INTRODUCTION

The nursing workforce is in a crisis caused by:
- the nursing shortage
- alarming rates of clinician burnout
- poor patient outcome

This is expected to produce 1 million vacant positions within the next 5 yrs.\(^1\)

Turnover rates and burnout continue to increase nation-wide while the workforce remains disengaged\(^2\).

Although a national survey revealed that approximately 85% of healthcare systems viewed retention as a key strategic imperative, it was not apparent in their operational planning\(^3\).

The COVID-19 pandemic has acted as an accelerant, exacerbating workforce burnout & turnover. This negatively impacts qualitative outcomes & costs an organization $300,000 for every 1% increase in turnover rate\(^4\).

OBJECTIVES

The goal of this DNP project is to improve meaning and purpose in work by accomplishing the following aims:

1. To develop a model protocol for nurses and other healthcare team members to utilize the Institute of Healthcare Improvement (IHI) framework in co-designing the path to accomplish a shared goal.
2. To implement and evaluate the protocol in Primary Care.
3. To scale the project to the entire LAC+USC Primary Care service line and look to sustainability.

METHODS

This project addressed nursing retention by promoting engagement, interconnectedness, and shared governance in a varied group of healthcare professionals working in the COVID-19 vaccine clinic at LAC+USC Medical Center.

A closed virtual platform using Instagram was created using anonymous handles to enhance communication and transparency. The aims of this project include:

1. To develop a model protocol.
   - Disseminate the pre-survey using the Meaning and Joy in Work Questionnaire (MJWQ) and one question from the Turnover Intention Scale 6 (TIS-6) through Qualtrics.
2. To implement and evaluate the protocol in Primary Care.
   - Using the IHI Framework, develop a roadmap based on participants’ responses in the virtual environment.
   - Disseminate Post MJWQ+TIS-6 survey through Qualtrics.
3. Refine and sustain project and scale to all of Primary Care.

RESULTS

The project was completed 3/1/21. Expansion to other clinics in Primary Care is currently in progress starting with the leadership team.

There was a trend in post-survey results suggesting an improvement in meaning and purpose in work among participants. A total of 43 participants completed the pre-survey while 29 participants completed the post-survey.

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Pre-Survey Mean</th>
<th>Post-Survey Mean</th>
<th>Percent Increase</th>
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</thead>
<tbody>
<tr>
<td>Value and Connections</td>
<td>4.07</td>
<td>4.53</td>
<td>11.30%</td>
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<tr>
<td>Meaning</td>
<td>4.26</td>
<td>4.72</td>
<td>10.70%</td>
</tr>
<tr>
<td>Caring</td>
<td>4.42</td>
<td>4.79</td>
<td>8.37%</td>
</tr>
<tr>
<td>Intent to Leave</td>
<td>4.09</td>
<td>4.1</td>
<td>0%</td>
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</tbody>
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Value added by this project were the documented responses to IHI questions, validating the literature & providing information which leads to actionable interventions.

Project should be extended over 6-12 mos. to further evaluate impact on retention by measuring intent to leave.

This project is foundational to develop a model retention blueprint currently missing in healthcare; and contributes to workforce retention while positively impacting financial margins.

REFERENCES


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