Developing a Strategic Connection between Nursing Excellence and Workforce Engagement

By Whitney McKnight Fishburn

When a health system’s nursing workforce is fully aligned with the stated vision and mission of the organization and processes are in place to reinforce this alignment, nurse engagement and patient experience improve, as do clinical outcomes. By pinpointing where these key metrics intersect and analyzing how the behaviors driving them influence workforce engagement, it is possible to develop strategies that achieve and sustain nursing excellence, according to Mary Jo Assi, Press Ganey Clinical Excellence Solutions senior vice president and associate chief nursing officer.

In contrast, when leadership does not understand the connection between workforce engagement and clinical and patient experience outcomes, improvement initiatives will typically stall and may ultimately fail. “They may see incremental increases, but they’ll see it for a short time,” Assi said during a recent webinar titled “Developing a Strategic Connection between Nursing Excellence and Workforce Engagement.”

The relationship between nursing excellence and nurse engagement received heightened attention in 2018 when the American Nurses Credentialing Center (ANCC) issued a statement of clarification about the Magnet® RN Satisfaction standard known as EP2EO. Beginning with February 2019 Magnet applications, organizations that are unable to demonstrate through the data submitted that they meet or exceed the scoring threshold for RN Satisfaction will not be permitted to move to a site visit.

Whether an organization is on a Magnet designation journey or aims simply to improve delivery of care, cross-domain analyses of common patient experience and employee engagement data sets show precisely how workforce engagement leads to greater levels of patient and staff loyalty, Assi explained.

Data on more than 2,000 hospitals nationwide reporting to the National Database of Nursing Quality Indicators® (NDNQI®) showed that performance on the overall rating measure for systems in the top quartile for nurse engagement was 53% higher than for those in the lowest quartile. Patients also were 38% more likely to recommend hospitals in the higher group. Conversely, hospitals scoring in the bottom third for nurse engagement received low Likelihood to Recommend scores from both patients and nurses.

Patient safety and lower operating costs also positively correlate with nurse engagement. Health systems in the top engagement quartile had significantly lower hospital-acquired infection rates when compared with those in the lowest quartile—as much as 28% lower central-line associated bloodstream infection (CLABSI) rates and 9% lower rates of *Clostridium difficile* infection. Length of stay (LOS) was 0.8 days shorter, and PSI 90 scores in this cohort were 11% lower than in systems with the least engaged nurses. Nursing staff satisfaction scores in the top quartile were also associated with 14% lower CLABSI rates, 17% lower catheter-associated urinary tract infection rates, 16% fewer *C. difficile* infections and a 0.5-day decrease in LOS.

While obtaining and understanding these metrics is the first step toward achieving excellence, the behaviors and best practices behind them are what drive improvement, Assi said. When leadership neglects the importance of nurse resilience and self-care and doesn’t respect the inherent difficulties nurses face in an occupation that regularly features pain, grief, death and sometimes even violence, it is easy for RN staff to disengage, according to Assi.

AT A GLANCE

- A recent webinar, “Developing a Strategic Connection between Nursing Excellence and Workforce Engagement,” explores the critical relationship between nurse engagement and nursing excellence.
- New requirements for the Magnet Recognition Program® set to go into effect in February 2019 are focused on RN satisfaction and engagement across the enterprise.
- A shared vision and mission, an emphasis on resilience, and strategic partnerships between staff and leadership to create a positive work environment are essential for building and sustaining an engaged nursing workforce.
Strategies to align nurses with the mission of the organization, promote resilience and ultimately counteract disengagement can be developed using Magnet designation nurse satisfaction criteria. These include autonomy, professional development, leadership access and responsiveness, interprofessional relationships, fundamentals of quality nursing care, adequacy of resources and staffing, and nurse teamwork and collaboration, said Anne Freeman, RN, a Press Ganey Workforce Solutions consultant who also spoke during the webinar.

“Leaders have to ensure that their employees are engaged, equipped and empowered, and that they are evaluated,” Freeman said, adding that sharing feedback with employees helps them grow.

When nurse leaders engage with staff, both groups have an opportunity to discuss what matters to them and why. This is foundational to building an inclusive culture that values nurses’ efforts on behalf of patients and the organization. It also helps staff to see value in supporting leadership.

Freeman recommended that leaders conduct employee rounding on at least a quarterly basis, particularly if there are plans to launch a new initiative. Spending time one on one with employees creates a flow of information about how new processes are going, where the barriers might be to implementing them, and what needs to be in place to overcome those barriers, she explained. “Socializing with purpose,” such as holding work-sponsored family picnics and monthly stakeholder meetings where all voices are heard, can foster trust as well as enhance nurse engagement. That trust and competence translate into continuous improvements in the organization and high levels of employee engagement and patient care.

Equipping employees properly means constantly and clearly communicating with them across a variety of venues and media, such as regularly scheduled meetings, newsletters and internal websites, said Freeman, who pointed to the “Rule of Seven,” which says it often isn’t until the eighth time a person hears something that they act on it. “If I don’t know what’s expected of me when I come to work each day, I have a really hard time living up to it,” Freeman said. Communication should also reassure staff members that leadership has confidence in their ability to carry out their part of the system’s overall mission, according to Freeman.

Following are some additional best-practice recommendations. Nurse leaders and managers should

- Make sure every nurse on staff understands how their actions affect outcomes, and provide them with the tools, training and resources to optimize these relationships;
- Get to know and publicly recognize nurses whose efforts stand out, reinforcing behaviors that are valued and valuable;
- Practice shared decision making to empower nurses to take ownership of processes and improve them if necessary;
- Identify and provide opportunities for growth and career development; and
- Collect data on the performance of the nursing staff, and use the data to provide clear performance evaluations.

“To be truly successful as a leader, we need to think about how the four Es—Engage, Equip, Empower and Evaluate—always work together to create a balance. If one is missing in the equation, we really don’t get the success or the initiative off the ground that we’re hoping for,” Freeman said.

“When we focus on the importance of employee engagement, it may seem like a lot of best practices, but all of these will point your organization in the right direction,” Freeman said. “Individuals and teams want to be part of something that makes them feel valuable; in the end, they will want to give their very best.”