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Commentary

## Collaboration: What can health-care organizations learn about pharmacist retention from Magnet status hospitals?

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#### Introduction

The national shortage of pharmacists in the United States encompasses almost all pharmacy practice areas.<sup>1</sup> In a report to Congress by the Department of Health & Human Services in 2000, the shortage of pharmacists is a result of an unprecedented demand for pharmacists despite an overall increase in the supply of pharmacists.<sup>2</sup> The Bureau of Labor Statistics estimates 196,700 pharmacists were employed in 2001 and the projected need will be 417,000 by 2020. The total pool of available candidates for these positions is 260,000, leaving a shortage of 157,000 pharmacists.<sup>3</sup> In a review of pharmacist availability from September 1999 through September 2003, the Aggregate Demand Index found the need for pharmacists' continues to outpace the supply. The increased demand for pharmacists is the result of a variety of factors including increasing prescription volume, expanding retail pharmacies and institutional facilities, and the expanding professional roles of the pharmacist in health care.<sup>4</sup> The severity of the shortage varies with the position and geographic location.<sup>4,5</sup> Rural settings experience the greatest need in attracting, recruiting, and retaining qualified individuals.<sup>6</sup> It has predicted that the need for pharmacist services will continue for at least some years to come.<sup>7</sup>

Much like pharmacy, the nursing profession is experiencing a shortage of students entering the profession and high levels of attrition and workplace turnover among current practitioners. Turnover is estimated to be between 10% and 30% of filled positions. Population growth and aging are expected to increase the number of vacant nursing positions.<sup>8</sup> One forecast model estimates the U.S. shortage of registered nurses will increase to 340,000 by the year 2020.<sup>9</sup>

A program developed by the nursing profession to address their manpower needs could provide a blueprint for health-care organizations and pharmacy managers with pharmacist vacancies and turnover problems. The American Nurses Credentialing Center (ANCC) developed the concept of magnet status to address retention and recruitment pressures in the nursing profession.<sup>10</sup> The Magnet Recognition Program<sup>®</sup> (American Nurses Credentialing Center, a subsidiary of the

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American Nurses Association, Silver Spring, MD) recognizes health-care organizations that provide quality patient care, nursing excellence, and innovations in professional nursing practice. The purpose of the Magnet Hospital Recognition Program<sup>®</sup>, according to the ANCC, is, "to promote quality in a milieu that supports professional practice, identify excellence in the delivery of nursing services to patients/residents, and provide a mechanism for the dissemination of 'best practices' in nursing services."11 The Magnet Recognition Program<sup>®</sup> is based on quality indicators and standards of nursing practice as defined in the American Nurses Association's Scope and Standards for Nurse Administrators.<sup>12</sup> Magnet initiatives create and maintain an organizational culture that empowers staff and is patient focused. Activities of the organization are supportive of professional practice and efforts that strive for excellence in patient care. Evidence to date demonstrates that infrastructure changes prescribed by magnet initiatives facilitate binding an employee to the organization and reduce turnover.13 Research into pharmacist turnover found that, like nurses, pharmacists identify job stress as a contributor to turnover.<sup>14</sup> Organizational factors that create job stress in pharmacists correlate with increased job dissatisfaction, and turnover.<sup>14</sup> An overview of elements of the Magnet Program and some recommendations for incorporating the Magnet philosophy into pharmacy practices may provide a mechanism to improve the ability to attract, recruit, and retain pharmacists.

#### Background

The Magnet Recognition Program<sup>®</sup> was developed in 1981 as the result of a research study that investigated the characteristics of hospitals unencumbered by nursing turnover. Forty-one of 163 surveyed hospitals were described as "magnet" hospitals because of their ability to attract and retain nurses. Subsequent studies found that a hospital's magnet status reputation for excellence and nursing support influences the work environment and also nursing as a career choice.<sup>10</sup> The features within these organizations form the basis of 14 quality indicators or forces of magnetism.

#### Creating a retention organization

The 14 characteristics of a Magnet Organization are called the Forces of Magnetism and are summarized in Table 1. Essential infrastructure changes of magnet forces include: leadership support for policy changes that create and sustain a patient-centered environment, employee control over practice, adequate staff to safely manage workload, clinically competent staff, positive interdisciplinary team member relationships, and support for education and professional development. Interpretation and implementation of these forces create flexible personnel policies that enhance autonomy in practice and focus on quality measures that are evidence-driven initiatives striving toward quality patient care.

Nursing success with magnet processes demonstrate that the infrastructure changes directed by the magnet process result in an increase in quality of patient care and a healthier work environment. A review of the history of nursing experience with magnet process demonstrates that the environment created by the magnet forces also benefits the organization with a reduction in absenteeism, an increase in productivity, lower employee healthcare costs, and most importantly a decrease in unexpected, adverse health occurrences or sentinel events<sup>15</sup> due to the need for immediate follow-up and response or patient sentinel events.<sup>6</sup>

Efforts to retain pharmacists have been attempted with varying levels of success. Organizational factors such as inflexible scheduling, long working hours with inadequate staff, low salary, and limited opportunities for advancement have been related to pharmacists turnover.<sup>14,16</sup> Pharmacy departments that choose to reorganize using magnet guidelines or forces could anticipate similar results experienced by nursing departments.

### Force 1: Quality pharmacy leadership

Magnet literature identifies strong leadership as an important element in the creation of a management culture that is necessary to create and sustain an employee-proactive organization.<sup>17</sup> Bumgarner and Beard identify a common stumbling block to creating magnet environments as a failure of leadership to identify the magnet forces as strategic goals and commit the necessary resources to the change process.<sup>18</sup> Studer identifies the role of leadership in maintaining processes that reduce employee turnover. In consideration of the value each health-care worker to the successful operation of the system, satisfied employees are less apt to return calls to professional recruiters. Leadership that creates employee satisfaction is an organizational survival intervention.<sup>19</sup> Pharmacy literature also reflects the impact leadership has on the success of pharmacist retention.14, 20

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