Interprofessional organizational and System leadership

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Nursing administration should focus more on retention because it's not uncommon to have thoughts of leaving the profession by a Nurse. Nurses are short-staffed, work long hours, and are paid less when compared to the work they do daily. Two competing needs impacting the Nursing shortage are Nurses burnout and the Aging Nursing workforce.

Burnout can be feeling of no or low energy, decreased professional efficiency, and more mental distance from one’s job (Gardiner et al., 2022) leading to turnover, moral distress, and no job satisfaction. Burnout can be seen among all nurses, but the majority is seen in novice nurses. Most nurses describe the first few years as challenging and stressful; many also consider leaving the profession. First six months of their nursing career, 30% of nurses experience bullying, Burnout, and workplace incivility which is associated with the poor mental and overall health of novice nurses. (Gardiner et al., 2022) therefore, the well-being of novice nurses plays an important role in nurse retention as well as patient satisfaction and outcomes. Formal as well as informal approaches from both individuals and organizations to support nurse transition and assist in practice fulfillment are key to a smooth integration into professional nursing roles and guarantee ongoing retention.

The national shortage of the Nursing workforce has been exacerbated by the aging workforce. Older Nurses are leaving the workforce for various reasons such as financial reasons, they tend to retire early if they think that they have reached financial security for their retirement. Health concerns and family situations are the other reason they are retiring early. They must take care of their sick children or sick relative. Older nurses are vulnerable to the physical as well as mental demands of Nursing because Nursing is not easy physically and mentally and once you are old it will show on you. Rapid changes in technology also impact older nurses practice competence on top of heavy workloads and less physical and mental stamina. All this led to early retirement and not wanting to work part-time or perdiem after retirement.

**Policies in my organization that influence Nursing Shortage**

My organizational policy is to hire more travel nurses who normally have a contract of 13 weeks. last month a lot of Nurses from my unit left and they hire a total of 10 travel Nurses who will stay with us only for 13 weeks, if they want to continue working with us they can renew the contract and no matter how many times they renew the contract the maximum time they can work with us is six months. My organization is doing this to save costs and spend less on Nurses (resources) because they don’t have to provide benefits to the travel nurses. I and my other full-time coworkers are fully aware that they get more than double the pay we get doing the same work, and sometimes we are doing more than them, we get the sickest patient because Travel nurses can't take care of certain patients. It's common for full-time Nurses to feel that they are not valued and not appreciated, therefore full-time nurses don’t hesitate to look for better jobs somewhere else. This policy has been adding to more Nursing shortages in my organization. I completely agree with Kelly and Porr, that current healthcare pushes toward a business model approach to healthcare because it's not about patient experience but about how to make more money by using limited resources.

**Ethical Critique**

Milliken asserts it is vital that nurses should recognize and address ethical issues when they arise. One way to empower nurses so that they can act as moral agents and provide patients with safe and ethical care is by developing ethical awareness. To call a nursing action to be ethical its aim should be to promote nursing goals according to patient wishes.

The four main principles of ethics are autonomy, beneficence, justice, and non-maleficence. (Haddad & Geiger, 2022) In other words, no harm should be done to the patient, it must be only good and, in an organization, where the number of nurses is low, they can’t provide quality care, there is a high risk of harming the patient, high chance of making errors because the nurse is trying to do multiple tasks at a time. Nurses are overwhelmed because of so many tasks they must do, which will affect patients and nurse themselves. There is an ethical violation because of no justice to the patient and nurses.

The strength of this policy in promoting ethics would be the new nurses will follow the rules and practice standards and won't take shortcuts when providing care to the patients as they know that their work ethics is being observed and they are getting paid way more than full-time nurses. The weakness is that it may not be beneficial for the full-time nurses because they will be overworked mainly after the Travel Nurses complete their contract. This automatically harms the patient because of the low-quality care they will get due to short staffing. I work in a Critical care unit and yesterday I started my shift with a critically ill patient, I was busy with the patient for half of the shift and then the patient started declining more and end up coding, it was a long code, code was successful, and I transferred the patient to another ICU. I returned to my unit after transferring the patient thinking I will complete my charting and take a mental break for a few minutes. Before all that happened, my charge nurse came to me and said that I am getting another patient who got TPA and is bleeding from everywhere, he is declining, and I have to rush to that room now because we don’t have nurses to take that patient. For the first time in my Nursing career, I was teary in the unit, but I control myself and went to see my other patient who was in bad shape, the rest of my shift was very busy, with no help from nurses and charge because everyone was busy. I thought the patient would have gotten better care if we were adequately staffed but I tried my best. I stayed on the unit late, had no break, and had to stay late to complete my task for the previously coded patient and the new patient. I was affected physically, mentally, and psychologically. This is unethical because nurses and patients’ needs are crucial just like other healthcare members.

**Recommended policy**

I think the organization should focus more on retention than hiring contracts or Travel Nurses.

Novice nurses first impression is made by their preceptors who are usually more experienced and seasoned nurses. They influence the integration of nurses in the initial period, burnout preceptors may transfer negative energy to the orienting nurse, therefore policies should be made for preceptors to receive adequate training and evidence-based preparation to educate and guide new nurses. Along with this, time management, critical thinking skills, and constructive feedback provision should be considered important parts of preceptor’s training.

To prevent burnout among Novice nurses, residency programs for new graduates can improve safety practices, improve satisfaction, and decrease turnover in new nurses. American nurses association also fully supports this program and there is also evidence that nurse residency programs play a crucial role in successful transition to practice, retention, and satisfaction.

(Gardiner et al., 2022)

organization can implement several policies to retain old nurses such as the practice environment to be ergonomically designed to save physical energy and prevent injuries. Human resources to be more flexible in allowing phased-in retirement plans, schedules can be made flexible depending upon the need of nurses. Many Nurses will be willing to work part-time even after retirement if the organization assists them, In a survey of 1553 retired nurses 78% were willing to work part-time (Uthaman et al.)

Nurse leaders and human resources must also be familiar with the factors associated with early retirement so that they can develop and implement strategies for nurses so that many nurses want to work before 65.

Nursing shortage is everywhere, it’s been a global problem now. According to journals.com, by 2030, 13 million more nurses are needed. Therefore, Strategies to deal with the shortage have to be implemented and that can be dealing with the bad policies, creating new policies that can help retain nurses and ethical considerations should be kept in mind when creating new policies.

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