

# SEEKING STATUS: THE PROCESS OF BECOMING AND REMAINING AN EMERGENCY NURSE



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**Introduction:** Understanding the process of becoming and remaining an emergency nurse is of great value in emergency nursing research and for nursing administration. If hospitals want to retain qualified emergency nurses, they must learn the process that nurses use when they choose to continue working within an emergency department. Research focusing on this process may inhibit turnover and simultaneously address the ED nursing shortage. The objectives of this study were to explore this process and highlight the strategies that nurses use throughout this process.

**Methods:** Using Grounded Theory methods, data were collected through semi-structured, open-ended interviews until data saturation occurred. The ages of the 7 participants ranged from 29 to 56 years, with ED nursing experience ranging from 1 to 17 years and nursing experience from 2 to 18 years.

**Results:** Five phases emerged from data analysis using constant comparative analysis of 183 pages of transcripts, through coding, categorizing, and conceptualizing of phrases.

These phases, each with subcategories, explained a process identified as Seeking Status. The 5 phases were "joining the troops," "working in the trenches," "passing muster," "earning stripes," and "looking ahead." Passing muster emerged as the core category—that is, the one that best explained the process and connected the other conceptual categories in this process.

**Discussion:** Processes and strategies to retain qualified emergency nurses are urgently needed. The findings from this study address only a broad understanding of ED and nursing roles. This study highlighted several possible avenues to advance nursing science in this area. For example, for nurses "working in the trenches," it is important to undertake further research to determine factors that might help them adjust.

**Key words:** Acculturation; emergency nurse; Hierarchy; Socialization process; Status attainment

Utilization of emergency departments across the United States is continuing to escalate. The most recent release of the Ambulatory and Hospital Care Statistics Branch reports that the number of ED visits was just over 136 million in 2011.<sup>1</sup> This figure represents a 50% increase from 1996 (90.3 million), at the same time that the number of hospital emergency departments available is decreasing because of closures of hospitals.<sup>2</sup>

The aging of the population has and will continue to increase the utilization of emergency departments for care. Elderly persons currently account for more than 15% of annual ED visits in the United States, and with an increase in usage, that figure is expected to rise to 30% by 2030.<sup>3</sup>

Older patients tend to present with more complex health problems and medication regimens, along with extensive psychosocial considerations.<sup>4</sup> Skilled, experienced nurses are essential to provide high-quality, safe care to patients with these complexities. However, there are a limited number of qualified nurses to care for them.<sup>5</sup>

High nursing turnover rates within the emergency department are reported in the literature. In the 2015 National Healthcare and RN Retention Report, it was noted that the national average turnover rate for all registered nurses (RNs) was 16.4%, up from 14.2% in 2014.<sup>6,7</sup> ED nurse turnover rates were reported as 21.7%, up 1.4% from a 20.3% rate in 2014,<sup>6,7</sup> and higher than the national average for all RNs. This high level of turnover within the emergency department requires further evaluation.

Along with increased ED utilization rates, turnover leads to an increase in the number of patients cared for by each nurse while simultaneously decreasing the quality of care provided and potentially worsening patient outcomes. Paradoxically, this increases the workloads of the nurses, which may lead to burnout, job dissatisfaction, and sick calls and may ultimately lead to additional turnover. Emergency departments cannot afford to lose the highly skilled, experienced nurses that provide lifesaving measures on a daily basis.

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TABLE 1

**Example of 6 of the Initial Raw Codes from Verbatims**

Love the adrenaline rush	Stuck in trenches	Pay all these dues
Monotonous med/surg	I wasn't accepted	They ignored me

An understanding of retention in the specialty of emergency nursing is limited, and parallels can be drawn only to nurses within the ICU and nursing units in general. Limitations of this nature hinder the ability to draw definitive conclusions and generalize findings. Therefore a qualitative study with an exploratory design, such as one that utilizes Grounded Theory methods, was warranted. The purpose of this study was to explore and describe the process that nurses go through to become and remain emergency nurses. The intent was to highlight this process from the perspective of the emergency nurse.

## Methods

The classic Grounded Theory method<sup>8</sup> was the research design used because of its structured approach to developing information about a process. This qualitative approach allows a theory to emerge from the conceptualization of data from participants—in this case, emergency nurses.

### PARTICIPANT RECRUITMENT AND DESCRIPTION

This study was approved by the researcher's university Institutional Review Board by expedited review because of the minimal risk entailed in participation. After Institutional Review Board approval was obtained, participants were recruited through flyers and announcements at local ENA meetings, at which the researcher described her study. The flyer contained the E-mail address of the researcher for voluntary participation. The sample was purposive and included nurses who were currently employed and had been working in the same emergency department for

more than 5 years. An additional criterion was that the nurse was not in a management or supervisory role. The consent form included the study description; assurances regarding confidentiality, voluntary participation, freedom to withdraw, and protection of obtained data; and risks and benefits.

The 7 participants included both male and female ED nurses who ranged in age from 29 to 56 years, with nursing experience ranging from 2.5 to 19 years, and emergency nursing experience ranging from 1 to 17 years. One participant worked part time, one worked on a per diem basis, and the remaining participants worked full time.

### DATA COLLECTION

Data were gathered through the use of in-depth, one-on-one interviews using a semi-structured interview guide. The interviews were open-ended and nonleading to allow the participants' perspectives to flourish. Each interview was recorded via audio tape. The recordings were transcribed verbatim into raw data by the researcher after each interview. The raw data (verbatim) were then verified by checking the transcript word by word while listening to the recordings again. Field notes and memos were written to make note of certain nuances and thoughts that came to mind and may have highlighted connections between categories as they emerged.<sup>8</sup>

Sampling ceased when the categories that emerged that explained the process were saturated. For some categories that were initially weak, achieving saturation entailed performing subsequent interviews, called "theoretical sampling." It is important to note that in qualitative research it is not the number

TABLE 2

**Beginning Raw Categories translated into Conceptual categories for Phase I: Joining the Troops**

<b>Raw Categories</b>	<b>Phase I – Conceptualized As:</b>
Knowing med/surg is boring and monotonous	Seeking a difference
Wanting to be more well rounded	
Wanting the adrenaline rush	Recognizing the opportunity
Sister is an ED nurse	
Helped during a disaster	
Did practicum in ED during nursing school	
Floated to the ED	
Observed the role as an ED tech	

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