Unleashing Empowerment: The Key to NPD Practitioner Retention in Healthcare

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Introduction

Amid the COVID-19 crisis, Nurse Professional Development (NPD) practitioners demonstrated dedication and adaptability, yet their value went unrecognized. They were tasked with heavy workloads due to rapid staff turnover and competing demands. Many frontline nursing staff were either leaving their full-time roles for lucrative contract agency jobs and/or leaving the profession entirely (Weiss et al., 2020). As a result of staff turnover, this led to increased pressures from executive leadership to onboard and orient newly hired staff more frequently in efforts to abate unit/department closures (Kelly et al., 2021).

As NPD practitioners persevered without recognition, a pressing question emerged: Is their commitment to an organization influenced by their perception of empowerment? To date, no studies have been found that explored key factors that predict intent to stay in the NPD practitioner population pre- or post-pandemic. Thereby, to address this gap in knowledge, this study sought to examine the relationship between NPD practitioners' perception of workplace empowerment and their intent to stay post COVID-19 pandemic.

Purpose

The purpose of this study was to explore the relationship, if any, between NPD practitioners' perception of workplace empowerment and their intent to stay in the acute care hospital setting.

Research Aims

Influence of **structural empowerment** as a composite construct on **intent to stay** among NPD practitioners in the acute care hospital setting
- *Null Hypothesis*: NPD practitioners' perception of overall empowerment does not predict their intent to stay in the workplace

To what extent, if any, does each empowerment subscale (i.e., *opportunity, information, resources, support, formal power, and informal power*) influence **intent to stay** when placed in one model?
- *Null Hypothesis*: NPD practitioners' perception of overall empowerment does not predict their intent to stay in the workplace

Methods

Study design: A cross-sectional, descriptive, and correlational design was employed.

Sample size: 313 NPD practitioners from acute care hospitals across the United States.

Statistical Approach: Linear regression analyses

Instruments:
To measure the concept empowerment (Kanter, 1993; Laschinger et al., 2001), the **Conditions for Work Effectiveness, CWEQ-II** was used, this tool consists of 19 items, with 6 subscales, and total scores ranging from 6-30. Higher scores represented higher perceptions of empowerment. Cronbach alpha's have been reported to be between .67 & .84, however, in this study, the Cronbach alpha was .90.

To measure intent to stay (Kim et al., 1996), the **Intent to Stay (ITS)** questionnaire was used. There are no subscales and scores can range from 6 to 30. Reverse scoring was used for the negative scoring items. Individual scores were summed, with higher scores indicating higher intent to stay with current job or organization. Cronbach alphas for the ITS scale have consistently been reported between 0.84 – 0.90, however, in this study, Cronbach's alpha for the ITS questionnaire was .92.

Key Findings
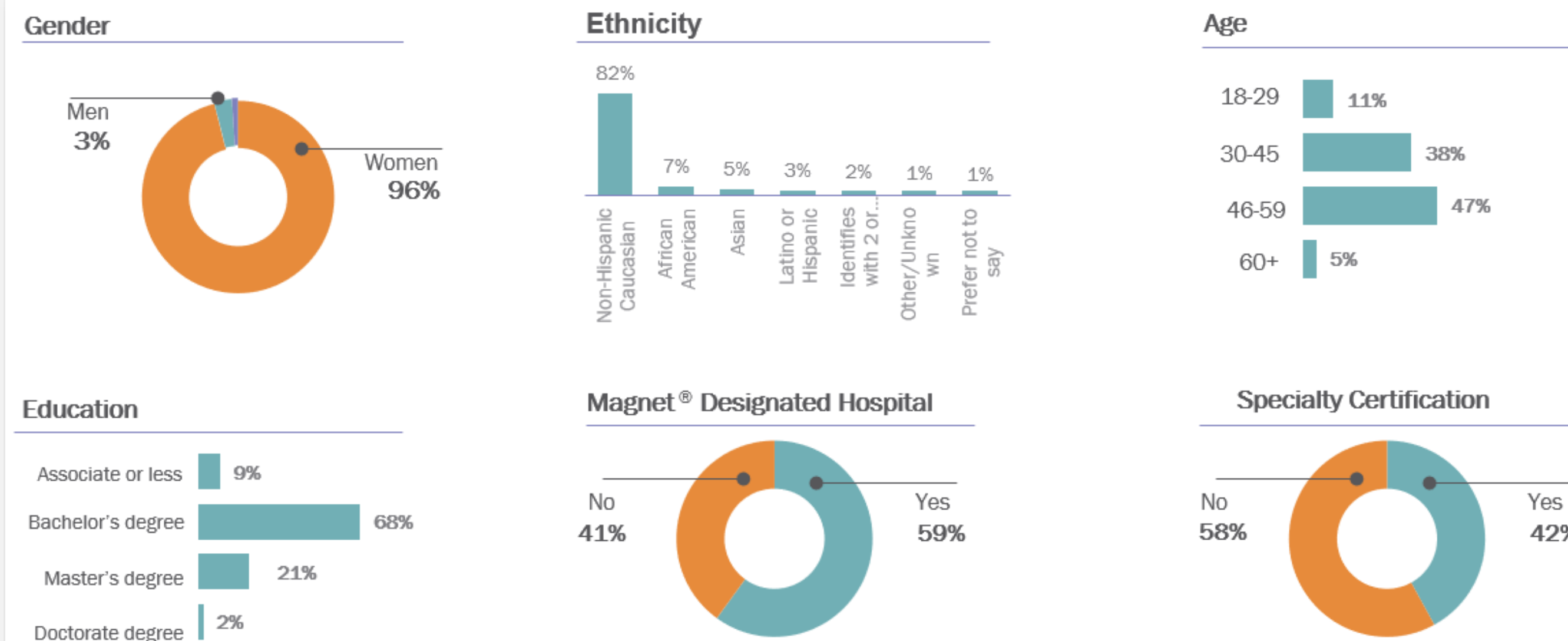
Descriptive Statistics of Study Variables (n = 313)

Scale Variables	M	SD	Min - Max
Empowerment	20.75	3.32	12.25 - 28.25
Opportunity subscale	3.99	.721	2.00 – 5.05
Information subscale	3.64	.897	1.00 – 5.00
Support subscale	3.20	.872	1.00 – 5.00
Resources subscale	3.08	.873	1.00 – 5.00
Formal Power (JAS)	3.41	.756	1.33 – 5.00
Informal Power (ORS)	3.40	.753	1.25 – 5.00
Intent to stay (ITS)	21.64	5.71	6.00 – 30.00

Research Question 1

Does perception of empowerment (X1) as a composite construct in the workplace predict intent to stay (Y) among NPD practitioners in the acute care hospital setting?

NPD practitioners' perception of empowerment in the workplace significantly predicted their intent to stay in their current workplace (β =.32, p = .001, and R2 was .10).

Research Question 2

To what extent, if any, does each empowerment subscale, i.e., opportunity (X2), information (X3), resources (X4), support (X5), formal power (X6), and informal power (X7) relate to intent to stay (Y) when placed in one model?

NPD practitioners
- formal power (β = .150, p = .043)
- access to opportunity (β =.149, p = .015)
- access to resources (β =.122, p =.054)

Discussion

First to explore the relationship between workplace empowerment and intent to stay among NPD practitioners

- Workplace empowerment significantly predicted intent to stay
  - Empowerment accounted for 10% of the variance in intent to stay
  - *Formal power* and *access to opportunity* had the most influence on NPD practitioners intent to stay with an organization.

- NPD practitioners perceived the workplace as moderately empowering
  - Reported higher levels of workplace empowerment compared to college educators and staff nurses.

Conclusion

In the post-pandemic landscape and amidst the current nursing shortage, a study examining NPD practitioners' perception of empowerment in the workplace and their intent to remain with the organization is highly relevant and timely. This study can provide valuable insights into the factors that contribute to the retention of NPD practitioners, who play a crucial role in supporting and developing the nursing workforce. If NPD practitioners perceive high levels of empowerment in the workplace, this may positively impact their job satisfaction, motivation, and commitment to the organization. This, in turn, can contribute to their intent to remain with the organization, which is particularly important in the current nursing shortage.

The current study provided nurse leaders with practical strategies to promote empowerment, such as providing opportunities for professional growth, involving NPD practitioners in decision-making processes, and recognizing their contributions. Ultimately, the findings of this study can inform organizational policies and practices aimed at retaining NPD practitioners, which is crucial for addressing the nursing shortage and ensuring the availability of a skilled and experienced workforce in the post-pandemic healthcare landscape.

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