

INCREASING REGISTERED NURSE RETENTION USING A MENTORSHIP PROGRAM

A Scholarly Project

Submitted to the

Faculty of Liberty University

In partial fulfillment of

The requirements for the degree

Of Doctor of Nursing Practice

By

Krystle Lynette Forlines

Liberty University

Lynchburg, VA

December, 2018

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Scholarly Project Chair Approval:



Sharon Kopsis, EdD, RN, FNP-C, CNE

ABSTRACT

To address the nursing shortage, it is imperative that healthcare organizations understand the reasons for nurse turnover and develop programs to retain high quality nurses. A program that has been utilized by healthcare organizations is mentoring. Mentor programs have been found to improve job satisfaction thus improving nurse retention. In addition to focusing on orientation programs for new graduate nurses, mentorship programs can be utilized to assist with experienced nurse retention. The purpose of this evidence-based practice project was to pilot a three-month mentorship program with registered nurses with one to three years of experience.

Keywords: nurse turnover, nurse retention, mentoring, nurse mentors

Dedication

I would like to dedicate this manuscript to my daughter, Kendrix. You are an absolute joy and blessing. I love you.

Acknowledgements

I would like to acknowledge my husband, Jared, parents, David and Judy, and Sister, Whitney. Thank you for your support, encouragement, and love during these past two years. I would not be where I am today without you.

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List of Abbreviations

Academy of Medical-Surgical Nurses (AMSN)

Doctor of Nursing Practice (DNP)

Institutional Review Board (IRB)

Registered Nurse (RN)

SECTION ONE: INTRODUCTION

Healthcare organizations depend on nursing knowledge to provide excellent quality care to patients. Nursing researchers have noted that the projected nursing shortage, if not corrected, is expected to affect patient safety, patient quality, and healthcare cost. Recruiting costs and agency staffing that result from nurse turnover are costly to hospitals. In addition to increased costs, high nursing turnover results in a loss of experience and knowledge for nursing units. This loss can also contribute to an increase in nurse to patient ratios which has been associated with poor patient outcomes and adverse events. To address the nursing shortage, it is imperative that healthcare organizations understand the reasons for nurse turnover and develop programs to retain high quality nurses. A program that has been utilized by healthcare organizations is mentoring. Hnatiuk (2012) defines mentoring as a partnership between the mentor as a teacher and the mentee as a student. Mentoring can occur at any phase of an individual's career, whether a new graduate, an experienced nurse, or an established clinician taking on a leadership position. Mentor programs have been found to improve job satisfaction thus improving nurse retention.

Background

The nursing shortage is a global issue that is currently affecting the ability of healthcare organizations to recruit and retain qualified nurses (Lartey, Cummings, Profetto-McGrath, 2014). Recent projections indicate that the current nursing shortage in the United States will result in a shortage of 193,000 nursing professionals and will create 1.6 million job openings for nurses by 2020 (Bureau of Labor Statistics, 2016). According to the 2016 National Healthcare Retention and RN Staffing Report from Nursing Solutions, the average cost of bedside hospital registered nurse (RN) turnover was 37,000 to 58,400 dollars. Based on this report, hospital turnover was

said to level off in 2015; however, the registered nurse turnover rate has since steadily increased to 17.2 percent, which is up from 16.4 percent in 2014. Each percent change in registered nurse turnover is said to cost or save a hospital an additional 373, 200 dollars (National Healthcare Retention and RN Staffing Report, 2016).

Nursing scholars have documented that elements of the nurses' work environment are key factors of turnover, including increased workloads, higher patient acuity, moral distress, burnout, lack of leadership support and poor interprofessional working relationships (Hayward, Bungay, Wolff, & MacDonald, 2016). Poor interprofessional working relationships can include issues with communication and collaboration; Both have been associated with nurses' attachment to their organization and improving nurse retention. "For RNs, working in the hospital with a better practice environment has been found to be associated with significantly lower odds of experiencing burnout, job dissatisfaction, and the intention to leave" (Blake, Leach, Robbins, Pike, & Neddleman, 2013, p. 357).

Problem Statement

Fifteen new graduate RNs were hired late spring 2016. The turnover for this group was 40 percent. Of the 15, three RNs left within their first year followed by an additional three the second year of employment. The rural hospital has created new programs to assist with new graduate RN turnover; however, the organization is concerned about retaining RNs with two to three years of experience. For 2017, the yearly RN turnover rate was 13.6 percent. For the month of December 2017, 11 departments had a critical RN vacancy rate, between 20.8 and 64.5 percent.

To assist with the issue of the nursing shortage and retention of nurses, a mentorship program was created at the rural hospital. Because this was a new concept and program, a pilot

study was conducted with nurses with one to three years of experience. Nurses were surveyed regarding job satisfaction/intent to leave the organization prior to beginning the program. At the end of three-month mentorship program, the nurses were surveyed again.

Purpose of the Project

The purpose of this project was to implement a mentorship program for nurses with one to three years of experience at the local, rural hospital. After completion of this program, it was projected that the following would occur: Increase in communication skills, increase in confidence, increase in competence, decrease in stress, and further development of interpersonal relationships and professional socialization. Based on these objectives, it was proposed that the nurse's satisfaction with their job/organization would increase, thus decreasing their desire to leave the organization.

Clinical Question

Per Hall and Roussel (2014), well-built clinical questions should be the starting point for developing a search strategy. The question should include information about: the patient or problem being addressed, the intervention or exposure being considered, the comparison intervention or exposure, and the clinical outcomes of interest. The following question was developed to guide this evidence-based practice project: In advanced beginner/competent registered nurses, does the participation in a three-month mentorship program increase intent to stay employed?

SECTION TWO: LITERATURE REVIEW

A systematic review of the literature using the electronic databases MEDLINE (EBSCO) and CINAHL (Cumulative Index of Nursing and Allied Health Literature) was completed. The

terms searched were nurse turnover, nurse retention, mentoring, and nurse mentors. It is important to note that a vast amount of information is available on orientation programs related to new graduate nurses; however, limited information is available that focuses on retention of experienced nurses. Due to this limitation, literature published from 2008 to 2017 was used for this project.

The Literature Review includes a description of the theoretical and conceptual framework and a review of the literature. The conceptual framework used to guide this evidence-based practice project is the Iowa Model. The theoretical framework utilized is Benner's stages of clinical competence, which describe the continuum for how nurses learn new roles and skills. This review is divided into the following sections: nurse turnover, predictions of nurse turnover, job embeddedness, and mentorship programs.

Nurse turnover.

The nursing shortage is expected to be twice as large as any other shortage seen in the United States in the past since the early 1960s. Historically, about 10 to 30 percent of new graduate registered nurses have left their current positions within the first two years (Blake, Leach, Robbins, Pike, & Needleman, 2013). Recent projections indicate that the current nursing shortage in the United States will return in a deficit of 193,000 nursing professionals and will create 1.6 million job opening for nurses by 2020 (Bureau of Labor Statistics, 2016). According to the National Healthcare Retention and RN Staffing Report (2016), 32 percent of hospitals report a vacancy rate for RNs of ten percent or greater.

The task of increasing the retention of registered nurses is vital to address the issue of the current nursing shortage. Additionally, decreasing nurse turnover could decrease healthcare cost,

increase staff satisfaction, and maintain safe patient care. Studies have indicated that nurse turnover has been associated with high organization cost and a lower quality of care (Lartey, Cummings, Profetto-McGrath, 2014). According to Kurnat-Thoma, Ganger, Peterson, and Channell (2017), replacement of qualified RNs is cited at 48,000 dollars for a medical-surgical nurse and 64,000 dollars for a critical care nurse. These amounts are said to be associated with the direct costs of supplanting staff (EX: human resources department time and resources, hospital manager time, accrued paid time off, and temporary coverage costs) and the indirect costs of orienting new staff (EX: mentoring time, productivity decreases, morale decreases, training equipment, and materials). Additionally, new-hire losses result in exponential increases in per capita hiring, produce higher nurse to patient ratios for remaining staff, and can drive departures and early retirements of tenured staff. In addition to recruiting cost and agency staffing, shortages at the unit level and high nurse to patient ratios have been associated with poor patient outcomes and adverse events (Blake, Leach, Robbins, Pike, & Needleman, 2013).

Predictions of nurse turnover.

Job satisfaction is the primary factor that influences nurse retention; job satisfaction is inversely related to intent to leave among experienced nurses (Han, Trinkoff, & Gurses, 2015). Intent to leave is said to be the strongest predictor of actual turnover. Intention to leave has been defined as the employee's plan to quit his or her present job in the near future. "Studies that have looked specifically at intent to leave have shown a relationship between nurses stating their intention to leave and their actual leaving/exit from their positions" (Blake, Leach, Robbins, Pike, & Needleman, 2013, p. 359).

Based on the literature, it is many factors that contribute to a nurses' intent to leave an organization. In the article, *A Qualitative Study of Experienced Nurses' Voluntary Turnover:*

Learning from their Perspectives, nurses' decision to leave their practice were influenced by several interrelated work environment and personal factors, such as: higher patient acuity, increased workload, ineffective working relationships, gaps in leadership support and negative impacts on nurses' health and well-being. Ineffective working relationships with other nurses and lack of leadership support was said to lead to the nurses feeling dissatisfied and ill equipped to perform their job. In addition, the impact of high stress was evident on the nurses' health and well-being (Hayward, Bungay, Wolff, & MacDonald, 2016). In another article, *Work-related Factors, Job Satisfaction, and Intent to Leave the Current Job among United States Nurses*, lack of support from peers and supervisors were related to significantly lower job satisfaction. For intention to leave, nurses who planned to leave their job position reported significantly lower autonomy and less support from their peers than nurses who intended to remain in their current position (Han, Trinkoff, & Gurses, 2015).

Job embeddedness.

According to Halfer (2011), for health care organizations to reduce turnover, instead of attempting to understand why employees leave, they must understand why they stay. In its relation to nurse retention, job embeddedness has been defined as the fit, links, and sacrifice between an employee, their organization, and their community. According to Reitz (2014), fit can be defined as the extent that job and community match with each aspect of people's lives. Important components of the fit between an employee and their organization include: their future plans in the current organization, career goals, and personal values. Links, connections people have with other people or activities, can include both formal and informal influences between the employee and their community and their current organization. Sacrifice, the final concept, describes the ease with which links can be broken, such as what benefits and advantages

employees would part with if they left the organization. In summary, job embeddedness can be described as a continuum that can be measured by assessing the fit, links, and sacrifice an employee possesses with both the healthcare organization and the community. “The more embedded an individual is in both the community and organization, the more likely that individual will remain at their current job” (Reitz, 2014, p. 161).

Mentorship programs.

Hnatiuk (2012) defines mentoring as a partnership between the mentor as a teacher and the mentee as a student. The mentee is paired with an experienced nurse, the mentor, to learn a new position and/or develop in a new role. The mentor is the guide and expert and serves as the mentee’s role model. Mentoring can occur at any phase of an individual’s career, whether a new graduate, an experienced nurse, or an established clinician taking on a leadership position. After experiencing an effective mentoring relationship, benefits for the mentee include: increased self-confidence, enhanced leadership skills, accelerated acclimation to the culture of the unit/organization, enhanced communication, and reduced stress (Hnatiuk, 2012).

In the article, *Job Embeddedness Factors and Retention of Nurses with 1 to 3 Years of Experience*, the author points out that although the literature addresses the developmental needs of novice nurses, there is limited research and information on the professional support needed in the early years of a nurses’ career. In this article, Halfer (2011) examined job factors and career development support that lead to retention of nurses with one to three years of experience. Results of this study found that younger nurses, those who did not feel part of the work team, and those who feel as if they do not fit well with the hospital were more likely to leave the organization, thus emphasizing the concept of job embeddedness. In addition to assessing a nurses’ organizational fit, providing professional socialization, and offering career development

opportunities early in their careers can result in decrease nurse turnover. It is recommended that nursing leaders and staff educators provide mentorship activities, support continuing education and certification achievement, and offer funding support for education (Halfer, 2011).

In the article, *Increasing Registered Nurse Retention Using Mentors in Critical Care Services*, the retention rate of nurses with a mentor was compared to the retention rate of nurses that were not mentored. The mentor assisted the mentee in developing interpersonal skills (communication, feedback, assertiveness, service behaviors, conflict management, relationship building, and dealing with difficult people and situations); management skills (delegation, motivation, team building, organization culture, networking, self-management, and self-care); and organizational skills (goal setting and time management). The retention rate of nurses with a mentor was 91 percent, which is a noted increase from the 66 percent for the non-mentored group (Schroyer, Zellers, & Abraham, 2016).

In the article, *Nurses Supporting Nurses: Creating a Mentoring Program for Staff Nurses to Improve the Workforce Environment*, a three-year academic-hospital partnership developed and used a registered nurse mentor and advocacy program to improve the RN work environment and selected patient outcomes related to falls, pressure ulcer prevention, and use of restraints. Even though the changes could not be attributed solely to the program, there were improvements in hospital-wide data of patient and nurse satisfaction, nurse vacancy and retention rates, and patient safety data. Overall, the program prevented more than 24 RNs from leaving the two hospitals, which equates to a cost savings of almost 2.5 million dollars by using a replacement charge of 100,000 dollars per RN. In addition to retention and cost savings, the program assisted with improving the work environment of nurses (Latham, Hogan, & Ringl, 2008).

In the article, *Nurses Nurturing Nurses: Outcomes and Lessons Learned*, the Nurses Nurturing Nurses mentorship program, which was developed in 2003 by the Academy of Medical-Surgical Nurses (AMSNA), examined the effect of a mentor-mentee program on job satisfaction, new nurse confidence, intent to stay, and satisfaction with both the mentor/mentee relationship with the program among new registered nurses. Over the course of five years, 18 hospitals across the country participated in the program. It was noted that new nurse confidence increased significantly during the first six months of the program, particularly between the initiation of the project and three months. While job satisfaction remained relatively stable during the 12 months, intent to stay peaked at 12 months, suggesting respondents were most likely to remain in their current positions. The results of the Nurses Nurturing Nurses program suggest that a formal mentorship program, with a firm commitment of support from the healthcare organization, may be effective in improving nurse retention (Grindel & Hagestrom, 2009).

Search Strategy

A systematic review of the literature using the electronic databases MEDLINE (EBSCO) and CINAHL was completed. The terms searched were nurse turnover, nurse retention, mentoring, and nurse mentors. It is important to note that a vast amount of information is available on orientation programs related to new graduate nurses; however, limited information is available that focuses on retention of experienced nurses. Due to this limitation, literature published from 2008 to 2017 was used for this project. English language and peer-reviewed/scholarly articles were the inclusion criteria used for the literature search and review. The research for this review concentrated on the issue of nurse turnover and retention of nurses

using mentorship programs. Based on initial review, 20 articles were reviewed and analyzed; however, only 11 studies were included in this review.

Critical Appraisal

Once the articles were obtained, they were evaluated based on the study purpose, sample characteristics, methods, study results, level of evidence, and study limitations. Systematic reviews, quantitative, and qualitative research were available to guide a systematic approach to critical appraisal of the evidence. A table of evidence is provided (Appendix A).

Synthesis

Based on the research conducted, common themes emerged: Nurse turnover, predictions of nurse turnover, job embeddedness, and mentorship programs. Based on the information obtained from the research and information of the local rural hospital, the three-month mentorship program was a good option for improving job satisfaction with nurses with one to three years of experience. In addition to satisfaction, it was projected that the organization may experience an increase in nurse retention and cost savings.

Conceptual Framework/Model

The model that was most effective for use with this proposed scholarly project was the Iowa Model, which clarifies the steps to put research into practice with the goal of improving the quality of patient care (Hall & Roussel, 2014). This step-by-step process, also referred to as an algorithm, can guide the novice evidence-based practitioner. Steps of this model include: selection of a topic, forming a team, evidence retrieval, grading the evidence, developing an evidence-based practice standard, implementing the practice, and evaluation (Doody & Doody,

2011). Use of the Iowa Model assisted the project leader with organizing the practice change and provided a step-by-step process on how to make the change for the organization (Brown, 2014).

Because the proposal included creating a three-month mentorship program at the local hospital, a team-approach was utilized. This project involved hospital administration, nurse educators, unit managers, and nurses. Due to the fact that it was sufficient evidence for the project, the next step was designing and piloting the practice change which included: engage patients and verify preferences, consider resources, constraints, and approval, develop localized protocol, create an evaluation plan, collect baseline data, develop an implementation plan, prepare clinicians and materials, promote adoption, and collect and report post-pilot data. Because the change has been piloted, the organization will now need to decide whether the change is appropriate for adoption in practice. If it is, the next step is to integrate and sustain the practice change. Once that has been completed, the results will need to be disseminated (Iowa Model Collaborative, 2017). This information was used/reprinted with permission from the University of Iowa Hospitals and Clinics, copyright 2015 (Appendix H). For permission to use or reproduce, please contact the University of Iowa Hospital and Clinics at 319-384-9098. Dissemination of research findings into practice is necessary to achieve a return on investment in our research initiative and to apply research findings to improve outcomes in healthcare (Brownson, Colditz, & Proctor, 2012).

Theoretical Framework

Benner introduced that in the acquisition and development of a skill, a nurse passes through stages or levels of proficiency: novice, advanced beginner, competent, proficient, and expert (Benner, 1984). When nurses take on new and unfamiliar roles, they begin at the novice stage as the beginner has no experience in the situations in which they are expected to perform.

Novice nurses are said to use rules and facts to guide their actions and they often lack confidence to demonstrate safe practice (Hnatiuk, 2012). “Mentors are a rich source of knowledge- they’ve been there, done that, and learned the critical pieces to perform successfully” (Hnatiuk, 2012, p. 44). Mentees can gain a tremendous amount from an effective mentoring relationship during this stage (Hnatiuk, 2012).

It is during stage two that knowledge is developing for the advanced beginner. While the nurse is efficient and skillful in parts of the practice area, he or she still requires occasional supportive cues. With stage three, competence is demonstrated by the nurse who has been on the job in the same or similar situations for two or three years. It is during this stage that the nurse is able to demonstrate efficiency, is coordinated, and has confidence in his or her actions. While competence is demonstrated in stage three, the nurse can still perceive situations as parts or aspects rather than “seeing the whole picture.” Mentors can continue to play a significant role in the mentee’s progression during the advanced beginner and competent stages (Hnatiuk, 2012).

Summary

To assist with the issue of the nursing shortage and nursing turnover, health care organizations must develop programs to retain high-quality nurses. In addition to focusing on orientation programs for new graduate nurses, mentor programs can be utilized to assist with experienced nurse retention by offering an opportunity to grow professionally and expand career opportunities. Mentorship programs have been found to improve RNs’ sense of belonging and increase job satisfaction while decreasing stress and anxiety. In addition to benefits for the mentee, the mentor can improve their leadership skills, professional relationships, and problem-solving skills (Schroyer, Zellers, & Abraham, 2016).

The purpose of this project was to implement a mentorship program for nurses with one to three years of experience at the local, rural hospital. After the three months, it was projected that the following would occur: increase in communication skills, increase in confidence, increase in competence, decrease in stress, and further development of interpersonal relationships and professional socialization. Based on these objectives, it was proposed that the nurse's satisfaction with their job/organization would increase, thus decreasing their desire to leave the organization.

SECTION THREE: METHODOLOGY

Design

The project design was an evidence-based practice project utilizing the Iowa Model for Evidence-Based Practice. According to the Iowa Model, a practice change is evaluated with a pilot study (Iowa Model Collaborative, 2017). The pilot study included the implementation of a mentorship program for registered nurses with one to three years of experience. These nurses were paired with a mentor for three months. Because the registered nurses' satisfaction and intent to remain on the job was measured before and after the mentorship program a quasi-experimental approach was used.

Measurable Outcomes

After completion of the three-month mentorship program, it was projected that the following would occur:

1. Job satisfaction will increase.
2. Registered nurse retention will improve or remain at the current rate.
3. Fewer registered nurses will express an intent to leave their current job.

Setting

The scholarly project was implemented at a small, rural hospital in a Mid-Atlantic state. Households in the surrounding community have an annual median income of approximately \$54,000. The organization has between 150 and 200 beds. It is committed to high-quality, patient-centered care as well as its employees. The organization employs approximately 220 registered nurses and 30 have been employed less than three years. The hospital system has a yearly registered nurse turnover rate of 14.9 percent,p and is currently attempting to improve its retention of registered nurses, both newly graduated and experienced.

Population

The population for this project included registered nurses with one to three years of experience currently employed at the rural hospital. Based on the information obtained from human resources and nursing administration, a purposive sample size of 20 registered nurses was set. Despite this goal, only six participants agreed to complete the mentorship program; of the six, only three completed informed consent and the pre-program survey. In addition to the mentees, the assistance of mentors was solicited. A total of six mentors agreed to participate. Mentors must have been employed at the facility for at least three years and must have either completed or be actively working on their baccalaureate in nursing degree. The project leader initially wanted to collect background information (age, level of education, etc). from the mentees and mentors; however, this was not approved by the institution's IRB.

So that participants could be recruited, a list of registered nurses with one to three years of overall nursing experience was given to the project leader from the healthcare organization's human resources department. The project leader e-mailed each possible participant. In addition,

the student posted flyers throughout the hospital, spoke with all nursing managers, and held information/orientation sessions.

Ethical Considerations

All participants signed two consent forms, the *Subject Consent Form, Eastern Virginia Medical School (EVMS) Institutional Review Board* and one created by the project leader which was approved by Liberty University's IRB. The information gathered using the Job Satisfaction Scale and Intent to Stay in the Job Survey was kept confidential. The results, via Survey Monkey, were protected by a username and password. All study records, including consent forms, were stored in a locked cabinet in the manager of patient care services' office. All data is stored on a password-locked computer.

To prepare for the project, the project leader completed training and received certification for the following Collaborative Institutional Training Initiative (CITI) courses: Biomedical Research and Social & Behavioral Research. Prior to beginning the mentorship program, the project was submitted and approved by Liberty University and the healthcare organization's Institutional Review Boards.

The mentorship program was designed using the Academy of Medical-Surgical Nurses (AMSN) Mentoring Program as a guide. Authorization to duplicate and personalize items from the AMSN handbooks for use was granted by the AMSN. This permission can be found on the AMSN website (Appendix E).

Data Collection

To assist with understanding satisfaction with the nurses' current job, two surveys were used: Job Satisfaction Scale (Appendix G) and Intent to Stay in the Job Survey (Appendix F). So

that the correlation between the mentorship program and job satisfaction could be understood, the same surveys were given to participants at the end of the three-month program. So that the results could be compared, each mentee was assigned a personal identification number. The mentee included this number on the pre-survey and post-survey. A link to complete the surveys via Survey Monkey were sent to the mentees via their work e-mail. Participants were asked to complete the surveys within two weeks.

Tools

The mentorship program was designed using the Academy of Medical-Surgical Nurses (AMSN) Mentoring Program as a guide. This program was developed by the AMSN in 2002 and has been used by hospitals and other agencies to: 1) Develop supportive and encouraging relationships, 2) Guide nurses in their professional, personal, and interpersonal growth, 3) Promote mutuality and sharing based on the needs of colleagues, and 4) Communicate information concerning expectations, learning opportunities, and stressors (Academy of Medical-Surgical Nurses, 2018). Authorization to duplicate and personalize items from the AMSN handbooks for use was granted by the AMSN. This permission (Appendix E) can be found on the AMSN website.

To assist with understanding satisfaction with the nurses' current job, two surveys were used: a 26-item Job Satisfaction Scale (Appendix G) and a 15-item Intent to Stay in the Job Survey (Appendix F). So that the correlation between the mentorship program and job satisfaction could be understood, the same surveys were given to participants at the end of the program and results were compared. Both the AMSN Job Satisfaction Scale and the AMSN Intent to Stay in the Job Survey are valid and reliable tools published in the literature (AMSN, 2018).

These tools were utilized in a peer-reviewed study, *Increasing Registered Nurse Retention Using Mentors in Critical Care Services*. This study was published in the 2016 *Health Care Manager* journal. Based on the results of this study, nurses with a mentor were retained at a 25 percent higher rate than those not mentored (Schroyer, Zellers, & Abraham, 2016). In addition, the AMSN sponsored a hospital-based formal mentorship program, Nurses Nurturing Nurses, to assist with retention of new graduate nurses, which is a noted challenge for acute care agencies. Over the course of five years, 18 hospitals or hospital systems participated in the project. The results of this program are discussed in the article, *Nurses Nurturing Nurses: Outcomes and Lessons Learned*, which was published in May/June 2009 *MEDSURG Nursing* (Grindel & Hagestrom, 2009).

Intervention

After approval was granted from the Institutional Review Boards, recruitment began. So that participants could be recruited, a list of registered nurses with one to three years of overall nursing experience was given to the project leader from the healthcare organization's human resources department. The project leader e-mailed each possible participant. In addition, the student posted flyers throughout the hospital, spoke with all nursing managers, and held information/orientation sessions. After the participants were identified, the mentors and mentees completed informed consent. After informed consent was obtained, each mentee completed the Job Satisfaction Scale (Appendix G) and the Intent to Stay in the Job Survey (Appendix F). A link to complete the surveys via Survey Monkey was sent to the mentees via their work e-mail. Participants were asked to complete the surveys within two weeks.

To participate in the program, participation in an orientation session was required. To accommodate various schedules, the project leader held multiple orientation sessions: six via

Web-Ex and three face-to-face. In addition, the sessions were recorded via Panopto. An outline of the orientation session is provided below:

- I. Issue of nursing shortage
- II. Introduction to mentoring
- III. Benefits of mentoring
 - a. Mentor
 - b. Mentee
- IV. Mentoring Program Plan
 - a. Tips for successful mentoring
 - b. Guidelines for meeting with your mentee/mentor
 - c. Contact information provided
- V. Questions

It was recommended that the mentor meet with the mentee during week one to exchange background and contact information, discuss/develop a program plan, and to establish a weekly or bi-weekly schedule of meetings. The site coordinator (project leader) regularly communicated with the mentors and mentees. Contact information of the site coordinator was given to all participants and they were encouraged to reach out with any questions or concerns. At the completion of the three months, data was once again collected from the mentees via SurveyMonkey, which included the Job Satisfaction Scale (Appendix G) and the Intent to Stay in the Job Survey (Appendix F). So that the correlation between the mentorship program and job satisfaction could be understood, these results were compared to the pre-program survey results.

Timeline

The following timeline was used used to guide the steps of project development and implementation:

- February 2018- Continue with project development
- March/April 2018-Develop mentorship program, apply for IRB approval
 - Approval will first be received through Liberty University

- May 2018- Once IRB approval is received, conduct orientation sessions and begin data collection (Mentorship program will begin)
 - Due to delays with both IRBs, the project did not begin until August
- End of July/beginning of August 2018-Completion of three-month mentorship program, collect and analyze data/findings
 - Due to delays with both IRBs, the project did not end until November

Feasibility Analysis

Resources necessary for this project included space and personnel. Since orientation was conducted via face-to-face instruction, a meeting room was needed. While the organization did not compensate the mentors and mentees for participation in the three-month program, the organization did offer to hold a luncheon to celebrate their completion of the program. Personnel was needed to conduct the mentorship program. This student, also the site coordinator, received assistance from the manager of patient care services to implement the mentorship program. In addition, human resources assisted the project leader with identifying potential participants based on the inclusion criteria.

Data Analysis

After completion of the three-month mentorship program, it was projected that the following would occur: 1) Job satisfaction will increase, 2) Registered nurse retention will improve or remain at the current rate, and 3) Fewer registered nurses will express intent to leave their current job. After the three months, data was once again collected from the mentees, which included the Job Satisfaction Scale (Appendix G) and the Intent to Stay in the Job Survey (Appendix F). So that the correlation between the mentorship program and job satisfaction could be understood, these results were compared to the pre-program survey results. A statistician was

consulted to ensure that the measurable outcomes, type of data collected, and statistical analysis were appropriate for the project.

Job Satisfaction and Intent to Stay.

To assist with understanding satisfaction with the nurses' current job, two surveys were used: a 26-item Job Satisfaction Scale and a 15-item Intent to Stay in the Job Survey. So that the correlation between the mentorship program and job satisfaction could be understood, the same surveys were given to participants at the end of the three-month mentorship program and results were compared. For the Job Satisfaction Scale, the ranges include one to five; one being insignificant, low, and poor and five representing significant, high, and good. For the Intent to Stay in the Job Survey, the ranges include one to seven; one being "disagree strongly" and seven being "agree strongly" (AMSN, 2012).

Per StatsTutor (n.d.), a paired samples t-test can only be used when the data is paired or matched; either these are before/after measurements of the same variable or the t-test can be used to compare how a group of subjects perform under two different test conditions. Per Loughborough University: Mathematics Learning Support Centre (n.d.), the paired t-test compares the mean difference of the values to zero; it depends on the mean difference, the variability of the differences and the number of data. A paired samples t-test will be used for this project.

SECTION FOUR: RESULTS

Based on the information obtained from human resources and nursing administration, a purposive sample size of 20 registered nurses was set. Despite this goal, only six participants agreed to complete the mentorship program; of the six, only three completed informed consent

and the pre-program survey. These three participants completed the three-month mentorship program; however, only one participant completed the post-program surveys. A total of six mentors originally consented to complete the program. Due to the drop of mentee participation, only three mentors were utilized throughout the three months.

Descriptive Statistics

The project leader initially wanted to collect demographic/background information (age, level of education, practice setting, etc.) from the mentees and mentors; however, this was not approved by the institution's IRB.

Job Satisfaction and Intent to Stay

Due to decreased participation and a low completion rate of the post-surveys, a paired samples t-test could not be used. For the participant who completed the post-program survey, no changes were evident from the pre-program survey results concerning job satisfaction and intent to stay. The participant stated on both surveys that he/she was satisfied with his/her current job and that he/she did not have thoughts of leaving.

Retention

Due to decreased participation, retention could not be calculated.

SECTION FIVE: DISCUSSION

Implication for Practice

To assist with the issue of the nursing shortage and nursing turnover, health care organizations must develop programs to retain high-quality nurses. In addition to focusing on

orientation programs for new graduate nurses, mentorship programs can be utilized to assist with experienced nurse retention. Mentorship programs have been found to improve RNs' sense of belonging and increase job satisfaction while decreasing stress and anxiety. Increasing RN retention can also create an environment of stability, foster teamwork, build confidence, increase patient satisfaction, and have a significant impact on cost savings for healthcare organizations (Schroyer, Zellers, & Abraham, 2016).

The mentorship program was designed using the *Academy of Medical-Surgical Nurses (AMSN) Mentoring Program* as a guide. The program is based on the philosophies of adult learning and is designed to meet the following objectives: develop supportive and encouraging relationships, guide nurses in their professional, personal, and interpersonal growth, promote mutuality and sharing based on the needs of colleagues, and communicate information concerning expectations, learning opportunities, and stressors (AMSN, 2012). Even though this program was created by the AMSN, the program can be utilized for any nursing specialty and is applicable for any nurse at any stage in his or her career.

A limitation of this evidence-based practice project is the lack of demographic/background information. To assist with proper pairing of the mentor and mentee, it would have been helpful to have information on: Degree(s) achieved, certifications, and practice setting. Another limitation of this project is the decreased number of participants. Additional research is needed to understand why nurses did not want to participate in the mentorship program. To assist future studies, the project leader could complete and send a survey to all identified possible participants that met the inclusion criteria to understand their reasoning for not participating. In addition, revisions could be made to the recruitment process. Recruiting the required number of participants is crucial to the success of research (Newinton & Metcalfe,

2014). Suggestions to improve recruitment include contacting potential participants via other means such as making telephone reminders and attempting to speak with each possible participant face-to-face (Newington & Metcalfe, 2014).

Sustainability

Because the program has been piloted, the organization will now need to decide whether the program is appropriate for adoption in practice. If it is, the next step is to integrate and sustain the practice change (Iowa Model Collaborative, 2017). The project leader has been told that the organization plans on integrating the mentorship program into their current nurse residency program. The nurse residency program occurs during a new graduate nurse's first year of practice. The organization has a thought of beginning the mentorship program at the six-month mark with the program lasting a total of six months.

Dissemination Plan

Dissemination of research findings into practice is necessary to improve outcomes in healthcare (Brownson, Colditz, & Proctor, 2012). Because the project leader has been told that the organization has a plan to integrate the mentorship program into its current nurse residency program, the project leader is open to assisting with program adoption. To assist with educating other organizations on the benefits of a mentorship program, the project leader plans on presenting via a poster at a conference in 2019. In addition, the project leader would like to publish the findings of this evidence-based practice project in a nursing journal.

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Appendix A

Evidence Table

Article Title, Author, etc. (Current APA Format)	Study Purpose	Sample (Characteristics of the Sample: Demographics, etc.)	Methods	Study Results	Level of Evidence (Use Melnyk Framework)	Study Limitations	Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.
Example, A. (2015) Title etc. per Current APA	To identify the need for technology to prevent falls	A convenience sample of 44 nurses in an acute care hospital	A non-experimental, descriptive survey	Findings indicate that fall rates decreased by 2% with the introduction of technology into the care setting	Level 6: descriptive design	Conducted in only one setting, small sample size	Does provide some good foundational information even though the level is a 6.
Article 1 Blake, N., Leach, L. S., Robbins, W.,	Examine effects of healthy work environment (communication,	415 RNs from ten pediatric intensive care units	Descriptive, cross-sectional,	Nursing leadership was found as the most important	Level 4, no randomization	Cross-sectional, descriptive design used	Yes; Leadership is an important factor in

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>Pike, N., & Needleman, J. (2013). Healthy work environments and staff nurse retention. <i>Nursing Administration Quarterly</i>, 37(4), 356-370.</p>	<p>collaboration, and leadership) on RN turnover</p>		<p>correlational design</p>	<p>factor related to RN turnover</p>		<p>(all subjects were female and Caucasian), only PICUs used in study</p>	<p>optimizing the work environment and increasing retention.</p>
<p>Article 2 Brinegar, T. M. (2017). <i>Retention of the experienced nurse</i>. ProQuest, LLC.</p>	<p>Identify retention strategies to use for experienced nurses approaching retirement age</p>	<p>N/A</p>	<p>N/A</p>	<p>Common theme among 16 chosen articles: Organizational and nursing leadership play an important role in nurse turnover and retention.</p>	<p>Level 5: Literature Review</p>	<p>Limited amount of studies (16) fit the topic criteria</p>	<p>No; while this project is important to understanding nurse retention with a nurse close to retirement age, it cannot be used for the purpose of my project</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>Article 3 Chen, C., & Lou, M. (2014). The effectiveness and application of mentorship programmes for recently registered nurses: A systematic review. <i>Journal of Nursing Management</i>, 22, 433-442.</p>	<p>Examine effectiveness and application of mentorship programs for recently hired registered nurses</p>	<p>N/A</p>	<p>N/A Systematic Review of experimental and quasi-experimental research studies</p>	<p>Mentorship programs are beneficial for mentors and new registered nurses</p>	<p>Level 5: Literature Review</p>	<p>Literature was obtained from the United States and Asian countries; European countries did not match the inclusion and exclusion criteria</p>	<p>Yes; Even though the literature review focuses on new registered nurses it highlights the implications for mentorship programs.</p>
<p>Article 4 D'Ambra, A. M., & Andrews, D. R. (2014). Incivility, retention and new graduate nurses: An</p>	<p>Evaluate influence on incivility on new graduate nurse transition experience (within first two years of employment)</p>	<p>N/A</p>	<p>N/A Literature Review</p>	<p>Little evidence to prove that the culture of incivility has been addressed with new graduate nurses</p>	<p>Level 5: Literature Review</p>	<p>N/A (not discussed)</p>	<p>No; While this cannot be used, it does highlight the need to evaluate incivility towards nurse graduate</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>integrated review of the literature. <i>Journal of Nursing Management</i>, 22, 735-742.</p>							<p>nurses as it could contribute to nurse turnover</p>
<p>Article 5 Dotson, M. J., & Dave, D. S. (2014). An empirical analysis of nurse retention. <i>The Journal of Nursing Administration</i>, 44(2), 111-116.</p>	<p>Identify factors that influence RN job satisfaction, intentions to leave a current job, and intentions to leave the nursing profession.</p>	<p>861 RNs in southeastern United States</p>	<p>Non-experimental, descriptive survey</p>	<p>Findings indicate that job retaining nurses is related to job satisfaction, reduction of stress, and value congruence. Stress has the strongest effect on behavioral intentions to leave a job.</p>	<p>Level 4 -no randomization</p>	<p>Measure of altruism was new and needs refining which was evidenced by the analysis, sample does not represent national nursing demographics , number of hospitals involved was not discussed</p>	<p>Yes; Important factors involved in keeping nurses in their jobs include job satisfaction, reduction of stress, and value congruence.</p>
<p>Article 6</p>	<p>Explore factors that influence a</p>	<p>N/A</p>	<p>N/A</p>	<p>Findings suggest that the decision</p>	<p>Level 5: Comprehensive</p>	<p>N/A</p>	<p>No; although the study does</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>Dotson, M. J., Dave, D. S., & Cazier, J. A. (2013). Nurse retention in rural United States: A cluster analytic approach. <i>International Journal of Healthcare Management</i>, 6(3), 184-191.</p>	<p>nurse’s choice to continue working in a rural area as compared to commuting to urban areas</p>		<p>Comprehensive literature review</p>	<p>to continue working in a rural area is dependent on the altruistic nature of the nurse and job, job satisfaction, stress, and value congruence.</p>	<p>e literature review</p>		<p>highlight stress as a factor in nurse retention.</p>
<p>Article 7 Flinkman, M., Salantera, S. (2015). Early career experiences and perceptions-a qualitative exploration of the turnover of</p>	<p>Describe why young registered nurses had previously left hospital organization/why they intend to leave the profession</p>	<p>15 registered nurses (all under the age of 30)</p>	<p>Qualitative; Use of interviews</p>	<p>Three themes emerged: poor nursing practice environments, lack of support, and orientation and mentoring</p>	<p>Level 6: Single qualitative study</p>	<p>Small sample size, different amount of professional experience</p>	<p>Yes; even though the study was conducted in Finland it highlights the need for social support and adequate orientation</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>young registered nurses and intention to leave the nursing professional in Finland. <i>Journal of Nursing Management</i>, 23, 1050-1057.</p>							<p>and mentoring programs</p>
<p>Article 8 Halfer, D. (2011). Job embeddedness factors and retention of nurses with 1 to 3 years of experience. <i>The Journal of Continuing Education in Nursing</i>,</p>	<p>Identify factors that can assist with retention of nurses with 1-3 years of experience</p>	<p>191 nurses with 1-3 years of nursing experience</p>	<p>Descriptive study, questionnaires and Likert scale used, after one year, data was compared for those nurses who stayed versus data from the nurses who</p>	<p>Highest ranked career development strategy among the nurses was certifications and continuing education</p>	<p>Level 4: 191 graduates of the pediatric RN internship program, no randomization</p>	<p>Conducted in one setting with one cohort</p>	<p>Yes; Study concludes that mentoring activities, supporting continuing education and certification achievement, and offering funding support for education is</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>42(10), 468-476.</p>			<p>left the organization</p>				<p>beneficial for retaining this group of nurses. *Limited data is available on support for the early years of a nurses’s career, aside from new graduate nurses</p>
<p>Article 9 Han, K., Trinkoff, A. M., & Gurses, A. P. (2015). Work-related factors, job satisfaction and intent to leave the current job among United States nurses.</p>	<p>Examine relationships of work-related factors to nurse’s job satisfaction and intent to leave their current position</p>	<p>1641 actively working bedside nurses in two US states</p>	<p>Cross-sectional secondary data analysis</p>	<p>Nurses who were dissatisfied reported higher psychological demands, lower autonomy, and lack of support from peers and supervisors.</p>	<p>Level 3- Controlled trial (no randomization)</p>	<p>Cross-sectional, nurses’ reports can be biased due to recall or denial, secondary data analysis</p>	<p>Yes; study includes a discussion of numerous working conditions that contribute to nurse turnover.</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p><i>Journal of Clinical Nursing, 24, 3224-3232.</i></p>							
<p>Article 10 Hayward, D., Bungay, V., Wolff, A. C., & MacDonald, V. (2016). A qualitative study of experienced nurses' voluntary turnover: Learning from their perspectives. <i>Journal of Clinical Nursing, 25, 1336-1345.</i></p>	<p>Examine factors that contribute to turnover of experienced nurses in acute care setting</p>	<p>12 registered nurses with an average of 16 years in practice</p>	<p>Qualitative, descriptive approach (interviews)</p>	<p>Decisions to leave included: higher patient acuity, increased workload demands, ineffective working relationships, gaps in leadership support and negative impacts on nurse's health and well-being</p>	<p>Level 6: Single qualitative study</p>	<p>Study was conducted in one region, small number of participants</p>	<p>Yes; study assists with understanding reasons for nurse turnover</p>
<p>Article 11</p>	<p>Identify effects of nurse staffing</p>	<p>Discusses previous</p>	<p>N/A</p>	<p>N/A</p>	<p>Level 7 (although</p>	<p>N/A</p>	<p>No; however, it is discussed</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>Knudson, L. (2013). Nurse staffing levels linked to patient outcomes, nurse retention. <i>AORN Connections</i>, 97(1), 1-9.</p>	<p>levels on patient outcomes and nurse retention</p>	<p>research studies but actual research was not conducted</p>			<p>some studies were discussed, they were not analyzed).</p>		<p>that leadership should take responsibility to monitor nurses' workloads and establish a healthy workplace culture to improve nurse retention and patient outcomes.</p>
<p>Article 12 Kurnat-Thoma, E., Ganger, M., Peterson, K., Channell, L. (2017). Reducing annual hospital and registered nurse staff</p>	<p>Analyze program performance improvement initiative to reduce staff turnover</p>	<p>N/A</p>	<p>N/A Hospital turnover was assessed before the intervention and after</p>	<p>Overall hospital turnover decreased from 18.2 percent to 11.9 and new hire turnover losses decreased from 39.1 to 18.4 as a result of the tenement</p>	<p>Level 3: Controlled trial</p>	<p>Decreased validity with exit interviews and surveys-employees do not want to share negative information</p>	<p>Yes; Even though this study focuses on the new hire orientation process and new graduate retention, it does discuss</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>turnover-A 10-element onboarding program intervention. <i>SAGE Open Nursing</i>, 3, 1-13.</p>				<p>orientation initiative</p>		<p>for leaving, recommended using neutral party to conduct exit interviews</p>	<p>the use of a "Buddy System."</p>
<p>Article 13 Lartey, S., Cummings, G., & Profetto-McGrath, J. (2014). Interventions that promote retention of experienced registered nurses in health care settings: A systematic review. <i>Journal of Nursing</i></p>	<p>Identify effectiveness of strategies for retaining registered nurses</p>	<p>N/A</p>	<p>N/A</p>	<p>Team work and individually targeted strategies including mentoring, leadership interest, and in-depth orientation increased job satisfaction and produced higher retention results.</p>	<p>Level 5: Literature Review (12 studies)</p>	<p>Few published studies have examined interventions that promote retention of experienced nurses</p>	<p>Yes; study assists with understanding reasons for turnover of experienced nurses</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p><i>Management, 22, 1027-1041.</i></p>							
<p>Article 14 Mills, J., Chamberlain-Salan, J., Harrison, H., Yates, K., & O’Shea, A. (2016). Retaining early career registered nurses: A case study. <i>BMC Nursing, 15</i>(57), 1-6.</p>	<p>Describe and explain experiences of early career registered nurses (< 5 years of experience) and to identify strategies that would support retention.</p>	<p>35 early career registered nurses</p>	<p>Single case study design</p>	<p>Six themes emerged to assist with retention: Well-planned, supported and structured transition periods, consideration of rotation, empowering decision making, placement opportunities and choice in decisions of where to work, career advice and support, and encouragement to reflect on career choices.</p>	<p>Level 4: Case study, no randomization</p>	<p>Small sample size, conducted in Australia</p>	<p>No; however, the research does highlight the need of understanding the factors that influence nurses’ decisions to leave or remain within the organization.</p>

<p>Article Title, Author, etc. (Current APA Format)</p>	<p>Study Purpose</p>	<p>Sample (Characteristics of the Sample: Demographics, etc.)</p>	<p>Methods</p>	<p>Study Results</p>	<p>Level of Evidence (Use Melnyk Framework)</p>	<p>Study Limitations</p>	<p>Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.</p>
<p>Article 15 Park, S. H., Gass, S., & Boyle, D. K. (2016). Comparison of reasons for nurse turnover in Magnet and non-Magnet hospitals. <i>The Journal of Nursing Administration</i>, 46(5), 284-290.</p>	<p>Compare rates and reasons for registered nurse turnover by Magnet status</p>	<p>N/A</p>	<p>Descriptive, correlational study</p>	<p>Registered nurse turnover due to environment-related reasons was higher on units in Non-Magnet hospitals than Magnet hospitals (4.684 times higher turnover rates due to staffing/workload)</p>	<p>Level 5: Review of quality indicator literature (NDNQI)</p>	<p>Convenience sample as NDNQI hospitals join the database voluntarily (not representative of all hospitals and unit types)</p>	<p>No; however, the study does address the issue of nurse turnover.</p>
<p>Article 16 Reitz, O. E. (2014). Job embeddedness : A concept analysis. <i>Nursing Forum</i>, 49(3), 159-166.</p>	<p>Examine concept of job embeddedness and the implications for nurse retention</p>	<p>Discusses previous research studies but actual research was not conducted</p>	<p>N/A Job Embeddedness Survey was discussed as it was used in other research studies</p>	<p>N/A When job embeddedness is applied to nurse retention programs, retention can improve.</p>	<p>Level 5: Systematic Review of Studies</p>	<p>N/A</p>	<p>Yes; Concept of job embeddedness (fit, links, and sacrifice) needs to be reviewed as it plays a factor in nurse retention.</p>

Article Title, Author, etc. (Current APA Format)	Study Purpose	Sample (Characteristics of the Sample: Demographics, etc.)	Methods	Study Results	Level of Evidence (Use Melnyk Framework)	Study Limitations	Would Use as Evidence to Support a Change? (Yes or No) Provide Rationale.
Article 17 Schroyer, C. C., Zellers, R., & Abraham, S. (2016). Increasing Registered Nurse retention using mentors in critical care services. <i>The Health Care Manager</i> , 35(3), 251-265.	Examine nurse retention with use of a mentorship program	70 newly hired RNs, divided into two equal groups: mentored and non-mentored	Quasi-experimental, descriptive, quantitative research method	Nurses with a mentor were retained at a 25 percent higher rate than those not mentored	Level III: Controlled, no randomization	Limited to quantitative data, decrease return to satisfaction surveys, opposite shifts of mentors and mentees	Yes; study proves that a mentorship program can assist with nurse retention.

Appendix B

LIBERTY UNIVERSITY.
INSTITUTIONAL REVIEW BOARD

June 1, 2018

Krystle Forlines
IRB Approval 3273.060118: Increasing Registered Nurse Retention Using a Mentorship Program

Dear Krystle Forlines,

We are pleased to inform you that your study has been approved by the Liberty University IRB. This approval is extended to you for one year from the date provided above with your protocol number. If data collection proceeds past one year, or if you make changes in the methodology as it pertains to human subjects, you must submit an appropriate update form to the IRB. The forms for these cases were attached to your approval email.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,



Administrative Chair of Institutional Research
The Graduate School

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Appendix C



Appendix D

[REDACTED]

Dr. Sharon Kopis, Ed.D, MS, RN, FNP-C, CNE
Chair, Doctoral Studies, Professor, Nursing
Liberty University

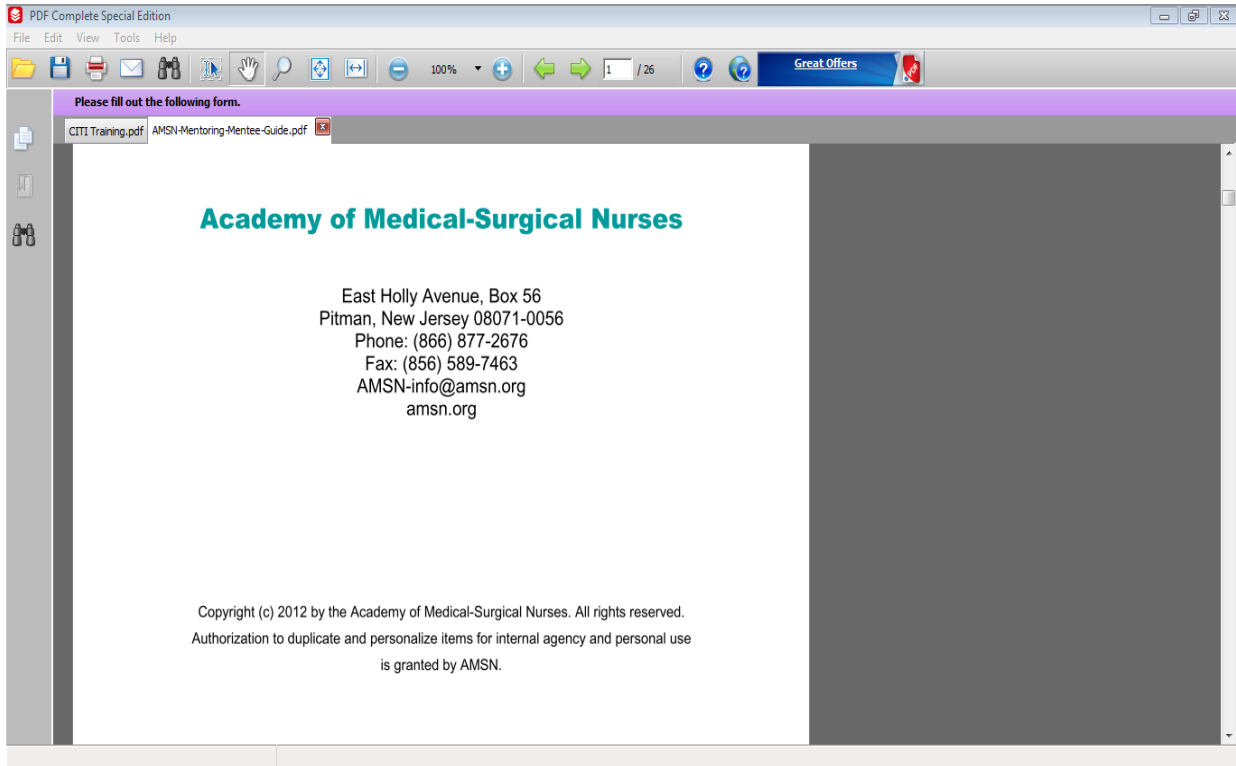
Dear Dr. Kopis:

I am currently the [REDACTED] and have direct reports in nursing and administrative responsibilities that include patient care departments. I report directly to the Vice President of Patient Care Services/Chief Nurse Executive for the [REDACTED] division. In this role I have the authority to approve, coordinate, and supervise the DNP student project. I can assure you that [REDACTED] and I are in full support of Krystle Forlines in her EBP project using the Iowa model. I have met with Krystle and feel that the topic of Nurse Retention is a valuable area to research. The retention of experienced nurses in the workforce will assist in the improvements of the quality of patient care and reduce the current critical nursing shortage in Virginia. [REDACTED] will assist Krystle with access to quality data, metrics and resources to support this project. We look forward to working with Krystle and with Liberty University on this venture which supports our mission of always improving the quality and access to healthcare in our community.

If I can be of any further assistance or if you need more information in regards to our support of this scholarly project, please do not hesitate to contact me at [REDACTED]

[REDACTED]

Appendix E



Appendix F

Intent to Stay in the Job Survey

The survey was removed to comply with copyright. The survey can be accessed online through the Academy of Medical-Surgical Nurses website, <https://www.amsn.org/professional-development/mentoring>.

Appendix G

Job Satisfaction Scale

The survey was removed to comply with copyright. The survey can be accessed online through the Academy of Medical-Surgical Nurses website, <https://www.amsn.org/professional-development/mentoring>.

Appendix H

Today, 10:09 AM
Forlines, Krystle Lynette
Inbox

Action Items

You have permission, as requested today, to review and/or reproduce *The Iowa Model Revised: Evidence-Based Practice to Promote Excellence in Health Care*. Click the link below to open.

[The Iowa Model Revised: Evidence-Based Practice to Promote Excellence in Health Care](#)

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