

Improving Nurse Retention Conference 2019

Making TRACS to improve nurse retention:

Project findings

Janet Scammell, Sharon Docherty, Sarah Collard,
Sue Higgins, Tash Kelly, Amy McLeod, Hannah Kennedy

**Faculty of Health and Social Sciences, Bournemouth
University / Royal Bournemouth and Christchurch NHS
Foundation Trust**



- Why undertake a collaborative project on nurse retention?
- Reviewing the evidence; developing the TRACS conceptual model
- What we planned to do and what we did
- What did the research find?
- Challenges of working collaboratively
- Project outputs
- What now?

What did the different partners bring?

University (BU)

- Identified potential funders
- Submitted the Grant application
- Managed the overall project
- Structured the research, undertook the analysis
- Supported hospital staff with academic aspects of project
- Contributed to project outputs and led dissemination
- Enthusiastic team willing to work across organisations!

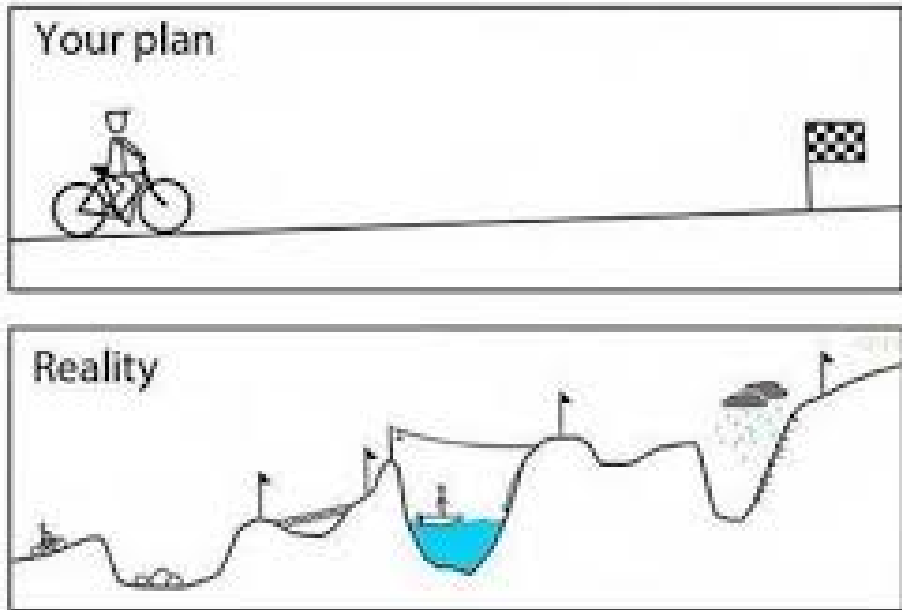
Health care provider (RBCH)

- Identified the problem
- Contributed to Grant development
- Liaised and managed the project within the hospital
- Facilitated BU-RBCH liaison
- Managed on-site data collection
- Contributed to project outputs and dissemination
- Facilitated local, regional and national contacts
- Enthusiastic team willing to work across organisations!

Evidence base around nurse retention identified five recurring factors



What we planned to do and what we did...



- Measure-intervene-measure: result
- Engaging in real-world research
- Engaging with 'wicked problems'
- Scope-measure with 'control'-consult-collaborative interventions-measure...
- Rapid contextual change

Aim:

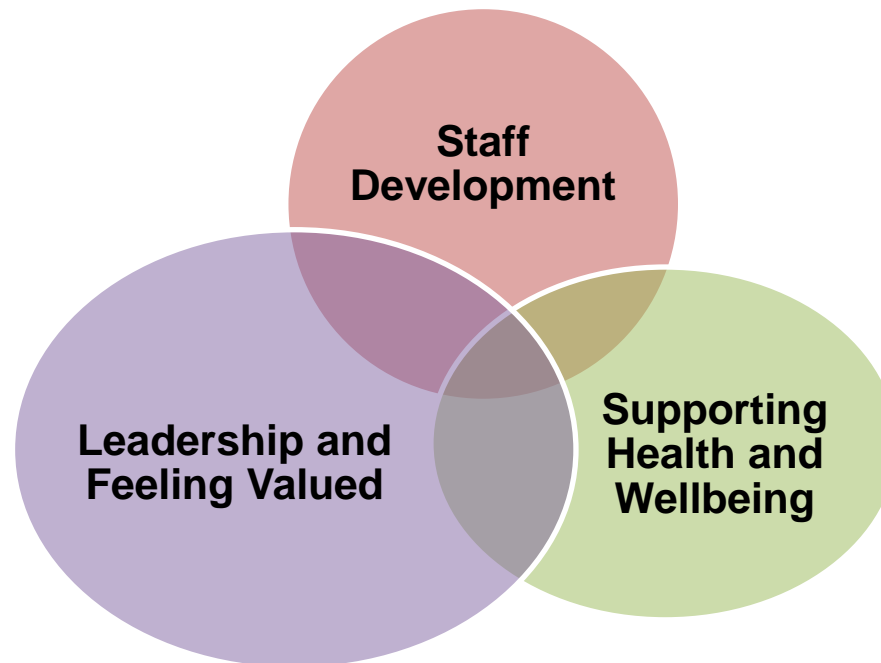
To investigate whether retention of registered nursing staff in one hospital can be improved through the development and implementation of an evidence-based retention model (TRACS).

Design: Mixed methods

Phase 1	Collate baseline data (NHS staff survey)	Aug-Sept 2017
Phase 2	Pre-intervention Survey of RNs from two directorates using Maslach Inventory and Practice Environment Scale Nursing Worklife Index (PES-NWI)	Oct-Nov 2017
Phase 3	Consultation exercise to inform development of retention strategy	Dec'17- May '18
Phase 4	Implementation of TRACS approach: Older Person's Medicine (OPM) directorate	July'18 – Feb '19
Phase 5	Post intervention survey	April-May '19
Phase 6	Dissemination	May-Sept '19

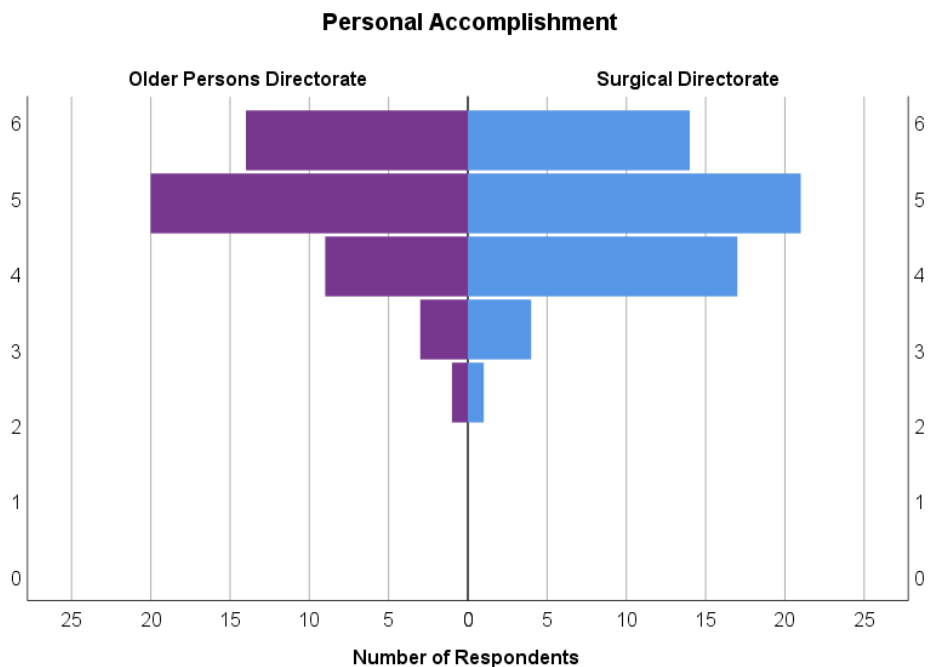
Findings: Themes

- Leadership and feeling valued
- Staff development
- Supporting health and wellbeing



Sample findings

Oh, it's really good. I really enjoy it. I really enjoy it. I think it's so diverse, every day is different and you have to learn to prioritise your work and things. So yes, I really enjoy it. I think it's a challenge as well because obviously as people are getting older, there's more chronic disease, and so we're having to think outside the box a lot with some people as well. So yeah, no, I find it very challenging and rewarding.



Felt:

0 = Never

1 = Few times a year

2 = Once a month

3 = Few times a month

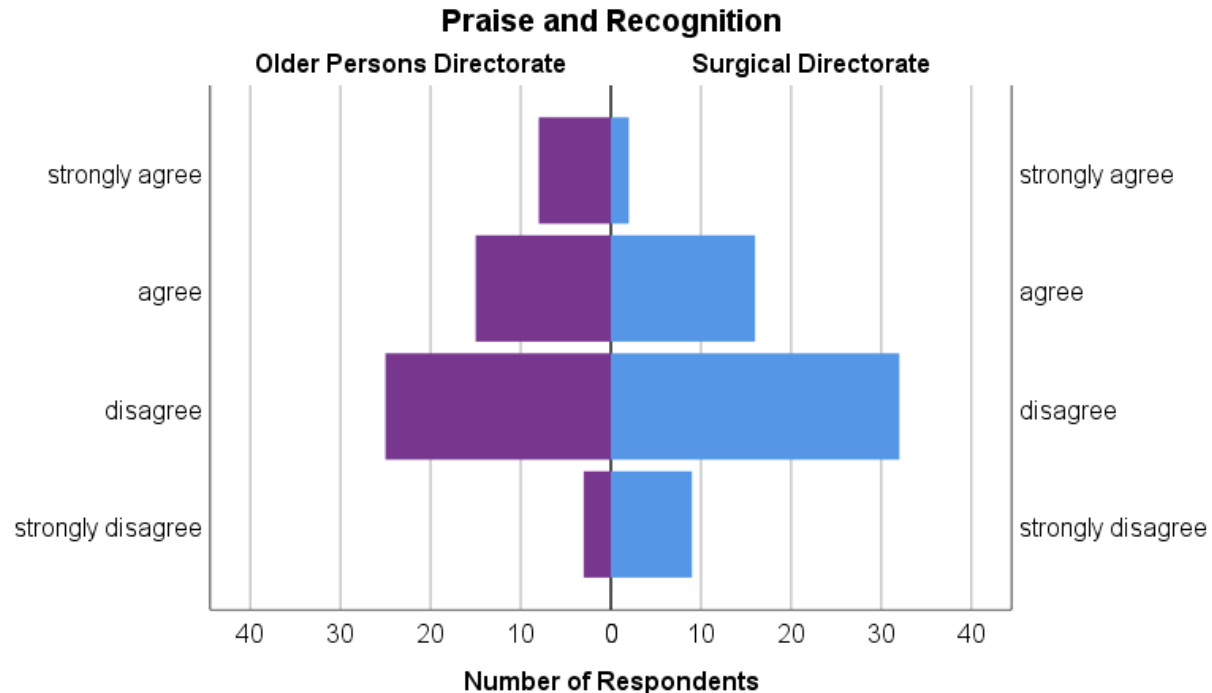
4 = Once a week

5 = Few times a week

6 = Every day

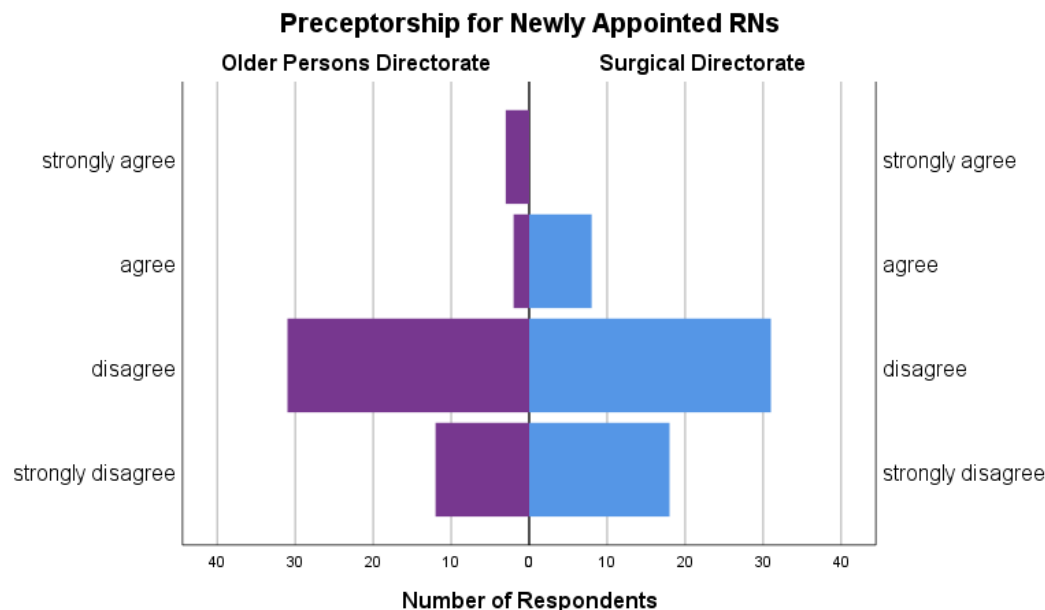
Leadership and feeling valued

So it's not a competition and sometimes it feels a bit like they're in competition, 'well I feel stressed from the top-down so you're going to feel stressed as well, you're going to feel my stress.' So I think it's yes, basic things like appreciating the staff, which doesn't take a lot, I mean because it doesn't happen, if someone would say 'thanks', they'd be like, 'oh my god'. It doesn't actually take a lot and those little things are motivational.



Staff development

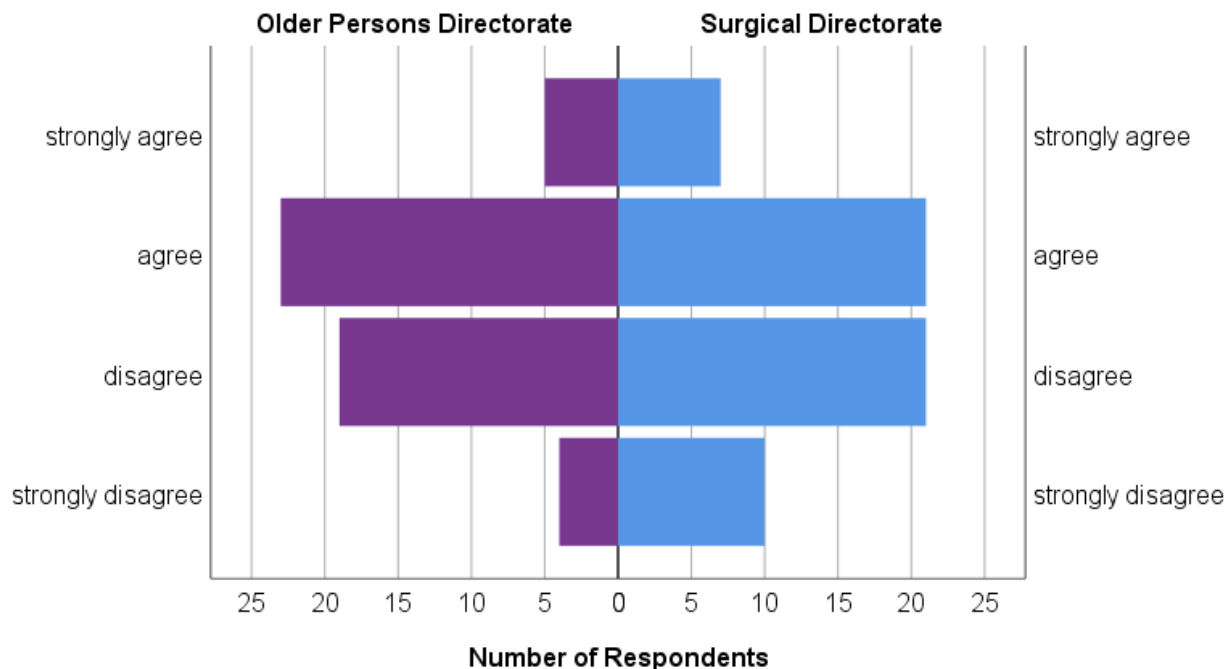
Education is really a key area, because [I'm a mentor] sometimes I struggle to look after my student, the way I really want to look after her because of my workload. I have no time to give to her. And the poor student might be just following me. And I might have no time to stop and talk to her. And we always say we should have one hour, you have to spend with your student, one hour, like free time, to spend with the student every week. I don't think any mentor is getting that.



Support health and wellbeing

Good peer support and offloading and reflect with each other. We've got quite a good network here, a few of us, as in a few of us core people that have stayed throughout. ... Well, more than a few of us. But, you know, we can talk through things, 'cause sometimes you just need someone else, so you don't take it home with you.

Enough Time and Opportunity to Discuss Care Problems with Others



Challenges and benefits of working collaboratively: *RBCH project manager*

- The benefit of having worked at a senior level within the Trust facilitated the collaborative partnership & the implementation of the various phases
- It worked because both organisations were committed to finding ways to help & support nurse retention
- Encouraging a busy nursing workforce to engage in an academic research project
- Ensuring continuity throughout the two years to maintain the momentum & increase nurse retention

Challenges and benefits of working collaboratively: *Steering group members*

Feelings
about being
on steering
group

Our
contribution

Steering Group



What did
we learn?

New
experiences



**Bournemouth
University**

Project outputs

- Research evidence
- TRACS conceptual model
- One-stop-shop for information:
<http://support4nurses.uk/>
- TRACS portal and data from pre-registration nurses: curriculum

Catalyst to streamline retention interventions within the Trust:



Summary

- Complex and multifaceted problem
- Our research identified 3 key areas that need to be built into retention strategy:
 - Staff development: flexibility/accessibility, equity, giving priority
 - Authentic leadership and valuing staff: leaders of nursing, people want to feel they count, relationship based leadership
 - Health and wellbeing: work-life balance, organisational support
- Advantages of collaborative working

What now?



- Project report; including information and feedback from today's conference
- Podcast
- Infographic
- Conferences: Keele University and Washington
- Academic and professional journal papers
- Contributing to Our Dorset *Retention: Call to Action* event in July

What now? *Transferability*



Any questions?

Contact details:

Dr Janet Scammell

jscammell@bournemouth.ac.uk

01202 962751

TRACS website:

<https://research.bournemouth.ac.uk/project/making-tracs-to-improve-nurse-retention/>





**Bournemouth
University**

Key references

- Chenoweth et al. (2014) Attracting and retaining qualified nurses in aged and dementia care: outcomes from an Australian study. *Journal of Nursing Management* 22:234–247.
- Cummings et al. (2010) Leadership styles and outcome patterns for the nursing workforce and work environment: a systematic review. *International Journal of Nursing Studies* 47(3):363-385.
- HEE (Health Education England) 2014 *Growing Nursing Numbers. Literature Review on nurses leaving the NHS.* Available at: <https://www.hee.nhs.uk/sites/default/files/documents/Growing%20nursing%20numbers%20%E2%80%93%20Literature%20Review.pdf>
- Heinen et al. (2013) Study to determine factors associated with nurse retention in a cross sectional observational study in 10 Euro countries. *International Journal of Nursing Studies*
- Lake, E (2002) Development of the Practice Environment Scale of the Nursing Work Index. *Research in Nursing and health* 25 (3):176-188
- Maslach, C. and Jackson, S (1981) MBI Human Services Survey Available at: <http://www.mindgarden.com/117-maslach-burnout-inventory>
- NMC (2018) The NMC Register. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/the-nmc-register-2018.pdf>
- RN4CAST. *Nurse Survey in England 2012.* National Nursing Research Unit <http://www.kcl.ac.uk/nursing/research/nnru/publications/reports/rn4cast-nurse-survey-report-27-6-12-final.pdf>
- UCAS (2017) 2017 End of Cycle Report. Available at: <https://www.ucas.com/corporate/data-and-analysis/ucas-undergraduate-releases/ucas-undergraduate-analysis-reports/2017-end-cycle-report>