

LEADERSHIP STRATEGIES TO IMPROVE NURSE RETENTION

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Abstract: The nursing shortage and high turnover rates are a problem in the United States. The purpose of this multiple case study was to explore leadership strategies that hospital senior nurse managers in the Rocky Mountain States use to improve nurse retention. Participants were 6 hospital senior nurse managers including 3 chief nursing officers, 1 assistant chief nursing officer, and 2 directors who had demonstrated effective leadership strategies in retention of nurses. The leadership-motivated excellence theory was the conceptual framework. Semi structured interviews with open-ended interview questions were used to collect data; organization websites and documents were used to help corroborate evidence for triangulation. Data were analyzed using Yin's data analysis method. The major themes were leadership and retention strategies. The leadership strategies were senior nurse managers guiding, coaching, and mentoring registered nurses, and the retention strategies were tools used to motivate and retain registered nurses. The results may bring about positive social change by providing hospitals with leadership strategies to retain nurses. Improved retention rates of registered nurses may enhance the competitive advantage for hospitals by improving patient satisfaction scores and improving care. This improvement may result in increased hospital reimbursements and may influence organizational commitment to improving patient outcomes.

Keyword: Leadership, Strategy, Improve, Nursing, staff, Retention

Background of the Problem

Understanding what leadership strategies senior nurse managers are using to retain staff nurses is important. The health care challenges require new methods of leadership to achieve organizational strategies (Vitalari, 2013). Traditional management practices such as not addressing the difficult problems, not using interpersonal skills, and not encouraging unique strategic alliances are ineffective in the 21st century (Graen & Schiemann, 2013). Without proper leadership strategies, hospital senior nurse managers will not succeed. The ability to use effective leadership strategies is vital for the success of a hospital.

The nursing shortage and high turnover rates remain a problem worldwide (Currie & Carr Hill, 2012). To reduce nursing turnover, senior nurse managers should measure and monitor nursing turnover rates and develop, implement, and evaluate retention strategies (El-Jardali, Merhi, Jamal, Dumit, & Mouro, 2009). Given the complexity of the situation, no one strategy will address nursing turnover; several strategies together are the key (Currie & Carr Hill, 2012). Al Mamun and Hasan (2017) found that management should work on understanding why employees quit organizations and identify what attracts and retains employees to organizations. Possible recruitment and retention strategies that organizations should consider are levels of pay, promotional opportunities, and manager style (Alhamwan & Mat, 2015). Nursing leadership should adopt new strategies to improve the retention of the nursing workforce.

Problem Statement

In 2015, the RN turnover rate averaged 14% and has continued to increase (Collini, Guidroz, & Perez, 2015). The average turnover cost for hospital RNs ranged from \$20,561 to \$88,000 (Duffield, Roche, Homer, Buchan,

& Dimitrelis, 2014). The general business problem was that some senior nurse managers lack leadership strategies to manage staff nurse retention in hospitals. The specific business problem was that some hospital senior nurse managers lack leadership strategies to improve nurse retention.

Purpose Statement

The purpose of this qualitative multiple case study was to explore the leadership strategies that hospital senior nurse managers use to increase nurse retention. The targeted population sample consisted of six senior nurse managers, one from each of six hospitals located in the Rocky Mountain States, who had established effective leadership strategies in retention of nurses. Findings from this study may contribute to social change by improving retention rates of nurses, which may improve the competitive advantage for hospitals by improving patient satisfaction scores and care. This improvement may result in increased hospital reimbursements and may influence organizational commitment to improving patient outcomes.

Nature of the Study

I used a qualitative multiple case study design to explore the strategies nurse managers used to increase nursing retention in the Rocky Mountain states. A multiple case study is beneficial when the limitations between the phenomenon and the context are not easily notable (Amerson, 2011). This qualitative research study involved exploring strategies of how to increase retention rates of nurses, which may enhance the competitive advantage for hospitals. Yilmaz (2013) stated that a quantitative study involves testing a theory, examining relationships, and analyzing statistical data. In the current study, the primary intent was to understand leadership strategies and significant factors that may play a role in employee turnover; therefore, the quantitative approach was not appropriate. A mixed-methods approach may be used when previous research is either inconclusive or equivocal (Venkatesh, Brown, & Sullivan, 2016). A mixed-methods approach was appropriate for my study because the focus of the research was to explore nurses' real-life experiences and observations.

Research designs that I considered for this study were phenomenological, narrative, ethnographic, and case study. Researchers use phenomenology to study lived experiences of individuals (Gill, 2014). The phenomenological design was not appropriate for my study because the focus was on methods of human behavior and improvement strategies. The purpose of an ethnographic study is to explore the culture of social behaviors (Reeves, Peller, Goldman, & Kitto, 2013). An ethnographic design was not appropriate for this study because social behavior within a culture of nursing managers was not the focus. Researchers use the narrative design to explore a human experience by telling a story (Salkind, 2010). A narrative design was not appropriate for my study because I interviewed and collected data from nurse managers to find common themes. A multiple case study was the most appropriate research design for my study. A multiple case study involves studying a case in real life by collecting data from direct observations, interviews, and archival documents from participants and developing an understanding to explain a phenomenon (Hoon, 2013; Hyett, Kenny, & Dickinson-Swift, 2014; Yin, 2013). When the phenomenon is understood, the researcher can use the study as a tool to make change by understanding the theoretical concepts that are necessary to make a case analysis (Ates, 2013). I used a multiple case study to understand how the retention rate of hospital nurses could be increased.

A Review of the Professional and Academic Literature

In 2015, the average RN turnover rate was 14% and has continued to increase (Collini et al., 2015). The average turnover cost for a hospital RN ranged from \$20,561 to \$88,000 (Duffield et al., 2014). Because turnover is a major health care problem, the purpose of this qualitative multiple case study was to explore leadership strategies that hospital nursing managers can implement to increase nursing retention. Some senior nurse managers lack leadership strategies to manage staff nurse retention in hospitals.

This review of the professional and academic literature provides a foundation for the topic of nurse retention. The peer-reviewed literature includes key themes, such as the current health care environment and the needs associated with the Affordable Care Act, and factors affecting the nurse shortage such as nurse faculty shortage, job satisfaction, and job burnout. Nurse leadership strategies such as succession planning, nurse manager leadership development, span of control, emotional intelligence, and transformational leadership may help

improve nurse retention. Understanding the causes of decreased retention is necessary for leaders to address the antecedents of retention.

Conceptual Framework

Leadership-motivated excellence theory (LMX-T) provided the framework for the study. Graen and Schienman (2013) developed an extension of the original leader-member exchange theory (LMX) and labeled it LMXT. LMX is a theory that leaders use to develop differential relationships with their subordinates through interactions involving role expectations, resources, and rewards over time, resulting in relationships of varying quality (Mehta, 2016).

According to LMX-T, administrative leadership forms unique strategic alliances with capable employees in order to work on shared problems within the organization (Graen & Schienman, 2013). When alliances form between managers and subordinates, excellence in performance increases. When strong alliances form between subordinates and managers, communication increases. When communication increases concerning challenging new projects and new problems, subordinates and managers can talk through situations and spend time on problem-solving before the project matures (Graen & Schienman, 2013). When communication increases, nurse job satisfaction can increase and a productive team can take care of patients.

In the LMX-T theory, the responsibility of managing people is a privilege and not a right (Graen & Schienman, 2013). Employees have managers who are professional and competent. The position of a manager consists of two parts: leadership of direct reports and other colleagues and the technical administrations of the business unit regarding its mission (Graen & Schienman, 2013). Today's managers feel more competent with the technical management part than the leadership part. As a result, the engagement of employees such as nurses does not occur, and therefore a productive team does not emerge.

The LMX-T theory has three tactics that help develop new leaders. The tactics are (a) enhancing skills, (b) changing rewards, and (c) recognizing those who model effective behaviors (Graen & Schiemann, 2013). The realization of these three tactics and other quality outcomes require refined leadership skills to motivate staff to embrace change and evaluate care practice (Breevaart, Bakker, Demerouti, & van den Heuvel, 2015). The LMX-T theory is used to develop an important role of leader and team member exchange in managing and retaining employees (Graen & Schiemann, 2013). By informing employees of organizational change that will occur in the future, leaders can positively influence employees' reactions to change and thereby retain the employees (Mehta, 2016).

Factors Affecting the Nursing Shortage

Nursing Turnover

Staff and workplace turnover is the rate at which an organization gains or loses employees. Turnover is how long an employee stays in his or her employment (Currie & Carr Hill, 2011). Employee turnover costs U.S. companies billions annually (Collins, McKinnies, Matthews, & Collins, 2015). There are two types of turnover: voluntary and involuntary. Each type has its cause and effect (Anvari et al., 2014). Understanding the underlying causes of turnover of employees in the workplace is necessary when exploring nursing turnover. Nursing turnover is important due to health care organizations experiencing nursing shortage and high turnover rates (Currie & Carr Hill, 2012).

Nursing turnover for hospitals can cost anywhere from \$10,000 to \$88,000 per nurse (Duffield et al., 2014). High rates of nursing turnover in which staff are voluntarily leaving their primary employment for another position in nursing or another profession are anywhere between 12% and 50% (Dawson, Stasa, Roche, Homer, & Duffield, 2014). There are many ways that a company can play a significant role in staff turnover rates (Anvari et al., 2014). Understanding the causes of loss of personnel in the workforce is important to retain nursing staff. However, causes are hard to isolate with the complex interrelated factors that play a role in decreasing nursing turnover (Currie & Carr Hill, 2012).

Nursing labor markets in other developed countries such as Canada, the United Kingdom, and Australia are also exhibiting extreme staff shortages and high levels of turnover (Currie & Carr Hill, 2012). Nurses in the United

States have the highest turnover percentage at 41% compared to 32.9% in Canada (Alhamwan & Mat, 2015). These numbers show that nursing turnover is not just a problem in the United States but also in the international community. In Australia, a 2014 report indicated turnover rates of 1% compared to 1.4% per month (Dawson et al., 2014). Lu, Barriball, Zhang, and While (2012) found common issues across the world with some of the problems being of greater significance in different countries due to societal norms and differences in labor markets.

This highlights the importance of understanding the impact and implementing interventions to improve retention in the nursing workforce (Lu et al., 2012). The problem of the nursing shortage and high turnover rates remains a problem worldwide (Currie & Carr Hill, 2012). To help improve nursing turnover, senior nursing leaders should measure and monitor nursing turnover rates and develop, implement, and evaluate retention strategies (ElJardali, Merhi, Jamal, Dumit, & Mouro, 2009). Given the complexity of the situation, it has been determined that no one strategy by itself will address nursing turnover but several strategies together is the key (Currie & Carr Hill, 2012).

Al Mamun & Hasan (2017) found that management should work on understanding why employees' quit organizations and identify what attracts and retains employees to organizations. Van der Heijden, Homburg, and Valkenburg (2013) found nurse employee dissatisfaction emerged first over pay, then benefits, and finally management. Possible recruitment and retention strategies that health care organizations should consider are an even level of pay, promotional opportunities, and manager style (Alhamwan & Mat, 2015). By identifying, what attracts future nurses to certain organizations will help organizations recruit and retain to their health care organization.

Job Satisfaction

One of the main reasons for high nursing turnover is nursing job satisfaction (Fallatah & Laschinger, 2016). Dyrbye, et al. (2017) identifies that decreased job satisfaction correlates to the institution's inefficiencies and their organizational climate. Dawson et al., (2014) found higher workloads associated with decreased job satisfaction. High turnover relates to lower employee morale and diminished employee engagement (Collins et al., 2015). For organizations to help increase nursing job satisfaction, strategies included salaries, workload organization, and personal and career development (Buchan, 2013).

Another strategy related to improving job satisfaction was identifying other factors related to a nurse's life both inside and outside of their employment (Currie & Carr Hill, 2012). Health care leaders can use work-life balance strategies to retain employees and improve employee engagement/retention. Using work-life balance activities as a strategy for reducing turnover is vital for any organization (Lyness & Judiesch, 2014). Work-life balance has the potential to increase health care employee's engagement and as a result, increase retention.

Al Mamun and Hasan (2017) explained employee turnover as a situation in which employees leave the organization for several reasons, and as a result, negatively affects the organization regarding overall expenditure and leaves other employees short staffed. Nurses leave organizations when their values and beliefs do not connect to the organization's values and beliefs regarding nursing practice (Bragg & Bonner, 2014). When turnover occurs, hospitals lose their ability to meet patient needs and provide high-quality care. A loss of individual and organizational performance, low staff morale, and increased costs affect nursing turnover (Portoghese, Galletta, Battistelli, & Leiter, 2015). Currie & Carr Hill (2012) suggests nursing care with better nursing staff ratios or teams help improve patient conditions and avoid staff dissatisfaction and employee turnover rate. When nurses have real job satisfaction, patient care and satisfaction are met, and absenteeism and turnover are decreased (Portoghese et al., 2015).

Job Burnout

Simha, Elloy, and Huang (2014) identified burnout as a syndrome that involves both chronic emotional and interpersonal stressors that employees experience when working. Workplace stress relates to high workloads, stressful work situations, or negative relationships with colleagues (Currie & Carr Hill, 2012). Nurses can experience detachment and a lack of compassion, ineffective communication, and loss of empathy for others

(Brennan, 2017). Simha et al. (2014) suggested that an essential tool to use when trying to tackle nursing turnover is to identify burnout from staff before it is too late. Burnout affects turnover, and hospital administrators need to maintain adequate staff to take care of patients, so turnover is no longer an obstacle. If administrators do not take care of their employees by having adequate staffing, patient care could be in jeopardy or burnout could increase. Nurse leaders are affected by burnout. When nurse leaders resign, a cost for temporary nurse leadership through a recruitment agency can exceed approximately \$180,000 for a 5-month contract (Ramseur & Fuchs, 2017). Burnout for leaders develop from, personnel issues, improper work-life balance organizational stress, lack of boundaries, and technology overload (Kelly & Adams, 2018). When this occurs, the work environment is in jeopardy and has the potential to trickle down to the frontline nursing staff, which could affect direct patient care. Although many nurse leaders may no longer be in a position that connects them directly to patient care daily, the nature of their work has to provide connections to their original source of compassion satisfaction that can help with prevention of burnout in the workplace (Kelly & Adams, 2018). When nurse leaders recognize and foster their own happiness and engagement, burnout is prevented and patient care is improved.

Nurse Leadership Strategies

Succession Planning

Nursing workforce predictions indicate a shortage of nurse leader candidates. Sources estimate a deficit of 67,000 nurse manager vacancies by 2020 (Titzer, Shirey, & Hauck, 2014). Currently, nurse manager selection has candidates who are excellent clinicians but lack in formal management education and mentoring support. To ensure a competent nurse manager channel, a succession plan is necessary (Titzer et al., 2014). Nursing leaders must prioritize and invest in leadership development to help ensure effective succession planning (Ramseur & Fuchs, 2018). A good example of leadership development is assigning a leadership mentor to new nursing management leaders. When a new leader has a mentor, the manager will know the mentor can help guide them through real work scenarios.

What is succession planning? Succession planning is a business strategy that allows organizations to take on challenges effectively (Phillips et al., 2017). It is a strategic plan that involves identification, development, and evaluation intellectual capital allowing leadership continuity in the organization (Tizer & Shirey, 2013). Leadership development and succession planning are interchangeably used but they differ in objectives and strategies (Phillips et al., 2017). Healthcare leadership succession planning lags behind other industries (Tizer & Shirey, 2013). Part of nurse managers strategic planning includes succession planning, however; competing priorities hinder this process (Tizer et al., 2013). Succession planning also helps in recruitment and retention of high-potential leaders (Tizer et al., 2014).

There are several nursing succession planning designs, one must use current literature and best practice to determine the best plan (Tizer et al., 2013). A proactive, thoughtful succession planning approach creates a healthy pool of competent, promotable, well-prepared nurse leaders for future generations (Tizer et al., 2013). The Chief Nursing Officer should evaluate how succession planning fits into the organization's strategic plan and workforce initiatives. The cost included in the operational budget (Tizer et al., 2014). For effective succession planning, support from top executives is imperative to its success (Tizer & Shirey, 2013). Once in place, an annual leadership gap analysis using nursing leadership competencies is imperative (Tizer et al. 2014). With annual analysis leadership vacancies, projected promotions, and retirements can be identified and the succession planning can be designed to target these vacancies (Tizer et al., 2014).

Nurse Manager Leadership Development

Leadership is a high position in an organization, a personal characteristic, and a relationship between leaders and followers (Silva, 2014). Leaders should have a moral standing for their followers to move in their direction. A leader is also accessible and visible for their followers especially in times of stress and crisis (Gabriel, 2015). Albagawi, Laput, Pacis, and AlMahmoud (2017) suggest that nurse leaders be self-motivated, possess the internal drive to finish the job at hand and to share common goals because they have significant roles in their nursing organization, which affect people's lives and attitudes towards their profession.

Followership is a tool that leaders must use to establish high-performing, safety-conscious nursing teams that will focus on quality improvement with patient care (Whitlock, 2013). If leaders are not there for their followers in the time of need, they are looked at as not being supportive or deserting their followers. Leaders must also be creative thinkers and problem-solvers to be successful in the workplace (Peachey, Zhou, Damon, & Burton, 2015).

Effective nurse leadership depends on effective leadership development (MacPhee, Skelton-Green, Bouthillette, & Suryaprakash, 2012). For nurse managers to have the right skills, training, and mentoring to be successful, senior nurse leaders have to continue to train their managers throughout their career.

The practice of hiring the most experienced and highest performing nurses into the role of nurse manager often results in personal conflict, ineffective leadership, and confusion with other nurses (Nelson, 2017). When this occurs, roles between the manager and staff nurses are not clear which adds unnecessary confusion and as a result makes the new manager unsuccessful.

Lack of support is one of the major factors related to nursing manager turnover. Nurse Managers often report they have strong peer support but lack senior leadership support (Loveridge, 2017). The lack of senior leadership support is concerning because there is a declining number of nurses undertaking the nurse manager role which will affect the clinical setting (Manning, Jones, Jones, Fernandez, 2015). McKinney & McKay, 2016, reported that 86% of the nurse managers lacked formal training in leadership when coming into the role. Loveridge, 2017 found the first year as a nurse manager was the hardest due to lack of orientation and mentorship.

A comprehensive manager orientation, support group, and mentorship are encouraged to help the nurse manager be successful (Loveridge, 2017). When new nurse managers are able to talk through situations with fellow colleagues and senior nurse leaders, ideas are created because situations are clarified. Nurse leaders need the training to help enhance their supervision/management of staff for professional nursing practice and support the achievement of career goals (Tsang et al., 2017).

Delmatoff and Lazarus (2014) determined that leadership development with continuous improvement does not end upon the hiring of a manager. One strategy to use is for a manager to lead by example and go back to the front lines, and see how their employees are working. (Davies, 2013). Macphee et al., 2012 found that a theoretical empowerment framework could empower nurse leaders leading to nursing empowerment. If the manager creates positive practice environments, this will ultimately improve nurse retention rates and patient care outcomes (Twigg & McCullough, 2014). Clark-Burg & Allieux, (2017), recommended a series of short courses for nursing managers on leadership development and management skills. The American Organization of Nurse Executives and other national nurse organizations collaborated to develop the Nurse Manager Learning Partnership. This partnership focuses on three domains, the science, the art, and the leader within while being in the nurse manager role (Ramseur & Fuchs, 2018). This program has proven to be a valued resource for developing future nurse leaders in health care organizations.

Another successful strategy is to identify what the nurse manager needs to succeed. The senior nurse leader needs to conduct a training needs assessment for the nurse manager. Kvas, Seljak, & Stare, 2014, list the following categories in their needs assessment (a) positive attitude towards education, (b) excellent interprofessional relationships, (c) realization skills, (d) execution of procedures, and (e) communication tools with staff. Brennan, 2017 suggests nurse managers having emotional intelligence, diplomacy, facilitating team learning and adequate resiliency skills. Twigg & McCullough, 2014 explains the importance of honing of emotional and social intelligence, appreciative inquiry, and critical incident analysis.

Span of Control

An important factor in leadership success is the leader's span of control. In response to increasing financial costs for hospitals, they have strategically increased nurse manager's span of control (Simpson, Dearmon, & Graves, 2017). The span of control is the number of employees under the direct supervision of a manager. The smaller the span of control, the more opportunities for effective leadership (Havaei, Dahinten, Macphee, 2015). Havaei et al, 2015 found that there were adverse effects on novice nurse leaders with a wider span of control and senior

management should consider this when mentoring these managers. Wong et al., 2015 noted that organizations must create strategies to manage the span of control for frontline managers to ensure they can achieve successful outcomes and have the time to facilitate staff work. Meyer et al., 2011 explains that the span and operational hours that nurse managers have, can affect their capacity to influence nurse satisfaction and outcomes to improve. Simpson et al., (2017) states that research supports the importance of measuring the manager's span of control and providing strategic support to those with a larger span of control. If frontline managers are not able to focus on specific tasks starting out, they may never be able to learn the foundation they need to be a successful nurse/frontline manager.

Emotional Intelligence

Senior nurse leaders also need to measure if their managers have enough emotional intelligence (EI) for them to be successful in their positions. If they do not have EI, the senior nurse leader needs to help foster and develop their EI. EI is the ability to manage, perceive, and evaluate emotions of oneself, in others, and in groups (Clancy, 2014). In the health care field, employees use ranges of emotions each day and it is important for nurse managers to be able to identify if their employees use the appropriate emotion.

Other characteristics of EI are self-regulation, motivation, empathy, and social skills (Phillips & Harris, 2017). Each employee is different so the manager has to be able to evaluate their employees to identify what type of EI they have. Tyczkowski, Vandenhouten, Reilley, Kubsch, 2015, noted the importance of emotional intelligence and even recommended an assessment of EI pre-employment to recruit the strongest applicants. Leaders with emotional intelligence are high performers who contribute to organizational success. Emotional intelligence increases in leaders by having them explore, analyze, and foster their EI leadership skills (Heckemann, Schols, & Halfens, 2015).

Senior nurse leaders need to show new nurse managers how to manage their emotions to create positive work environments (Heckemann et al., 2015).

Transformational Leadership

In today's rapidly changing environment a healthcare organization should not only have a vision and mission, but their leaders must practice the vision and mission daily (Waterbury, 2016). If employees see the leaders not practicing the vision and mission daily, they will not see the importance of practicing it themselves. Leadership development programs for nurse managers using the initial principles of transformational leadership (TL) can contribute to organizational goal achievement and improved patient outcomes (Simpson, Dearmon, & Graves, 2017). TL collaborates with subordinates to form mutual goals and is associated with better patient outcomes, fewer medical errors, and reduced staff turnover (McRae, 2017). Transformational leadership is a strategy used in today's health care environment to help meet challenging demands (Choi Goh, Adam, & Tan, 2016).

Transformational leadership can affect job satisfaction positively and is a framework for developing leadership competencies to cultivate a team-focused culture (Fischer, 2017; (McRae, 2017). The four dimensions of transformational leadership are: (a) taking a personal interest in a colleague that has potential, (b) the ability to solve problems, (c) the ability to communicate expectations and significant undertakings and to motivate people, and (d) charisma or the ability to provide a clear vision, instill pride, and earn the respect of followers (Liang & Steve Chi, 2013). When leaders earn respect, the followers will do whatever they need to and the organization will be successful.

Health care clinical leaders should consider using these strategies to improve employee engagement and retention. Leggat & Balding, (2013), emphasize that transformational clinical leaders are critical to an organization with or without organizational structure. This is because this leadership characteristic is used in a team approach and with health care professionals; patient care is all about teamwork. Nurses entering practice today must be adequately trained to meet the demands for rapid-cycle improvement within a blustery environment of advancing technology, shifting demographics, and shrinking resources (Fischer, 2017).

Henrick, Brennan, & Monturo, (2016), found that midlevel managers were less engaged in leadership but focused more on tasks. Making it important to implement transformational leadership in all roles. Albagawi et al. (2017),

show in their study that there is a need to develop leadership behaviors that are proven effective in implementing positive and adaptive behaviors among nurse leaders. Weber, Ward, & Walsh, (2015), successfully implemented a transformational leadership curriculum to help support a successful transition of nurses to nursing managers providing a framework to strengthen their overall nursing department. Buck & Doucette, 2015 also found that with transformational leadership practiced in their Chief Nursing Officers it created a collaborative, civil, and healthy environment with better patient outcomes. When the health care environment is civil and nurses and other clinical staff are using teamwork, the patient wins every time.

Population and Sampling

The sample population for this study consisted of six senior nurse managers from six different hospitals in the Rocky Mountain States. The participants each had 5-10 years of experience as RNs. I selected senior nurse managers who had experience with hiring responsibilities using leadership strategies that focus on the retention of nurses. Individuals who served as vice presidents, directors, and assistant directors met the requirements and were eligible to participate in the study. I used purposeful sampling to identify participants for my multiple case study interviews. Data for this multiple case study came from interviews, documents, and direct observations (see Yin, 2014), which prevented the need for a large sample size.

I collected data by interviewing participants in a suitable setting. The interview setting provided a comfortable and non-threatening environment and allowed participants to be honest about their health care experiences (see Shahgholian & Yousefi, 2015). I conducted interviews via Skype, FaceTime, or regular telephone due to the distance I was from the hospitals. I asked participants to select the best setting that would minimize interruptions for them. The schedule interviews were for 60 minutes.

Recommendations for Action

Every hospital in the United States is unique with varying factors that determine its mission, vision, values, services provided to patients, and strategies to compete successfully in the ever-changing health care industry. In order to be successful, senior nurse managers must establish a multifaceted tool when using leadership strategies to increase nurse retention. Hospitals will also need to be able to evaluate the effectiveness of their multifaceted tool.

Senior nurse managers should reach out to surrounding organizations to determine what leadership strategies other organizations are using to increase nurse retention. The senior nurse managers interviewed are learning from other local health care facilities on what they are doing so that they can compete for RNs. Senior nurse managers who are trying to improve their leadership development program for middle managers in order to retain nursing staff may benefit from this information. I recommend the following actions based on the results of my study:

- Senior nurse managers have to have leadership strategies that work with frontline staff and nurse managers. If the strategies do not work with the frontline staff and nurse managers, the senior nurse manager will fail. The leadership strategies performed by the study's participants were to guide, coach, and mentor RNs.
- Provide leadership development for frontline RNs as well as nurse managers. Often times RNs are assigned to be in a leadership role due to their great bedside care to patients. This often makes the RNs not be successful in their leadership role because very few have furthered their leadership training since nursing school.
- Provide career mapping with each nurse to determine what his or her goals and aspirations are. The focus of this program is to make sure nurses are finding satisfaction where they work and do not leave because they cannot transfer to another department within the facility. Nurses may want to transfer to another department due to career aspirations or because they are trying to get away from low performing employees.
- Recognize whom are the low performing nurse are and actively coach them up or coach them out of the department. The main reason for this is so departments do not end of losing the quality nurses because they do not want to work with low performing nurses.
- Work towards becoming a Magnet organization and have shared governance. Shared governance is a useful strategy for retaining nurses because it gives each RN the ability to get involved and to make changes.

When RNs know that their voices are being heard, nurses will want to work for organizations that use this strategy.

- Senior nurse managers must look at the amount of time an RN is on shift and if the RN has to rotate nights, days, and weekends. For example, working 12 hours versus 8-hour shifts. When RNs are able to have flexibility and stability with their work schedules, they have better balance with work and home life.
- Senior nurse managers have to look at nurse retention by the type of worker. For example, there are many generations in the workforce and not all employees have the same work goals. In some cases, veteran nurses that are not quite ready to get out of the working environment work longer if they are able to decrease the number of hours they work each week. The veteran nurses might be interested in the possibility of job-sharing with another veteran nurse in order to continue to work limited hours.
- The literature highlighted the importance of using transformational leadership with nurses. When nurses know that their leaders support their work, participation with decisions on the unit will occur. Nursing leaders who implement transformational leadership can improve working performance. It is important for senior nurse managers to try to engage in transformational leadership in order to ensure that work environments are empowering, which will lead to better outcomes for patients and improve nurse retention.

Recommendations for Further Research

There is research regarding the nursing shortage; however, research on successful leadership strategies that help retain nurses is limited. The literature specified that the health care industry has struggled with dealing with the shortage of RNs. Continued studies regarding leadership strategies to help improve nurse retention should be explored to address areas not addressed in my study and to review delimitations. My motivation for this study was to highlight leadership strategies that senior nurse managers and hospital leaders can use to help retain RNs because there are few studies that exist. A further study to determine a categorical set of key indicators that business leaders may exercise that is transferable to businesses in other industries is highly recommended.

Further studies could reveal information associated with researching the views of RNs in hospitals. The limitations of this study were the geographical location and the small number of participants. Another recommendation would be to perform another case study in another state. Future studies could be performed in other parts of the world to gain a broader perspective of leadership strategies. Additionally, researchers in different geographical locations could collaborate to magnify the study. Multiple research methods could be performed to expand the existing findings and improve legitimacy that could add further awareness into retaining RNs. Finally, the proposed topics for additional research may assist senior nurse managers to focus their attention on the factors with significant impact on leadership strategies that help retain RNs.

Conclusion

Understanding the causes for loss of nurses in the workforce is important because nurses can potentially dictate patient care and access to health care (Kruse, Bolton, & Freriks, 2015). Nurses are needed to take care of patients in hospitals and quality care is dependent upon nurses. Without proper leadership strategies, hospital senior nurse managers will not succeed. The ability to use effective leadership strategies is essential to a hospital's success. Given the complexity of the situation, it has been determined that no one strategy by itself will be effective in addressing the situation. Nursing leadership should adopt multiple strategies to improve the retention of the nursing workforce. When there are sufficient nurses, patient care improves, and hospitals see positive economic and social change.

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