When Chrystal Moore was named nursing director of Unit 3C at Kentucky-based Baptist Health Paducah in January 2015, one of her first tasks was to fill several positions that were vacated the preceding year, primarily by retiring nurses. Among the nurses she hired to provide care for the postoperative lung, urology and vascular surgery patients in the 31-bed unit were seven “who happened to be millennials,” she said, referring to the generation born between 1980 and 2000. Within six months, six of those seven had left for positions in other units or other hospitals.

The millennials’ departures meant she would again be faced with insufficient staffing, and that this likely would have a negative effect on employee engagement and, by extension, patient experience. Fortunately, Moore said, the millennials had worked on the unit long enough for her to identify the work habits, attitudes and expectations this generation of nurses possesses, which enabled her to develop and implement strategies that would attract and boost the engagement of this demographic.

“For example, they’re very quality-driven and expect to be perfect at their jobs right out of the gate,” Moore said. “They also want and expect to be part of a team,” an attribute she believes comes from their use of social networks and their interactions with peers, which have made them good collaborators.

In addition, millennials want to have a relationship with their leader, need to feel valued and appreciated and need to feel like the job they’re doing is making a difference—perhaps more so than Gen Xers and baby boomers, according to Moore. And because millennials are digital natives, they have an affinity for technology. “For example, they can pick up electronic charting so much more easily than older nurses,” Moore said.

Stacey Young, director of patient relations for the hospital, added that, as children, millennials’ lives typically were highly structured, and they tended to receive a steady stream of positive attention, reinforcement and feedback from their parents, teachers, coaches and other adults in their lives. Accordingly, as adults, millennials expect a lot of structure and guidance in their careers, along with frequent feedback and encouragement.

Taking all of these attributes into consideration, Moore revised her leadership style with strategies that would engage her entire staff, including millennials. One of the first things she focused on was the atmosphere on the unit. “The idea of family resonates strongly with millennials,” she noted. “The fact that we spend more time with our co-workers than we do with our families sometimes, coupled with the fact that millennials are so team-oriented, made me feel that we needed to start working like a family.”

When hiring recent nursing grads, Moore starts them on night shift because nights on the unit are quieter than days, and therefore nights provide an environment that’s conducive to learning new skills. So in the fall of 2015, Moore began working the night shift every Sunday as a way to establish a connection with her younger millennials. In light of millennials’ frequent use of Facebook, Moore also started a Unit 3C Facebook page, which she said has created a sense of camaraderie among the entire staff and gives the three generations an opportunity to get to know one another. And that Christmas, she began a tradition of asking everyone to bring in a Christmas ornament and write their name and the year they started on it. “We hang the ornaments on our Christmas tree and I post a picture of the tree on our Facebook page,” Moore said. “The nurses loves it, especially the millennials.”

To highlight the family theme further Moore started a Secret Pals program. Once a year, each participant writes their name and something they like on a slip of paper, the slips of paper are put in a box and each participant draws a slip but doesn’t reveal the name on it. “Then we leave that person a little gift, and everyone acknowledges receipt of their gift by thanking
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their Secret Pal on our Facebook page," she said. In addition, Moore gives her entire staff birthday cards with a $10 gift card inside, and Christmas cards with personalized, handwritten messages. “All of these things go a long way toward making the staff feel like a family, which the millennials in particular really appreciate,” she said.

Having seen that frequent feedback and transparency are among the characteristics millennials expect in their leaders, Moore also started sharing with the staff details regarding the unit’s performance. In addition to discussing survey scores at staff meetings and posting them in the break room, she posts the unit’s overall rating on the quality board at the nurses’ station so that everyone can see it, including patients.

When performance is up, team members’ contributions are recognized and rewarded, and when it is down, Moore discusses the issue with the staff, taking care with the language she uses. “For example,” she said, “I’ll say something like, ‘These are our scores. Although the care you’re providing to our patients is great, their perception of that care experience isn’t, and we need to figure out why that’s the case.’” Similarly, sometimes Moore will receive a complaint from a patient during rounds. When bringing this to the attention of the younger nurses, Moore always starts the conversation by mentioning the things they did right. “The key to giving any type of negative feedback to millennials,” she explained, “is to do it in a way that inspires and encourages them.”

Young concurred, and added that taking a problem-solving approach when providing constructive critiques can be helpful. For instance, when addressing a patient’s complaint with millennials she asks them what decisions they made that contributed to the complaint, then mentions a few decisions she might have made and asks them whether they’re things they could have considered as well, but didn’t. In this way, Young shows them that, next time, perhaps they should look at the situation from a different angle and they’ll have a different outcome.

“If I chastise a millennial for making a mistake, they won’t learn anything and I’ll be having that same conversation again in two days. But if I spend a few minutes helping them understand how their thought process was flawed, they’ll feel empowered, they’ll have a voice and they will have learned something,” Young said.

Bridging the Generation Gap

According to Young, as a result of Moore’s leadership approach, the 3C team has a clear recognition of each generation’s strengths and how they can help and learn from one another. For instance, if an older nurse needs help with electronic charting, they’ll call a millennial; if a millennial needs help with a head-to-toe assessment to identify a possible change in a patient’s condition, they’ll call a Gen Xer or baby boomer.

To nurses who may question her approach, Moore said, “I make it clear that I’m not pandering to millennials. Rather, I realize and highly value the qualities of the millennial generation and how they can benefit the health care setting. So if I have to communicate with them in a certain way and implement strategies that will engage them in order to keep them, then that’s what I’ll do.”

Along those lines, one strategy Moore is currently working on is getting her millennial bedside nurses involved in the facility’s quality initiative—specifically, engaging them in ways to decrease falls, catheter-associated urinary tract infections and central line-associated bloodstream infections. “Each time we have a safety event, they’ll analyze it to determine its root cause,” said Moore. Other strategies designed to increase millennials’ involvement in their practice, quality of work and ability to influence patient care likely will follow, she said.

Although it took nearly a year for Moore’s changes to gain traction, they’ve resulted in a happy workforce. “Today I’m fully staffed, and my team, which includes approximately 25 millennials, is very happy,” said Moore. “Whereas before, millennials didn’t want to work on 3C, now they ask to work here. 3C is their first choice.”

Moore often says to her staff that happy nurses mean happy patients, and consistent improvements in Baptist Health Paducah’s HCAHPS survey scores appear to bear this out. According to Young, the facility’s overall hospital top-box score increased from 72.7 in 2015 to 76.9 in 2016, and its overall patient experience score increased from 85.9 in 2015 to 87.6 in 2016 to 87.7 so far this year. “That’s a nice bump up,” Young said, considering that, in 2016, the facility implemented an electronic health record system, a challenging undertaking.

Consistent improvement is the key, Young noted. “Anybody can achieve a flash in the pan, but that type of success is only brief and can’t be repeated. We wanted to see sustained improvement, and that’s what 3C has experienced.

“Previously, our scores were inconsistent—good one quarter, bad the next,” she concluded. “Now we’re showing steady improvement, which has us excited to see what’s in store for 2018 and beyond.”