

RN workforce study looks at factors which influence retention of newly licensed nurses within hospitals

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Some factors influencing low unit-level turnover: first professional degree was a baccalaureate or higher, greater variety and autonomy, and better perceived RN-MD relations.

"About 80% of newly licensed [nurses](#) find their first work in hospitals," says New York University Rory Meyers College of Nursing (NYU Meyers) Professor Christine T. Kovner, PhD, RN, FAAN. "Turnovers are one of the costliest expenditures in our profession. In fact, costs are estimated at \$62,000 to \$67,000 per departure, amounting to \$1.4 to 2.1 billion in expenses for new nurses who leave their first jobs within three years of starting."

Prior research on newly licensed nurses tended to focus on organizational turnover, where a nurse leaves the hospital or organization. However, there is scant literature on internal or unit-level turnover, which occurs when a nurse leaves their current assignment to take up new roles or positions within the organization or hospital.

Recently, Dr. Kovner led a team of researchers at NYU Meyers and the School of Nursing at SUNY Buffalo in conducting a study to fill in the gaps. Published in the *International Journal of Nursing Studies*, the study of a nationally representative sample of new nurses working in hospitals, sought to better inform unit-level retention strategies by pinpointing factors associated with job retention among newly licensed nurses.

"The internal turnover rate for the one year between the two waves of the survey was nearly 30%," said Dr. Kovner. "This turnover is in addition to those leaving the organization. This figure is substantially larger than previously reported in other studies, which estimated a 13% one-year internal turnover rate among new nurses."

The researchers looked to bolster the existing evidence on internal turnover to determine precursors to remaining on the same title and unit-type from the first to the second year of employment.

The nurses (n=1,569) were classified into four categories based their unit and title retention. 1090 nurses (69.5%) remained in the same title and unit-type at wave two, while 129 (8.2%) saw a change in title, but not in unit-type. A similarly small group of 185 (11.8%) had no change in title, but changed unit-types, while 165 (10.5%) had a change in their title and unit-type.

In addition to collecting the new nurses' demographical data, Dr. Kovner and her team assessed their perceptions of their work environment in both surveys.

"In doing this we were able to examine the changes in work environment perceptions over time between nurses who remained in the same unit and title to those who changed unit and/or title," said Dr. Kovner.

Upon analysis, the researchers found five factors most strongly associated with retention: holding more than one job for pay (negative), first professional degree was a baccalaureate or higher, negative affectivity, greater variety and [autonomy](#), and better perceived RN-MD relations, all positively related.

"Our results point to the variables on which managers can focus to improve unit-level retention of new nurses," said Kovner.

Provided by New York University

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