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King Faisal Specialist Hospital & Research Centre

Exemplary Professional Practice
Bridging Cultures through Shared Values in a Professional Environment of Partnership

EP10EO – Staffing, Scheduling, and Budgeting Processes

EP10EOb: Provide one example, with supporting evidence, of improvement of a clinical unit's nurse turnover rate associated with clinical nurses' participation in nursing retention activities.

- *Turnover rate data must be in the form of a graph and a data table.*
- *Data presented must be at the unit level.*

Example EP10EOb: Improvement in Overall Organization Nurse Turnover Rates Through Clinical Nurses' Participation in Retention Activates

Problem

Monthly and quarterly Register Nurse (RN) turnover rates are provided by the Nursing Recruitment and Retention department to the Executive Director, Nursing Affairs; Deputy Executive Director, Nursing Affairs; Program Directors; and unit nurse managers known as Head Nurses.

The expectation is that clinical nurses and the manager of the nursing units would review the data for reasons for turnover as defined by the National Database of Nursing Quality Indicators (NDNQI), i.e., controllable or uncontrollable turnover, and address areas for improvement together.

The nurse manager and clinical nurses reviewed the reported data for the Pediatric Intensive Care Unit (PICU). The RN turnover rate was 9.8 % for the first quarter of 2019.

Goal Statement:

Reduce RN turnover rate in PICU at KFSHRC-J.

Participants

Table EP10EOb.1 below lists the Nursing Affairs participants involved in improving PICU RN retention and includes clinical nurses who were members of the PICU Unit Council, sub-groups, and project teams.

Table EP10EOb.1: PICU Team for improving RN Turnover

Name & Credentials	Job Title	Department
Monishya Peter, BSN RN	Staff Nurse 1 (SN1), Clinical Nurse, **Unit Council Chair**	PICU
Alzahraa Alolasi, BSN RN	SN1, Clinical Nurse, **Unit Council Co-Chair**	PICU
Nouf Janbi, BSN RN	SN1, Clinical Nurse	PICU
Ghadah Almowallad, BSN RN	SN1, Clinical Nurse	PICU
Anu George, Dip.N RN	SN1, Clinical Nurse	PICU
Smitha Thomas Dip.N RN	SN1, Clinical Nurse	PICU
Sini Mathew, Dip.N RN	SN1, Clinical Nurse	PICU
Sheeba Joseph, Dip.N RN	SN1, Clinical Nurse	PICU
Lini Ulahannan, Dip.N RN	SN1, Clinical Nurse	PICU
Khryi Tanatrah, BSN RN	SN1, Clinical Nurse	PICU
Rawabi Baker, BSN RN	SN1, Clinical Nurse	PICU
Tintu Paul, Dip.N RN	SN1, Clinical Nurse	PICU
Sherehan Jubran, BSN RN	SN1, Clinical Nurse	PICU
Julie Ras, BSN RN	SN1, Clinical Nurse	PICU
Mohannad Badokhon, BSN RN	SN1, Clinical Nurse	PICU
Amnah Aqeely, RN, BSN	SN1, Clinical Nurse	PICU
Moayad Hishki, BSN RN	SN1, Clinical Nurse	PICU
Almira Umayam, BSN RN	SN1, Clinical Nurse	PICU
Binu Jacob, Dip.N RN	SN1, Clinical Nurse	PICU
Aseena Irshad, BSN RN	SN1, Clinical Nurse	PICU
Shylaja Saradamma, BSN RN	SN1, Clinical Nurse	PICU
Pearl Palacios, BSN RN	SN1, Clinical Nurse	PICU
Ligi Thomas, Dip.N RN	SN1, Clinical Nurse	PICU
Najeh Albatainah, BSN RN	SN1, Clinical Nurse	PICU
Salah Mnaizel, BSN RN	SN1, Clinical Nurse	PICU
Ludy Catina, BSN RN	SN1, Clinical Nurse	PICU
Divya Krishnankutty, BSN RN	SN1, Clinical Nurse	PICU
Amjad Aldowsari, BSN RN	SN1, Clinical Nurse	PICU
Jemmarie Aceremo, BSN RN	SN1, Clinical Nurse	PICU
Rhaeza Tuban, BSN RN	SN1, Clinical Nurse	PICU

Malak Alnukhali, BSN RN	SN1, Clinical Nurse	PICU
Haia Aldosary, MSN RN	Head Nurse	PICU
Samir Abu Heija, BSN RN	Nurse Clinician	PICU
Mohammed Qabajah, BSN RN	Program Director	Nursing Speciality Services

Description of the Interventions

The RNs planned a coordinated effort in PICU with support and guidance from the Head Nurse Haia Aldosary, MSN RN, and Nurse Clinician Samir Abu Heija, BSN RN, to implement retention activities to improve RN turnover.

The following interventions and activities were completed from April 2019 to December 2019 (Q2, Q4, 2019) in order to achieve the goal:

The Creation of Sub-Groups and Teams, including all Clinical Nurses, to the Unit Council (UC)

In April 2019, sub-groups to the UC were developed and implemented to empower all RNs and give them the authority to raise working concerns and make decisions as a strategy to increase staff autonomy. All RNs were either members of the UC, sub-groups or a specific project team. The formation of these groups allowed all clinical nurses to be involved in a group and actively participate in unit-related activities to resolve identified gaps and problems. Each group had a leader who developed an achievable goal for the year, reporting back to the UC at monthly meetings. Being part of a group and working toward a common professional goal was envisioned so that all RNs would feel encouraged to provide the best of themselves, achieve professional satisfaction, and boost unit morale.

The newly formed sub-groups RN members and outcomes are presented below:

Oracle Stores/Supplies Sub-Group

This group was created to assist in streamlining the supply needs of the unit. This resulted in all staff being aware of supply issues and shortages and suggesting improvements to assist with these concerns. Clinical nurse members included Moayad, Khyri, Sheebah, Smitha, Aseena, Rhaeza, Malak, Alzahraa, and Nouf.

Accreditation Updates and Preparation Sub-Group

Clinical nurse members were Sini, Monisheya, and Ligi. This group was created to assist in providing updates and preparing the unit for accreditations, such as Joint Commission International, Magnet®, and Central Board for Accreditation of Healthcare Institutions (CBAHI). All staff were aware of accreditation preparations and could participate in

continuous accreditation readiness as advocated by the Nursing Practice and Research department responsible for Nursing Affairs accreditation preparation.

Recognition and Social Events Sub-Group

This group was responsible for arranging celebrations and social events for the unit and individual achievements. Clinical nurse members included Monisheya, Ghada, Lini, Nouf, Monisheya, Alzahra, and Sherehan. This group implemented the following on the unit:

A Suggestion Box

As a strategy to address staff satisfaction, the Recognition and Social Event group leader introduced the idea of a suggestion box where nurses could write any issue that could be addressed anonymously if this was their choice. The clinical nurses received the idea well, and this was supported by the unit management team, Haia, and Samir. The suggestion box was implemented in May 2019.

The box was placed in an accessible area and locked. Haia opened the box each month, shared the issues raised, and problem-solved with the UC members. This promoted an environment where nurses could raise concerns without fear of reprisal and have their voices heard. The majority of feedback from the nurses received in the suggestion box was scheduling requests which were easily accommodated. Two issues reported anonymously from May to December 2019 were personal complaints about a colleague, which were resolved individually by Haia. Feedback from nurses was positive, and they enjoyed having the option of using the suggestion box to help resolve issues.

Star of the Month

The sub-group decided to revamp the PICU Star of the Month program. This program had previously been started in 2018; however, it was not held regularly nor fairly awarded based on nurse feedback. The revitalized Star of the Month program started on June 16, 2019.

Criteria for the award were set by the sub-group and were awarded by a voting system. Two staff would be awarded each month. The award recipient was presented with a certificate signed by Mohammad, Program Director for PICU, a cash gift to the value of 50 SAR, which was provided from cash donated by the PICU staff, and their photo placed on the unit recognition board.

Feedback from nurses was that this was a successful program, and they considered their efforts valued and appreciated.

Quality and Practice Sub-Group

The Quality and Practice Sub-Group was created to review unit outcome measures and best practices needs. Clinical nurse members were Alzahraa, Najeh, and Shylaja. This group conducted infection control audits, quality-related inspections/observation audits, and in-service education sessions centered around the organizational Zero Harm initiative. The Quality and Practice Sub-Group was also responsible for updating the PICU Quality Board, ensuring quality results were shared and known by all staff. The following quality and practice project was implemented under this sub-group:

Unit Safety Huddle Pilot Trial

Clinical nurses Alzahraa, Nouf, and Khyri were members of a performance improvement project titled *"Improving the Patient Safety Culture in the Pediatric Intensive Care Unit (PICU)."* The main intervention implemented for this project was a pilot trial of daily interdisciplinary unit-based safety huddles during 2019.

Internal Professional Development Peer Groups Established During 2019

The following groups were established in collaboration with Haia and Samir:

New Charge Nurse Team

This group included clinical nurses Lini, Tintu, Ligi, Mohannad, Amjad, Alzahraa, and Nouf. This group offered support for new charge nurses who needed to be mentored in their new roles by senior charge nurses. Charge nurses who received mentorship reported being supported in this role and more confident in their decision-making.

Preceptor Support Team

Members of this group included clinical nurses Ghada and Smitha. The group offered support for all preceptors to complete their assigned preceptorship of new staff and discussed problems experienced by new staff and the preceptors. Preceptors who received mentorship reported being supported in this role and more confident in guiding their new peers and new graduate RNs in becoming part of the PICU team.

Professional Organization Membership: American Association of Critical Care Nurses (AACN) support

Haia and Samir presented to the RNs about the available professional organizations and those related to pediatric intensive care, where membership is supported by the Professional Development Council. Three clinical nurses, Rhaeza, Alzahraa, and Jemmarie, became members of the AACN. They had access to evidence-based resources specific to PICU and the online peer community of nurses.

These three RNs were able to guide their peers about the process of becoming a member of a professional organization. As a result of this guidance, clinical nurse Aseena shared
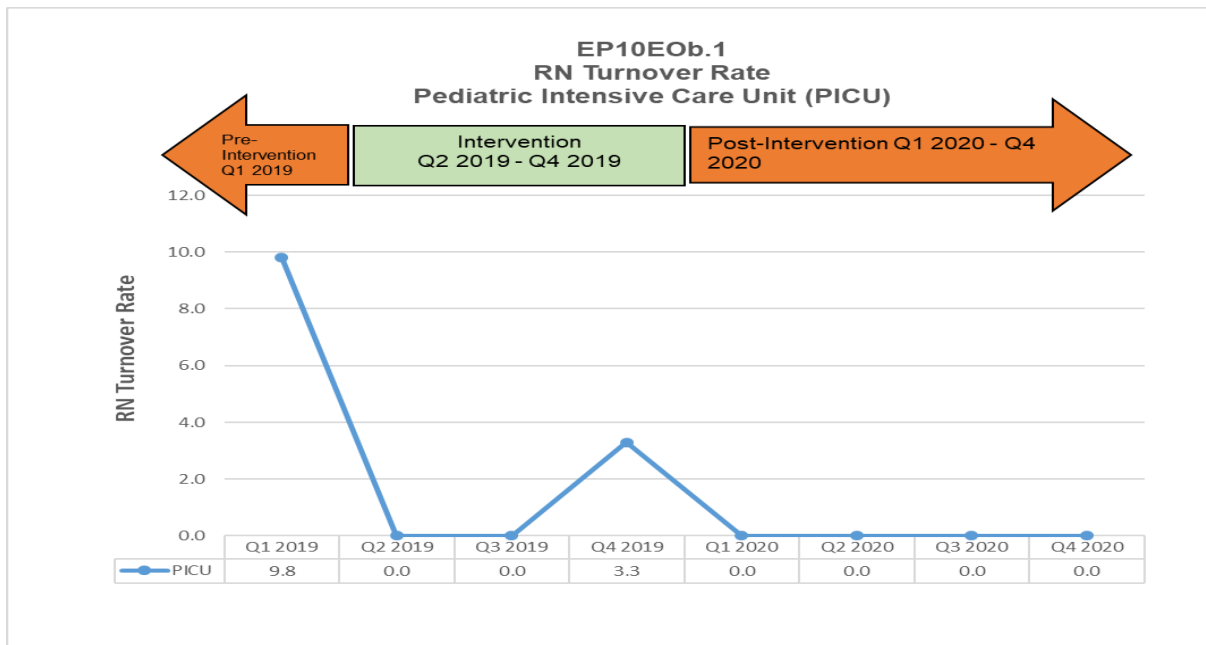
her experience of becoming a member of AACN with the unit to encourage others to participate.

Summary

By improving PICU nursing teamwork through the variety of activities implemented, there was a notable improvement in team spirit and sharing a common bond by celebrating achievements. The focus on professional growth and new opportunities to make decisions related to the work environment, responsibility, and nursing autonomy, had positive outcomes on PICU RN turnover.

Outcome

PICU achieved an improvement in RN turnover rate by Q4, 2019 and sustained with zero turnover through to Q4, 2020, as shown in Graph EP10EOb.1 below.

EP10EOb.1
RN Turnover Rate
Pediatric Intensive Care Unit (PICU)

	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
PICU	9.8	0.0	0.0	3.3	0.0	0.0	0.0	0.0

Graph EP10EOb.1: Improved PICU RN Turnover Rate, 2019-2020