Building Resiliency in a Multigenerational Nursing Workforce

By Diana Mahoney

The levels and drivers of activation and decompression—key determinants of resilience—vary across the nurse workforce by generation, role and shift, according to an analysis of nurse engagement data. Millennial nurses in particular, especially those working the night shift, are less able than their colleagues to feel a meaningful connection with their work and thus may be especially vulnerable to burnout and turnover.

The findings, reported in a new white paper, “Performance Insights: Resilience for a Multigenerational Nursing Workforce,” suggest that efforts to prevent burnout among nurses, which is influenced largely by resilience, should be designed around these variations to meet the unique needs of different nurse segments.

To assess the differential resilience of nurses, Press Ganey researchers analyzed the responses of 17,483 nurses who completed the Nursing Excellence module of their organization's 2017 Press Ganey Employee Engagement survey (145 hospitals) using a proprietary, validated eight-item tool for measuring resilience. The tool consists of two separate four-item subscales within the engagement survey: One measures respondents' ability to disconnect from work (decompression) and the other measures the degree of respondents' engagement with work (activation).

Inclusion criteria comprised full-time registered nurses working at least 50% of their time in direct patient care if they were not managers. The generation breakdown was as follows:

- Generation X (1965–1979)
- Baby boomer (1946–1964)

The results are presented in the context of a recently developed framework that deconstructs burnout into component stressors and rewards associated with the work experience. In the framework, resilience—which is considered a function of an individual's activation and decompression—is the fulcrum upon which the stressor/reward balance rests, and thus it plays a critical role in determining burnout vulnerability. Following are some of the important findings.

- Millennial nurses have the lowest levels of activation, and those who work the night shift are at a further activation disadvantage.
- Nurse managers have better activation than non-managers, while non-managers have a greater ability to decompress than managers.
- Both nurse managers’ and non-managers’ ability to decompress is highly correlated with their own perception of stress and the organization’s support of work–life balance.
- Across all generations, activation and decompression are highly correlated with nurses’ intention to stay in their jobs.
A separate analysis looking at key drivers of both activation and decompression also demonstrated variation by manager status and generation. While activation among managers and non-managers is strongly tied to their job enjoyment, the differential key drivers for managers center on themes of safety and pride in their quality of service, and those for non-managers are linked to themes of personal pride in “my work.”

In terms of decompression, managers’ and non-managers’ ability to decompress is highly correlated with their own perceptions of stress and their organizations’ support of work–life balance. The differential key drivers of decompression for managers revolve around resource availability and staffing considerations, and the key drivers for non-managers include such factors as feeling heard, getting good feedback and being assigned clear tasks.

When considered by generation, key resilience drivers across all generations are work enjoyment (activation) and nurses’ perceptions of stress and organizational respect for stress levels (decompression).

Differential drivers for baby boomers include pride in the quality of care they provide (activation) and the availability of resources needed to do their job (decompression). Gen-X nurses are most activated when they perceive organizational safety, diversity and community and are able to decompress when they feel heard by their managers and the organization. For millennial/Gen-Y nurses, activation is driven by clarity in their roles and responsibilities, and decompression is strongest when clear assignments are combined with respect.

Because of the differences in levels and drivers of resilience across nurse segments, one-size-fits-all engagement and burnout prevention strategies cannot meet the needs of all nurses. Instead, targeted strategies should be designed to reflect the differential needs of the nurse population.

This can be achieved by measuring engagement and identifying key drivers of activation and decompression for each group. For example, given that nurse managers demonstrate less ability to decompress, they are well-suited to interventions focusing on self-care and work–life balance. Because millennial nurses appear to have the lowest activation, this group would likely reap the most benefit from recognition programs and other efforts highlighting their contributions and the connection to the “why” behind their work.

Other recommended strategies for optimizing resilience to create a favorable stressor/reward balance and reduce burnout vulnerability include the following:

- Driving nurse activation through meaningful recognition
- Providing nurses at all levels with formal resilience training
- Focusing on relationship-building activities and opportunities for enhancing nurse social support
- Ensuring that resilience-focused support and resources are available to nurses on all shifts
- Including resilience-building burnout prevention strategies in the operational budget
- Training nurse leaders to support staff nurses’ alignment with professional purpose

By adopting a resilience-building mindset and implementing targeted interventions, health care organizations can minimize burnout vulnerability and help their nurses enjoy productive, rewarding careers.