A Study of the Nurse Manager’s Impact on Staff Engagement & Quality

Barbara Wadsworth, DNP, RN, MBA, FACHE, FAAN, NEC – BC
Southeastern Pennsylvania Organization of Nurse Leaders
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Objectives

• This presentation will enable the learner to design a nurse manager assessment using Leader Member Exchange.

• The learner will be able to distinguish how to interpret Leader Member Exchange data to compare nurse sensitive indicators & employee engagement.
Nurse Leader Challenges

• Nurse manager relationship with the nursing staff is significantly important

• Nurses leave their positions based on the nurse manager relationship

• Retention & turnover directly impacted

• Quality of the relationship impacts unit outcomes and employee engagement

• Understanding the relationships helps to identify opportunities
Study Purpose

• Assess the Quality of the Nurse Managers’ Relationship using Leader Member Exchange (LMX) Survey

• Describe association between Nurse Manager LMX score utilizing:
  • Nurse Sensitive Indicators –
    – falls, CLABSI, CAUTI, HAPU
  • Nurse Retention Scores
  • Staff Nurse Engagement (satisfaction) Scores
  • Percentage BSN
What is Leader Member Exchange?

• Theory about the relationship quality between staff and their leader

• Dansereau (1975) describes LMX as highly important & significantly influential to the staff’s contribution to the work environment

• Promoting a positive work environment is reflective of the relationship with the nurse manager

• LMX theory describes contribution, affect, professional respect, and loyalty as the four dimensions that underpin relationships among leaders and employees

• Laschinger et al. (2009), describe LMX theory as useful in understanding the quality of relationships among leaders and front line staff
### Leader Member Exchange Survey (LMX 7)

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you know where you stand with your leader…do you usually know how satisfied your leader is with what you do?</td>
</tr>
<tr>
<td>How well does your leader understand your job problems and needs?</td>
</tr>
<tr>
<td>How well does your leader recognize your potential?</td>
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<tr>
<td>Regardless of how much formal authority he/she has built into his/her position, what are the chances that your leader would use his/her power to help you solve problems in your work?</td>
</tr>
<tr>
<td>Again, regardless of the amount of formal authority your leader has, what are the chances that he/she would &quot;bail you out&quot; at his/her expense?</td>
</tr>
<tr>
<td>I have enough confidence in my leader that I would defend and justify his/her decision if he/she were not present to do so.</td>
</tr>
<tr>
<td>How would you characterize your working relationship with your leader?</td>
</tr>
</tbody>
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Background

• LMX Quality related to Nurse Managers studied over the past 7 years
• Studies identify the following outcomes related to nurse manager relationships:
  – Organizational Identification/Organizational Commitment
  – Nurse Satisfaction/engagement
  – Structural Empowerment
  – Knowledge Transfer
What does the Evidence tell us?

• Eleven articles describe Nurse Manager role as:
  – Vital
  – Pivotal
  – Key
  – Important

• Researchers report a direct link -
  – job engagement and nurse satisfaction

• Studies provided evidence based conclusions demonstrating the importance and significance of the Nurse Manager role
Implementation & Evaluation

• Collect, Assess, & Analyze 4 data elements

• Analyze data at clinical unit level, campus level, & system level

• LMX Quality measured on Likert scale:
  – Score of 5 – 7 indicates high quality relationship

• Compare to NDNQI data set for 5 nurse sensitive indicators

• Compare to staff engagement survey

• Assess BSN rate by clinical unit
Study Significance to Nurse Leaders

• Promote an engaged workforce
• Quality of care increases with stable workforce
• NM relationship influences RN intent to stay (retention)
• Active engagement, organizational commitment lead to positive work force
• Creates positive professional practice environment – feel valued
• Leader connection supports positive professional relationships, quality outcomes, & clinical excellence (Duffield et al, 2010)
System Impact

• Study provides assessment of large group of nurse leaders across 5 hospitals

• Evaluate opportunities for improvement – professional development, mentoring, coaching

• Understand LMX quality on health system including quality outcomes

• Demonstrate scholarly work and coordination with system goals

• Facilitate dialogue specific to role of the nurse manager
Study Results

- Descriptive, cross-sectional design
  - Convenience sample
- 3,809 staff invited to participate
  - 1,474 responded
  - 1,175 completed
- RN Staff
  - 2,583
  - 923
Professional RN Response Rate by Hospital

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Email</th>
<th>Respondents</th>
<th>Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>573</td>
<td>255</td>
<td>44.5%</td>
</tr>
<tr>
<td>B</td>
<td>417</td>
<td>175</td>
<td>42.0%</td>
</tr>
<tr>
<td>C</td>
<td>699</td>
<td>270</td>
<td>38.6%</td>
</tr>
<tr>
<td>D</td>
<td>109</td>
<td>34</td>
<td>31.2%</td>
</tr>
<tr>
<td>E</td>
<td>785</td>
<td>189</td>
<td>24.1%</td>
</tr>
</tbody>
</table>

**RN Total** 2,583 923 35.7%
Participant Demographics

- 95.2% Female
- 62.4% employed full time
- Age well distributed
  - 44.9% = 26 – 45 years
  - 50% = 46 and over
- 41% had over 21 years of experience
- 41% were on their current unit > 10 years
- 58% were day shift nurses (8 & 12 hours)
- 21% were night shift nurses
Sample

- 89 Nursing units
- 58 Nurse Managers
- 15 nurse managers have multiple units
- 7 nurse managers in their role < 2 years
- Number of respondents ranged from 1 – 42
- 4 units had zero RN responses
<table>
<thead>
<tr>
<th>Hospital</th>
<th>LMX Score</th>
<th>LMX Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>23.63</td>
<td>Moderate</td>
</tr>
<tr>
<td>B</td>
<td>21.12</td>
<td>Moderate</td>
</tr>
<tr>
<td>C</td>
<td>25.48</td>
<td>High</td>
</tr>
<tr>
<td>D</td>
<td>26.24</td>
<td>High</td>
</tr>
<tr>
<td>E</td>
<td>25.35</td>
<td>High</td>
</tr>
<tr>
<td>System</td>
<td>23.93</td>
<td>Moderate</td>
</tr>
</tbody>
</table>

VL = 7 – 14; L = 15-19; M = 20-24; H = 25-29; VH = 30-35
Nurse Managers LMX Scores by Category

- High: 46%
- Moderate: 38%
- Low: 8%
- Very Low: 2%
- Very High: 5%
Distribution of Average LMX Scores

![Bar Chart]

- **Y-axis**: Count of Unit-Managers
- **X-axis**: Average LMX Score

The chart shows the distribution of average LMX scores across different units, with the highest count of unit-managers scoring around 27.
Review of the Data

• No relationship in the following areas:
  – BSN
  – Nurse Retention
  – Nurse Sensitive Indicators – including CMI
  – Falls
  – HAPU
  – CLABSI

• Possible rationale - Culture of Safety
Scatter Plot of Average LMX Score and CAUTI
Employee Engagement

• Overall

• Domains
  – Baseline Satisfiers
  – Communication & Input
  – Employee Support
  – Feedback & Recognition
  
  Manager Effectiveness
  Mission & Values
  Professional Growth
  Teamwork
Staff Nurse Engagement
Baseline Satisfiers

![Graph showing a scatter plot with Baseline Satisfiers on the y-axis and Average LMX Score on the x-axis. The plot includes a trend line indicating a positive correlation.](image-url)
Communication and Input

\[ p = .001 \]
Employee Support

![Scatter plot showing the relationship between Employee Support and Average LMX Score.](chart.png)
Feedback and Recognition

\[ p < .01 \]
Manager Effectiveness

$p \leq .0001$
Mission and Values

![Graph showing the relationship between Mission and Values and Average LMX Score]

\[ p \leq .05 \]
Professional Growth

![Scatter plot showing the relationship between Professional Growth and Average LMX Score. The plot has a trend line indicating a positive correlation. The probability value is p = .001.](image)

p = .001
Teamwork

- **p = .05**
Highlights

• NSI – including CMI – LMX relationship to CAUTI

• Engagement – overall indicator showed no relationship

• By Domain – definite relationship
  – Communication & Input
  – Feedback & Recognition
  – Manager Effectiveness
  – Mission & Values
  – Professional Growth
  – Teamwork
Strengths & Limitations

• Strengths
  • 58 nurse managers
  • 85 clinical units
  • >900 RN responses
  • Generalizable sample
  • Fills void – NSI

• Limitations
  • Nurse retention in northeast region
  • Turnover – supply & demand
  • Unit sample sizes - > 10
  • Survey dates
  • Design – self reporting
Nurse Leader Professional Development

• Use data to identify developmental opportunities – AONE Nurse Leader Competencies

• Use literature/evidence to identify educational opportunities that will impact nurse manager role in a meaningful way

• Plan programs that coordinate organizational strategy and data while linked to individual performance

• Leadership council focused on nurse leader behaviors and impacted the way they do their work
References


THANK YOU!!

Contact Information:  
Wadsworthb@mlhs.org  
215-431-9249