

ORIGINAL ARTICLE

Organizational Support, Workload, and Intent to Stay: Work Environment Perceptions in Perianesthesia Nursing Units

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Purpose: *The purpose of this ASPAN study was to understand perianesthesia nurses' perception of their work environments in regards to organizational support, workload, intent to stay, and overall nurse satisfaction.*

Design: *A descriptive design was used with survey methodology.*

Method: *An online survey was sent to American Society of PeriAnesthesia Nurses members. The Individual Workload Perception Scale-Revised was used. A total of 2,121 American Society of PeriAnesthesia Nurses members participated (21% response rate).*

Findings: *Fifty-three percent reported that their nurse manager had responsibilities for three or more units. Having an assigned preceptor had a significant difference with organizational support, workload, intent to stay, and overall nurse satisfaction. Certified nurses reported significantly better perceptions of workload and intent to stay.*

Conclusion: *This is the first national glimpse of the perianesthesia work environment and its influence on nurse outcomes. These results can be used to improve the perianesthesia work environment.*

Keywords: *Work environment, intent to stay, certification, nurse satisfaction, organizational support, workload, perianesthesia.*

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THE NURSING WORKFORCE in the United States is in the midst of a crisis in staffing caused by a shortage of registered nurses (RNs), consisting of both supply and demand issues.¹⁻³ One seminal study highlighted that one of four nurses will leave their job within a year due to dissatisfaction and burnout.⁴ Although there has been an increase in the number of RN positions filled recently, >260,000 unfilled RN positions are projected by the year 2025, with one of the major contributors being the aging of the U.S. registered nursing workforce.⁵ On the demand side, the U.S. Bureau of Labor Statistics concluded that

RNs are one of the top occupations for job growth between 2012 and 2022, with an expected 19% increase in positions, or >526,800 needed as replacements or growth.⁶

As the shortage of RNs working in the acute-care setting persists, it is complicated by an increasing demand for nursing care as the U.S. population ages. RNs are essential to hospitalized patients as they provide early interventions and serve as early warning systems in the hospitals.⁷ The United States is entering an era of an expanding aging population, coupled with smaller available workforces.¹ Therefore, the need to attract and retain acute-care RNs is a priority among nurse managers and hospital administrators.

Acute-care nurses work within a nursing practice environment, which has been defined as the organizational characteristics of a work setting that facilitate or constrain professional nursing

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practice.⁷ The ability to understand the work environment of the nurse provides a means to strengthen their retention and recruitment.⁸ Perianesthesia nurses provide patient care along a continuum of care in a variety of areas, including hospitals, ambulatory surgery centers, and free-standing facilities. These nurses prepare patients for their surgery or procedure through interviews, assessments, and evaluations of a variety of information. After the surgery or procedure, perianesthesia nurses continue to provide close observations, including assuring a patent airway and comfort as the patient recovers from anesthesia, sedation, or other surgical interventions. Perianesthesia nurses strive to prepare the patient for admission to an inpatient unit or provide teaching and planning to the patient and family to be discharged. Perianesthesia nursing practice encompasses both preanesthesia and postanesthesia levels of care, and the delivery of care crosses multiple environments, including ambulatory surgery centers, hospitals, office-based settings, and procedural areas.⁹ Yet, many factors related specifically to perianesthesia nurse work environments are unknown.

Although many studies have investigated the work environment of nurses, no research to date has investigated the specific work environment of perianesthesia nurses. Although perianesthesia nurses have been included in studies related to work environments in the past, their responses have been grouped with other nurses. In many studies, researchers have combined operating room (OR) nurses and postanesthesia care unit (PACU) nurses in the same group. Although the nursing staff of the PACU and OR coordinate and collaborate very closely, dramatic differences exist in their work environments. In the OR, nurses function either as an assistant to the surgeon or as a circulating nurse in the room. PACU nurses monitor patients recovering from anesthesia and monitor more than one patient at varying stages in the recovery process. Phase I PACU nurses provide postanesthesia care to patients in the immediate postanesthesia period, transitioning them to Phase II level of care. Phase II PACU nurses prepare the patient for extended level of care as an inpatient or for discharge home. In addition, many PACU nurses are also caring for overflow patients when hospital bed availability is scarce, including ICU, telemetry, and medical-surgical patients.¹⁰

This same grouping issue in research studies also plagues ambulatory surgery nurses, whose responses are often included with clinics. In reality, ambulatory surgery nurses function in a fast-paced environment, caring for patients undergoing operative and invasive procedures. The work environment for ambulatory surgery nurses requires interaction with patients and their families as well as communication with multiple health care providers. Ambulatory surgery nurses admit, assess, monitor, and discharge patients of varying acuities at a rapid pace, while providing emotional support and detailed discharge and follow-up instructions to families and patients.

Purpose

The primary purpose of this study was to understand perianesthesia nurses' perceptions of their work environments in regards to organizational support (manager, peer and unit), workload, intent to stay, and overall nurse satisfaction. A secondary purpose was to examine possible differences in the perception of perianesthesia work environments between board certified nurses and those nurses without certification.

Survey Administration

The online survey administration system, SurveyMonkey (SurveyMonkey.com LLC, Palo Alto CA) was used to deliver this survey to every member of the American Society of PeriAnesthesia Nurses (ASPAN) with a valid e-mail address ($n = 10,100$). An introductory letter discussed the survey and its purpose, and consent was obtained via an enrollment script which stated: "Your completion of the survey indicates your informed consent to participate in this research study." Inclusion criteria included ASPAN membership and working in a perianesthesia area. The electronic survey site was scheduled to remain open for 4 weeks but was extended for an additional 2 weeks to maximize participation. Reminder e-mails for participation were sent out 2 weeks after the first e-mail and every 2 weeks until closure of the survey Web site. The response rate of the participants was monitored throughout the study time frame. The overall response rate was 22% with a return e-mail rate of less than 2%. Institutional Review Board approval was obtained.

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