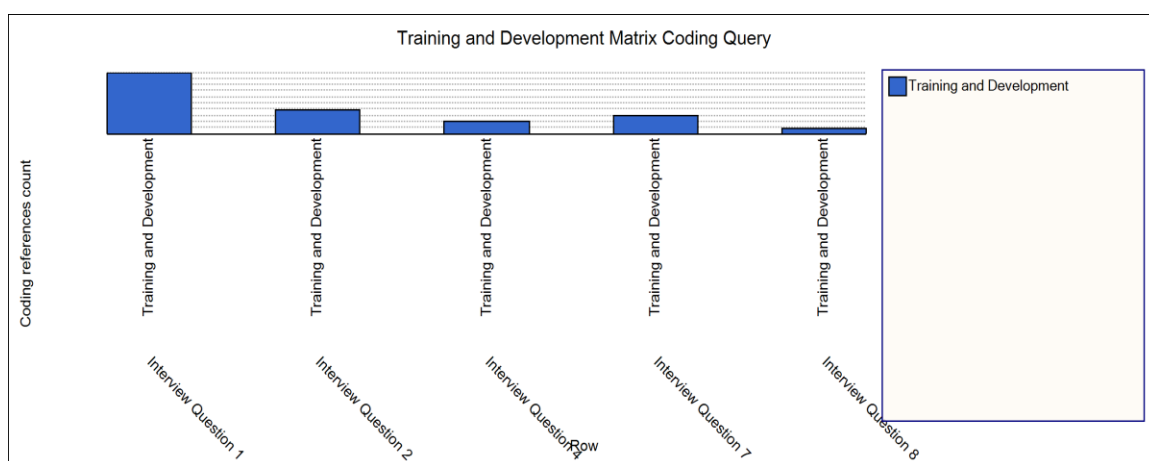
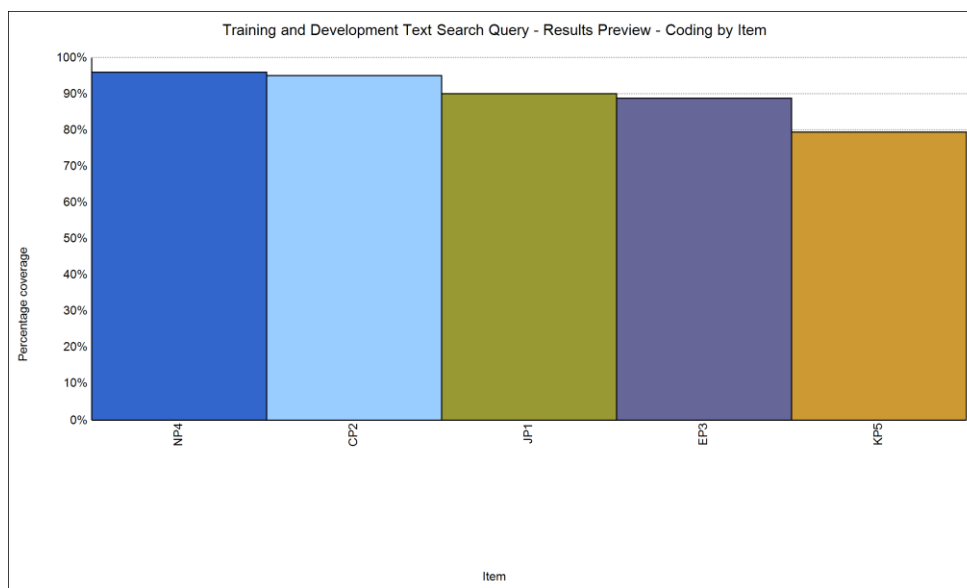


Figure 5. Training and development matrix coding.

One-hundred percent of all participant (JP1, CP2, EP3, NP4, KP5) agreed that ongoing training and development by management and season nurses is a critical strategy in mitigating voluntary turnover of new RNs. Figure 6 reflects over 90% of the theme training and development referenced with over 75% of coverage in each participant (JP1, CP2, EP3, NP4, KP5) transcript. Participant NP4 and participant CNP4 had the highest reference for job satisfaction of over 90% of coverage. Participant KP5 reflected the lowest reference of coverage of job satisfaction at 80% within the transcribed data.



*Figure 6.* Training and development text search query.

Employees are the backbone of a company and positively affect the outcomes of the organization when adequately trained and developed. Chen (2016) noted that specific factors such as training, promotion opportunities and career advancement, can tremendously influence employee's turnover and retention and invest in human capital growth. The local nursing school has a joint agreement to future and current nursing students to continue to have valuable training that will meet the 21st century technologically and clinical needs. JP1 and CP2 stated, providing training and professional development opportunities to employees, helps to improve motivation, increase retention and reduce turnover. Adequate employee training and development, help keep talented workers, preserve knowledge within the organization, increase job satisfaction, loyalty, employee engagement, and help employees to satisfy psychological contracts between their employer resulting to organizational commitment (Rodriguez & Walters, 2017).

After reviewing the company's documents, I discovered that the hospital placed a high priority on the development and training of employees. Hospitals provide opportunities such as tuition assistance, reimbursement programs, and other financial incentives toward employees educational and training. Similarly, participant JP1 suggested that leaders and the organization collectively should allocate more funding towards the year-long training and continuing education programs for nurses.

Chakrabarti and Guha (2016) posit that organizational leaders validate their commitment to their employee development by providing training and development prospects. CP2 re-iterate on the importance of managers to devote time to the educational needs of learning about the best practices, and familiarization of changes in the medical treatment. JP1 stated that lack of funding prevents nurses from attending training critical to their job functions. Likewise, EP3 argued that organizations should cultivate leadership by focusing on developing future leaders within the organization that may, in turn, improve continuity, stability, and employee retention. Organizations highlight the importance of training and development to the prospective employee and current employees who have developmental potential (Tanwar & Prasad, 2016). JP1 added that seasons nurses should employ continued training and development support to meet the organization's growing challenges.

Participants JP1, CP2, and NP4 elaborate on the importance and success of nurse orientation and residency program as it shapes the nurses and familiarizes them to unified policies and procedures. EP3 suggested that a useful developmental resource often employed in the health care field is training through peer mentorship. KP5 agreed with

participant EP3 but implied in addition to peer mentorship that management should establish an individualized career plan from the start of their profession. Nurse managers use various ways to support and encourage their staff to further acquire more education. Participant CP2, EP3, and KP5 stated that organizations should continue to offer workshops, weekly or monthly training, and continue education programs as a necessary instrument in motivating nurses to continue to advance within their discipline and decrease retention.

The theme training and development is supported by author Herzberg (1949) link to leadership support. All participants (JP1, CP2, EP3, NP4, KP5) noted training and development as a critical factor mitigating the voluntary turnover of new RNs. All the participants (JP1, CP2, EP3, NP4, KP5) confirmed it is essential for a new nurse to receive unit and organizational training. Maslow's theory elaborates on the roles of organizational culture of improving employees' performance for advancement as a need to attain self-actualization. While Herzberg theorized that by providing employee advancement and growth opportunity, can influence their job satisfaction. EP3 and NP4 mentioned the significance of providing career opportunity and advancement help keep the employee in the organization. Herzberg stated managers who want to increase in job satisfaction, must focus on providing the employees with opportunities for advancement.

Table 3 reflects a thematic synthesis of patterns noted in frequency and references based on the level of importance from the participants perspective. The aggregated findings were produced through a text query of the theme training and development that was conducted in NVivo 12 Pro. The text query narrowed the content to multiple



variations of generalizations to detect patterns within the training and development theme. As a result, NVivo 12 Pro produced references and frequency patterns of the training and development themes from the inputted interview recording, transcriptions, and company documents. Participant (NP4) had the highest frequency of training and development references throughout the data which indicated that (NP4) placed higher value than other participants did for this theme. On the other hand, participant (EP3) had the lowest reference of training and development noted throughout the data which may indicate a lower level of importance when identifying critical strategies used to reduce voluntary turnover of new RNs.

Table 3

*References and Frequency of Training and Development*

Source	Reference	Frequency (%)
JP1, Interview Questions/Company Documents	23	42.15
CP2, Interview Questions/Company Documents	30	43.66
EP3, Interview Questions/Company Documents	23	28.80
NP4, Interview Questions/Company Documents	35	44.09
KP5, Interview Questions/Company Documents	13	32.88

### **Applications to Professional Practice**

From a business and health care organization's perspective, job satisfaction is significant in improving the health care organization's performance (Correia, Dinis, &

Fronteira, 2015; Ismail, Romle, & Azmar, 2015). The focus of this qualitative single case study was to explore the strategies used by nurse managers to reduce voluntary turnover of the RN within their first year of employment. The interpretation of the study participant's interview responses and analysis of company documents, and company's website information help me to identify four main themes: (a) job satisfaction, (b) leadership support, and (c) training and development. The findings from this research study are relevant and significant to the retention of RNs. The research derived from this study contributes to the understanding that nurse managers applied influence over their RN employees through the core themes of the study.

The findings of this study provide supervisors, managers, business professionals, and organizational leadership with insights into the intricacies of job satisfaction and what causes turnover among RNs within their first year of employment. As nurses play an essential role as a caregiver and a multi-tasker, health care managers should develop management best practice to further enhance training opportunities, rewards program, recognition, career advancement, and other retention strategies that can help to reduce turnover and increase other motivational factors that increase employee retention (Wu & Chen, 2015; Neckermann & Yan, 2017). Leaders can strategically address high employee voluntary turnover rates in organizations when they are aware of the contributing factors. An effective retention strategy begins with how well management promotes a positive and inclusive culture. Egner et al. (2017), posited that organizational culture must reflect the overall behavior of patients and employees, which as a result lead to employee retention, improve quality of care, promotes healthy outcomes, and reduce medical error.

Researchers have indicated that high employee turnover can increase recruitment and orientation cost, low quality of patient care and a shortage of enough experienced nurse to train new nurses (Hayward et al., 2016).

The scarcity of RNs can influence the quality of patient care; managers must focus on developing a leadership style that increases motivation, and satisfaction of staffs. Nurse managers can benefit from the perspective or strategies that other season managers have used to effectively reduce RNs turnover, as well as leverage many strategies available to increase the retention of seasoned and valued nurses. The participants of this study identified more training and retraining opportunities for season nurses. Hee and Kamaludin (2016) posited that the creation of a useful knowledge sharing system would help improve employee satisfaction and job performance, as well as productivity and profitability of the organization. Business leaders can offer competitive pay, effective communication, advancement, new nurse orientation program, valued ownership of their unit, involvement in the clinical and administrative function as options to strategical reduce voluntary employee turnover and increase retention of their most experienced employees.

### **Implications for Social Change**

The implications for social change resulting from the reduction of employee turnover of new RNs may help stabilize health care organizations' performance to increase mating resources, competitive compensation, a conducive environment that promotes job satisfaction. Without a trained and dependable RN, hospital management cannot meet their organizational mission of providing valuable health care services to

their community because of the reduced productivity (Hayward et al., 2016). The findings of this study revealed that high employee turnover increase recruitment and orientation cost negatively affects the profitability of the hospitals, low quality of patient care, and a shortage of enough experienced nurse to train new nurses. When organizations are profitable, managers can develop expansion strategies that will lead to new employment opportunities, sustain corporate growth and improve the overall social condition of people in local communities. An increase in employment opportunity in the hospitals can positively contribute directly to the community by encouraging a stable workforce capable of providing for the families, and the sustainability of individual needs.

Managers can strengthen the health care work environment throughout local communities by improving the quality and continuity of patient care. The success of the organizations may provide an opportunity to reinvest in the communities by promoting educational programs such as scholarships, health, and wellness. Shortage of nurses tremendously affects the quality of patient care provided by the health care industry. Because of the critical roles that RNs play in the management of chronic disease in patients with diabetes, hypertension, and critical control and monitoring of risk factors, as well as the quality of patient care within the U.S. health care system, retention of the happier workforce is important (Snaveley, 2016).

The findings of this study revealed that a successful leader is that leaders that use its scope of influence to motivate employees to put in their very best in achieving corporate objectives. The ability of a leader to direct, lead and motivate teams to work

proficiently and successfully results in the success of the organization (Zubanov, Katic, Grubic-Nesic, & Berber, 2017). Leaders of any business organization can use the results of my study to increase job satisfaction and reduce employee turnover, hence create positive social change, which can lead to sustainable business practice, increased profitability, organizational growth that successfully promote new employment opportunities for the people leaving in the communities. The use of effective and efficient retention strategies by managers, administrators, supervisors, could result in positive results relating to a stable and sustained workforce, reduction of medical error, increase job satisfaction, quality of patient care, economic growth, and organizational success.

### **Recommendations for Action**

My focus in this research study was to explore the strategies used by hospital managers to reduce voluntary turnover of the RN within their first year of employment. Renowned researchers former and current have identified the adverse effects of employee turnover to the nurse manager's ability to provide quality patient care, as well as achieving the bottom-line and long-term stability of the organization (Dong, 2015). Since increased employee turnover might affect the quality of patient care, it is critical that organizational leaders care about the implementation of effective employee strategies at their organization. The data shared during the interview by the participants might provide new insight health care leaders can use to reduce voluntary employee turnover at their various organizations.

Nurse managers in the hospital can leverage the findings from this study to reduce employee turnover by creating a supportive work environment, advancement opportunity,

leadership and season nurse support, effective communication from both nurse managers and management, teamwork, training & retraining and competitive compensation. The failure to strategically and effectively implement employee turnover is untenable and might tremendously hurt RN's overall working experience. Furthermore, the knowledge acquired in this research study may help contribute to the success of global health care organizations struggling with high employee turnover rates. By reducing employee turnover, organizational leaders can promote growth, sustainability, and help retain an experienced professional who the organization cannot lose because of their years of nursing experience.

I will disseminate the findings of this study to health care organizations and nursing schools. I will share the summary of my results with health care leadership, managers of partner organization, human resources manager department as part of the organization's continuing education's training. Also, I intend to submit a summary of this study to the following professional journals: The National Society of Leadership and Success, and The Journal of Health and Human Experience. Finally, I will seek to share this finding with professional conferences, seminars, and through the ProQuest/UMI dissertation database for future scholars.

### **Recommendations for Further Research**

The purpose of this research study was to explore the strategies that the nurse manager uses to reduce voluntary turnover of the RN within their first year of employment. The results of this study reflect the opinions of nurse managers from a single health care facility in Fort Bend County Texas. I recommend that further

qualitative research study is replicated in other health care facilities such as long-term care facilities, and private medical offices in different geographic locations and develop an in-depth understanding of RNs voluntary turnover, and ways to address job satisfaction. Although, my study will only reflect the perceptions of a small population of nursing managers, and years of experience, which may not be the generalization of a broader community. A follow-up study should entail identifying employees who are not managers and have worked for a specified amount of time and why they remain in their current role in the organization. Gaining the perspectives of RNs' from an employee point of view might provide researchers with different perceptions of employee turnover.

The findings reveal numerous factors why RN is not satisfied with their job, and why there is high employee turnover within a year of employment. Future researchers have more opportunity to conduct further research. Researchers need to explore the different factors that affect job satisfaction and employee turnover and other factors such as leadership support, advancement opportunity, competitive compensation, and educational support. Researchers may add to the limited literature, and discover additional insights and strategies used by nurse managers and health care leaders to reduce RN turnover and increase job satisfaction. Furthermore, researchers can conduct research using different nurse specialist such as medical-surgical, emergency room, pediatric, intensive care unit, and other nurse specialists to see if the outcome of the study is a same or different result. Finally, instead of using five participants to collect data, future researchers should use a more significant population sample and expand the geographical location to gain more additional information. I also recommend that future

researcher uses qualitative multiple case study, quantitative or mixed method to gather more data.

### **Reflections**

My decision to research high voluntary turnover of the newly graduated RN emerged from my professional experiences after working in many nursing home facilities. I witnessed how high turnover affected my previous organization. The difficulties and bad strategies that these previous organizations use to manage these nurses inspired me to want to know more about the best strategies to reduce voluntary turnover of those nurses. Although I worked in related health care facilities, my role as a researcher to conduct a qualitative single case study is to collect data without injecting any bias from past experiences to increase the reliability and ethical standard of my findings. During the process of reviewing the literature, collection and analyzing data, I learned more about the complexity of the nursing profession, and the impact of employee turnover on the patient and the organization's bottom-line. Sharing these findings, health care leaders, and other organizational leaders can have the necessary tools to reinforce their insights on understanding the importance of promoting a conducive working environment that encourages supportive leadership and teamwork as a strategy to reduce voluntary turnover of nurses.

### **Challenges**

When you feel like quitting, think about why you started. My journey throughout this program has been full of challenges and disappointments to the extent of losing my dream job at the department of states because of conflicting schedules, time and



resources. Every time I felt like quitting, the graduation of my classmate or the residency, I attended reminds me to stay the course and re-affirm my commitment to completing my study to become a Doctor of Business Administration. I am very grateful to Walden University for expanding my experiences and adding to my knowledge in this area of research.

### **Conclusion**

Employee turnover can impact the strategic productivity, profitability, and sustainability goals of any organizations. Organizations with high voluntary employee turnover, tend to lose in productivity and profitability. Using data collected from semi-structured interviews with nurse managers from a hospital in FortBend County, Texas who responded to 8 open-ended interview questions, and a review of organizational documents help me to finalize the findings. Including compensation, training, and development opportunity, leadership support, effective communication between managers and employees, promoting job satisfaction, and conducive environment could reduce employee turnover.

The study's findings also supported Herzberg's two-factor motivator-hygiene theory with seven motivators that were identical or very similar to Herzberg's theory. The Identified themes and sub-themes that influence voluntary employee turnover strategies were: (a) job satisfaction, (b) communication, (c) employee compensation, (d) reward and recognition, and (e) leadership support and teamwork.

The goal of any organization is to improve increase productivity, as a result, lead to an increase in organizational profit. Among the measures identified in this study job,

satisfaction should be address because of its correlation to employee turnover. Hence, corporate leaders who take a step to address job satisfaction with their workers is likely to reduce voluntary employee turnover and increase employee retention. Furthermore, business leaders, managers, and supervisors should take the necessary steps to re-evaluate their recruitment and hiring process to reduce the high-performing employees resigning from their positions. It will help the Organization to increase sustainability and survivability will depend on the ability of nurse managers to manage and keep their employees in the organization and promote organizational growth which can lead to positive social change in the area which they serve.

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## Appendix A: Interview Questions

Date of Interview: \_\_\_\_\_ Code Assigned: \_\_\_\_\_

1. What is your experience with the turnover of new nurse graduates in your organization?
2. Based on your experience, why do new registered nurse's RNs leave their job within their first year of employment?
3. What strategies have you used in the past to improve retention and reduce employees' voluntary turnover?
4. What successful strategies are you using to reduce voluntary turnover of new RN graduates?
5. What strategies did you find least effective in reducing turnover of RN graduates?
6. How did you assess the effectiveness of the strategies for reducing employee's turnover?
7. What were the key barriers to implementing your organizations' successful retention strategies for registered nurses during their first year of employment with your organization?
8. What additional information can you share about your strategy to reduce voluntary nurse turnover of newly registered nurses during their first year of employment with your organization?

## Appendix B: Interview Protocol

Interview # \_\_\_\_\_

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Interview Protocol****Introductory Script**

Good morning/afternoon. My name is Ayanfemi Ayanwale, I am a doctoral candidate at Walden University. I am conducting my doctoral study on strategies nurse managers use to reduce voluntary turnover of new RNs within their first year of employment, which I will present in partial fulfillment of the requirements to complete my Doctor of Business Administration degree. I appreciate your participation in this study. Before we begin, I would like your permission to digitally record this interview, so that I will later be able to create a transcript of our conversation. If, at any time during this interview, you would like me to stop recording, please feel free to let me know.

[Now, I will begin recording].

For the benefit of this recording, the date, time, and participant number are [speak date, time, and participant number]. For the benefit of this recording, the date, time, and participant number are [speak date, time, and participant number]. Will you please provide verbal consent to this recording and subsequent transcript creation to allow me to capture your consent on record? Once the transcript of this interview has been created, you will be offered an opportunity to review the transcript to ensure that your intent and meanings were accurately captured.

All information that you provide me will be kept confidential; your name, company, and geographic location will not be used in the study findings. I will be using your responses to examine themes and strategies nurse managers use to reduce voluntary turnover of new RNs within their first year of employment. Please remember that your participation is voluntary and you have the right to stop this interview at any time. If at any time you would like to take a break, please do not hesitate to let me know. Do you have any questions before we begin?

**Interview Questions: CHAT-III Framework**

Ice Breaker: What is your role in your company? How long have you been with your company?

1. What is your experience with the turnover of new nurse graduates in your organization?
2. Based on your experience, why do new registered nurse's RNs leave their job within their first year of employment?

3. What strategies have you used in the past to improve retention and reduce employees' voluntary turnover?
4. What successful strategies are you using to reduce voluntary turnover of new RN graduates?
5. What strategies did you find least effective in reducing turnover of RN graduates?
6. How did you assess the effectiveness of the strategies for reducing employee's turnover?
7. What were the key barriers to implementing your organizations' successful retention strategies for registered nurses during their first year of employment with your organization?
8. What additional information can you share about your strategy to reduce voluntary nurse turnover of newly registered nurses during their first year of employment with your organization?

### **Interview Closure and Thank You**

I would like to take a moment to thank you again for your time and your invaluable answers. I will be transcribing this information over the course of the next few weeks; if you are willing, I would like to send you a copy via email to review to ensure that I have accurately captured the intent of your answers and give you the opportunity to clarify any of the information that you provided today. This too is voluntary; would you like me to send you the transcripts for you to review or are you comfortable with not reviewing them? Again, thank you for your time and thoughts. If you have any questions or additional comments, please do not hesitate to reach out to me as I am happy to resolve any needs you may have.