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The role of high-involvement work practices and professional self-image in nursing recruits' turnover: A three-year prospective study



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ABSTRACT

Background: The retention of young graduate nurses has become a major management challenge among hospitals in Western countries, which is amplified in a context of aging of populations and an increasing demand for services from patients. Moreover, as it has been reported that 50% of experienced nurses do not recommend a career in nursing, it is likely that retention problems occur not only at the level of the organization, but also at the level of the nursing profession. Although research has identified some predictors of nurse turnover, it is unclear which factors influence nurses' turnover from the organization and from the profession and how these factors interrelate with one another over time.

Objective: The present study extends previous research on nurse turnover by looking at the combined effects of nurses' pre-entry expectations, perceived high-involvement work practices, and professional self-image, on intended and actual turnover from the organization and the profession.

Design and methods: A prospective, longitudinal study of a sample of 160 graduated nurses affiliated with the Quebec Nurses' Association, Canada, was conducted. Participants were surveyed at three points in time, spread over a 3-year period. Graduated nurses' pre-entry expectations and professional self-image were surveyed at graduation (Time 1), while perceived high-involvement work practices, professional self-image, and intention to leave the organization and the profession were captured six months following nurses' entry into the labor market (Time 2). Finally, participants were surveyed with respect to organizational and professional turnover three years after the Time 2 survey (Time 3). Structural equations modeling was used to examine the structure of the measures and the relationships among the constructs.

Results: Although pre-entry expectations had no effect, perceived high-involvement work practices were positively related to Time 2, professional self-image (controlling for pre-entry professional self-image). Moreover, high-involvement work practices exerted an indirect, negative effect on organizational and professional turnover through intention to leave the organization, and an indirect negative effect on intention to leave the profession through professional self-image. Nonetheless, professional self-image did not affect turnover.

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Conclusions: The current study indicates that hospitals and nurse directors can take advantage of developing high-involvement work practices as these practices foster a stronger professional self-image among nurses, thereby contributing to their sense of value as care providers, and indirectly reduce intended and actual turnover from the organization and the profession.

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What is already known about the topic?

- Previous research has established that nurses' professional self-image encompasses three dimensions: (a) the perception of being a competent nurse, (b) the perception of accomplishing important activities associated with the nurse role, and (c) the perception of being a full member of an effective care team.
- Previous studies have reported a negative association between nurses' professional self-image and their intentions to leave the organization.
- Prior research has also reported nurses' professional selfimage to be negatively associated with their intentions to leave the profession.

What this paper adds

- This study shows that high-involvement work practices are an important predictor of nurses' professional selfimage.
- The study indicates that nurses' intention to leave the organization mediates a negative relationship between high-involvement work practices and nurses' actual turnover from the organization.
- The study indicates that nurses' intention to leave the organization mediates a negative relationship between high-involvement work practices and nurses' actual turnover from the profession.
- Finally, nurses' professional self-image was found to mediate a negative relationship between high-involvement work practices and nurses' intentions to leave the profession.

1. Introduction

In many countries, the retention of nursing recruits is a significant challenge among hospitals. In Sweden, for instance, it has been reported that every fifth nurse strongly intended to leave the profession after five years (Rudman et al., 2014). In South Korea, the likelihood of new graduated nurses leaving their first job within 1, 2, and 3 years are 18%, 33%, and 46%, respectively (Cho et al., 2012). In the United States, 26% of new graduated nurses leave their organizations within two years, and almost 92% take another job in nursing (Kovner and Djukic, 2009). The latter finding suggests that new graduated nurses are far more disenchanted with their employers than they are with their profession (Djukic et al., 2011). Although several external factors (e.g., labor supply, legislation, economic environment, nursing image) may impact turnover rates (Daouk-Öyry et al., 2014), healthcare organizations may also contribute to nurse turnover. Moreover, the failure of hospitals to retain newly licensed registered nurses (NLRNs) certainly affects their efficiency because of the costs associated with replacing those who leave (e.g., costs relating to recruitment or hiring temporary agency nurses; Hunt, 2009). Additionally, having an unstable workforce definitely impedes team-based care effectiveness in patient units (Hassmiller and Cozine, 2006) and affects the morale of the remaining staff (Jones et al., 2009).

An impressive amount of research has been conducted on nurse turnover over the past 30 years. In her review. Gilmartin (2013) identified six distinguishable conceptual models of turnover published between 1981 and 2010. While all of these models include job attitudes and withdrawal cognitions as predictors of turnover, the most comprehensive model appears to be Price and Mueller's (1981) model. This model represents the dominant perspective used in the nursing literature (Hayes et al., 2006) to understand the factors leading up to nurses' turnover. However, the models reviewed by Gilmartin (2013) were developed to explain nurse turnover in general, but not specifically as they apply to new graduated nurses' context. For instance, Brewer and colleagues tested a model derived from Price and Mueller's model among NLRNs (Brewer et al., 2011; Kovner et al., 2009). Although they added nursing-specific variables to Price and Mueller's model, factors that may influence turnover in new graduated nurses were not considered. In particular, students' expectations of nursing practice prior to joining the labor market were not examined. This is surprising, given the amount of studies describing these expectations and the fact that work environments seldom support the kind of care newly graduated nurses expect to provide (for a review, see Diukic et al., 2011).

Of all the models reviewed by Gilmartin (2013), the unfolding turnover model (Lee and Mitchell, 1994), by introducing the concepts of shock and image violation, is the only one to acknowledge the role of expectations in the turnover process. For example, work by Pellico and colleagues (Pellico et al., 2009a,b) actually describes work experiences by NLRNs that fit Lee and Mitchell's (1994) concepts of shock and image violation. According to their work, image violations are thought to initiate cognitive deliberations that may result in quitting a job. However, their concept of image violation includes aspects related to both personal and professional self-image. Moreover, professional self-image was conceptualized in generic terms such as an individual's professional values, goals, and strategies for goal attainment.

Thus, our review of turnover models used in the nursing literature suggests that previous studies examining the

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