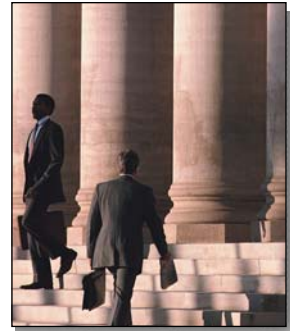


PRACTITIONER FORUM

Jeri Burn, RN, MSN



Nurse Retention and Recruitment

The VA Needs More Magnet Hospitals

Nursing shortages have come and gone in the past, but the current shortage of professional nurses is building to crisis proportions and threatens to reach a level of severity that has never before been seen in this country.¹ In 2000, there was a 6% shortage of registered nurses nationwide, and by 2020, this figure is expected to climb to 29%.² This means that by the close of the second decade of this century, there would be 400,000 vacant registered nurse positions.³ Clearly, a shortage of this magnitude would have a serious effect on health care delivery in the United States.

The VA oversees the nation's largest health care system and employs more than 32,000 full-time registered nurses.⁴ In 2003, more than 4.8 million veterans received care within the VA health care system.⁵ Given these facts, a nursing shortage as severe as the one predicted to develop over the next decade has the potential to cripple the ability of VA medical facilities across the country to continue providing quality health care services. Consequently, the health of our nation's veterans, including those who are

just returning from service in Iraq and Afghanistan, is at risk.

It is imperative, therefore, that nursing leaders within the VA begin immediately to work on strategies for effectively recruiting and retaining talented registered nurses who can help the VA provide the high quality care deserved by those who have served our nation so well. In this column, I'll explain why the Magnet Nursing Services Recognition Program—an initiative by the American Nursing Association (ANA) that has proven successful in attracting quality nurses, retaining current nursing staff, and improving job satisfaction among nurses⁶—may be just what the VA needs to achieve this important goal.

UNDERLYING PROBLEMS

Exactly what is behind the currently developing shortage of registered nurses? Surveys indicate that many nurses are dissatisfied with their choice of career, citing such problems as lack of available time for direct patient care, increased patient load, inadequate staffing, decreased quality of patient care, feelings of powerlessness, and mandatory overtime. In fact, a majority of nurses would not recommend nursing as a career to friends or family members.⁷

Meanwhile, interest in nursing as a career among college freshmen has decreased by approximately 40% since 1973, due mainly to expanding career opportunities for women.⁸ This fact is significant as nursing remains largely a female profession. In 2003, the Bureau of Labor Statistics reported that 92.1% of all registered nurses in the United States were women.⁹

Considering these two factors, any efforts to reduce the nursing shortage within the VA need to be focused on making the profession of nursing more attractive and appealing to both the current population of VA nurses and anyone who might consider becoming a VA nurse.

THE MAGNET PROGRAM

The Magnet Nursing Services Recognition Program has its roots in the 1980s, when an earlier national nursing shortage prompted the American Academy of Nursing to investigate a group of hospitals that were able to attract and retain nurses. These hospitals were designated as "magnets." Initially, magnet hospitals were defined as those that: (1) were considered good places to practice nursing by the nurses who worked there, (2) had low turnover and vacancy rates,

Ms. Burn is a staff nurse for the acute medicine unit at the VA Ann Arbor Healthcare System in Ann Arbor, MI.

and (3) were located in areas where there was significant regional competition for nursing services.¹⁰

Over the years, these initial efforts evolved into the Magnet Nursing Services Recognition Program, which was established formally by the ANA in 1993. Run by the American Nurses Credentialing Center, the Magnet program today incorporates 14 criteria, involving standards of care and of performance, to identify and acknowledge excellence in hospital services.¹¹ Overall, Magnet hospitals consistently demonstrate the following three core features of nursing services:

- professional autonomy over practice;
- nursing control over the practice environment; and
- effective communication between nurses, physicians, and administrators.⁶

In addition to supporting nurses' autonomy and facilitating effective relationships between nurses and other staff,¹² Magnet-designated hospitals provide nurses with favorable practice conditions, including adequate nurse-to-patient ratios and a decentralized organizational structure that emphasizes participatory management. Nurses at these hospitals feel that their professional skills are valued and that they have opportunities to advance their clinical careers.

These favorable conditions result in measurable advantages. Compared to non-Magnet hospitals, those that have been recognized have shown significantly increased levels of job satisfaction, lower rates of nursing staff turnover (an average of 9% versus 18%, respectively, among Magnet and non-Magnet acute care hospitals),¹³ and both higher levels of patient satisfaction and better patient outcomes.¹⁴

Magnet-designated hospitals provide nurses with favorable practice conditions, including adequate nurse-to-patient ratios and a decentralized organizational structure that emphasizes participatory management.

MAGNET HOSPITALS AND THE VA

There are currently more than 100 Magnet-designated hospitals across the United States.¹⁵ Only two of the VA's 158 hospitals, however, have attained this recognition: the James A. Haley Veterans Hospital in Tampa, FL¹⁵ and, most recently, the Michael E. DeBakey VA Medical Center in Houston, TX (M. Allison, written communication, August 17, 2004).

Common strategies many hospitals (including those in the VA health care system) currently rely upon to fill nurse vacancies, such as sign-on bonuses and use of agency nurses, are short term and fail to address nurses' core concerns.¹⁶ More central to the problem are issues of professional respect and autonomy—both of which are incorporated in the Magnet criteria. When nurses are able to find fulfillment in their chosen profession, they will begin to promote nursing as a career and encourage others to join their ranks.¹⁷ The Magnet program is rooted in this idea.

Attaining Magnet recognition is a time consuming process that involves meeting rigorous standards for sustaining excellence, improving professional practice, and transforming workplace culture.¹⁸ Furthermore, maintaining this status requires participation in annual quality monitoring activities and a redesignation procedure every four

years.¹⁹ But as Steven M. Barney, vice president of human resources for SSM Health Care, St. Louis, MO, indicated in his 2002 article about the U.S. nursing shortage, hospitals must be willing to make radical organizational changes in order to better serve the needs of nurses.²⁰

The potential for demonstrating nursing excellence within the VA health care system is enormous. In order to do so, however, more VA hospitals must begin to cultivate and establish the kind of working environment that promotes excellence—and the possibility of earning Magnet recognition can be a strong incentive for making these necessary changes. Magnet hospitals have proven advantages in the increasingly competitive market for nursing services.²¹ If more staff nurses and nursing leaders in the VA advocate for their hospitals to take the actions necessary to achieve Magnet status, we may be able to avert the impending VA nursing crisis and deliver on our promise of providing quality care to American veterans for years to come. ●

The opinions expressed herein are those of the author and do not necessarily reflect those of Federal Practitioner, Quadrant HealthCom Inc., the U.S. government, or any of its agencies. This article may discuss unla-

Continued on page 85

Continued from page 81

beled or investigational use of certain drugs. Please review complete prescribing information for specific drugs or drug combinations—including indications, contraindications, warnings, and adverse effects—before administering pharmacologic therapy to patients.

REFERENCES

- Buerhaus P. A nursing shortage like none before. Interview by Carol Lindeman. *Creat Nurs*. 2000;6(2):4-7.
- Projected Supply, Demand, and Shortages of Registered Nurses: 2000-2020*. Rockville, MD: U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, National Center for Health Workforce Analysis; July 2002. Available at: bhpr.hrsa.gov/healthworkforce/reports/rmproject. Accessed August 19, 2004.
- Buerhaus PI, Needleman J, Mattke S, Stewart M. Strengthening hospital nursing. *Health Aff (Millwood)*. 2002;21(5):123-132.
- VHA nursing staff fact sheet. Department of Veterans Affairs web site. Available at: www1.va.gov/ncvan/docs/2002Nursingfactsheet2.htm. Accessed August 15, 2004.
- Facts about the Department of Veterans Affairs. Department of Veterans Affairs web site. Available at: www1.va.gov/opa/fact/vafacts.html. Accessed August 15, 2004.
- Havens DS, Aiken LH. Shaping systems to promote desired outcomes. The magnet hospital model [published correction appears in *J Nurs Adm*. 1999;29(4):5]. *J Nurs Adm*. 1999;29(2):14-19.
- Analysis of American Nurses Association Staffing Survey*. Warwick, RI: Cornerstone Communications Group; February 6, 2001. Available at: www.nursingworld.org/staffing/ana_pdf.pdf. Accessed August 15, 2004.
- Staiger DO, Auerbach DI, Buerhaus PI. Expanding career opportunities for women and the declining interest in nursing as a career. *Nurs Econ*. 2000;18:230-236.
- Labor Force Statistics from the Current Population Survey. Household Data: Annual Averages. Characteristics of the Employed. Table 11. Employed persons by detailed occupation, sex, race, and Hispanic or Latino ethnicity. U.S. Department of Labor, Bureau of Labor Statistics web site. January 2004. Available at: ftp.bls.gov/pub/special.requests/lfaat11.txt. Accessed August 19, 2004.
- Scott JG, Sochalski J, Aiken L. Review of magnet hospital research: Findings and implications for professional nursing practice. *J Nurs Adm*. 1999;29(1):9-19.
- American Nurses Credentialing Center. *Health Care Organization Instructions and Application Process Manual*. Washington, DC: American Nurses Credentialing Center; 2002.
- Upenieks VV. The interrelationship of organizational characteristics of magnet hospitals, nursing leadership, and nursing job satisfaction. *Health Care Manag (Frederick)*. 2003;22(2):83-98.
- Upenieks V. Recruitment and retention strategies: A magnet hospital prevention model. *Nurs Econ*. 2003;21:7-13, 23.
- Aiken LH, Havens DS, Sloane DM. The Magnet Nursing Services Recognition Program. *Am J Nurs*. 2000;100(3):26-35.
- Magnet facilities: Health care organizations with Magnet Designated Nursing Services. American Nurses Credentialing Center web site. Available at: www.nursingworld.org/ancc/magnet/facilities.html. Accessed August 15, 2004.
- Aiken LH, Clarke SP, Sloane DM, et al. Nurses' reports on hospital care in five countries. *Health Aff (Millwood)*. 2001;20(3):43-53.
- Burn J. *Women Who Chose Nursing as a Career: A Historical Perspective* [master's thesis]. Ypsilanti, MI: Eastern Michigan University; 2004.
- Spellerberg D. Empowerment draws nurses to a new magnet facility. *Nurs Spectr (Midwest Ed)*. March 1, 2004;5:14.
- McClure ML, Hinshaw AS, eds. *Magnet Hospitals Revisited: Attraction and Retention of Registered Nurses*. Washington, DC: American Nurses Publishing; 2002.
- Barney SM. The nursing shortage: Why is it happening? *J Healthc Manag*. 2002;47:153-155.
- Bungarmer SD, Beard EL Jr. The magnet application: Pitfalls to avoid. *J Nurs Adm*. 2003;33(11):603-606.