

Staying Power?

Retaining mature RNs in the workforce.

It's an obvious fact: the nation's nursing workforce is aging. Less obvious is what needs to be done to retain RNs in the workplace as they move through their 40s and into their 50s and 60s.

The Center for American Nurses, an independent affiliate of the ANA, is working with state-based nurses' associations and other groups to address the concern and, hopefully, to prevent massive nursing shortages nationwide, through a comprehensive program called the "Mature Nurses Initiative." The center's leaders recently have created activities around this issue, from holding a national forum to discuss the workplace climate surrounding "mature" nurses to administering grants to state associations to address retention strategies.

The timing of these efforts cannot be more ripe. The oldest members of the baby boom generation are turning 60 this year. And there are a lot of nurses who are baby boomers.

Lynn Wieck, PhD, RN, FAAN, a nationally known expert on RN recruitment and retention, is part of the post-World War II boom. She says that for many of her cohorts, self-perception is tied to work identity.

"This generation did not enter the workforce in the traditional way, nor will they leave the workforce the traditional way," says Wieck, a Texas Nurses Association member. "Most senior nurses don't want to work in a flower shop. They

want to continue working as nurses. But many know they can't keep doing what they've been doing, like working 12-hour shifts."

Wieck and other nurses examining the mature nurse workforce say that the workplace must be made more attractive—with more flexibility—so nurses won't want to retire early. And retention is crucial, she adds, because there also are a lot of baby boomers who'll eventually need more health care services, thereby further increasing the demand for nurses.

BY THE NUMBERS

A federal survey conducted every four years found that the 2004 RN workforce continued a trend toward an aging RN population. In that survey, the average age of RNs was nearing 47 years, and about a quarter of all nurses were estimated to be older than 54.

The average ages of nursing faculty in baccalaureate and graduate programs, who are crucial to a continuing supply of nurses, ran even higher, according to a recent report by the American Association of Colleges of Nursing. The average ages of faculty with doctoral degrees were 57.3 for full professors, 55 for associate professors, and 51 for assistant professors.

To better understand the needs of mature nurses, a survey was conducted through the ANA's Web site in 2003. More than 3,300 nurses nationwide responded. An initial look at the responses revealed that nurses had concerns ranging from those directly related to the workplace, such as inflexible work arrangements, to personal ones, such as

inadequate financial planning.

Last summer, the center's leaders cast their information-gathering net even wider when they hosted a groundbreaking conference, "Workplace of the Future: Spotlight on the Mature Nursing Workforce," in conjunction with the AARP. Seventy-three stakeholders, including nurse and other hospital administrators, nurse educators, and researchers, provided their perspective on mature nurses' concerns and retention strategies. One of the major issues identified at that meeting—and which echoed the online survey findings—was the lack of financial literacy among mature nurses, according to Vernell DeWitty, MSN, MBA, RN, program director for the center.

According to a postconference report issued by the center, many nurses say they are thinking about retiring, but almost 60% report that they've done nothing to prepare for it financially. Nurses also disclosed that they don't have the skills to make sound financial decisions regarding retirement planning.

To help nurses become better informed, DeWitty says, center leaders are working with a certified financial planner to develop an online learning module. Another solution recommended by conference participants involves creating workplace education programs in which smaller groups of nurses are trained and then share their expertise with their colleagues.

Another issue that emerged from the conference involves the "brain drain" that most likely will occur as large numbers of mature nurses leave the

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workforce in the next five to 15 years. The report notes that “losing human knowledge” can seriously affect an organization’s performance regarding patient care. Stakeholders recommended several solutions, including conducting research to determine the effect of such a loss on different aspects of health care, such as patient safety. Another solution involves redesigning roles for mature nurses, to keep their knowledge in house by having them work on rapid response teams and as mentors.

The recommendations reached at the center’s conference were forwarded to the White House’s Conference on Aging, which is responsible for making recommendations for a national aging policy.

MORE STATE AND NATIONAL ACTIVITIES

The center recently asked state association leaders to develop projects that focus on the mature nursing workforce. Two of the associations that responded to the call and received grants to develop state demonstration projects are the Virginia Nurses Association (VNA) and the North Carolina Nurses Association (NCNA). The VNA is using the center grant to fund part of a larger initiative to prevent workplace injuries among RNs through the promotion of safe patient handling programs in all of Virginia’s health care facilities.

“We want to promote a minimal-lifting environment to prevent musculoskeletal disorders in nurses—with a primary focus on the needs of mature nurses,” says Terri Gaffney, MPA, RN, chairperson of the VNA’s Commission on Workforce Issues. “In Virginia we don’t have a lot of nurses,” she says, “and many are older. By promoting a no-lift or mini-

mal-lift environment, we hope we can extend and improve the work lives of our mature nurses.”

The \$10,000 grant will support a range of educational opportunities for nurses, from an online learning module to work-site classes to articles in the membership publication, *Virginia Nurses Today*. The educational programs will draw from the ANA’s “Handle with Care” initiative and include algorithms that help nurses assess and move patients safely; the algorithms were developed by the VISN 8 Patient Safety Center in Florida. The online program will be available this summer.

For its demonstration project, the NCNA is conducting a series of focus groups with nurses over the age of 50 to identify their issues and to find out what might encourage them to stay in the profession. Called “Graying and Staying,” the two-year project is being done in partnership with the South Carolina Nurses Association.

Focus groups will be held at seven hospitals in the two states beginning this fall, according to Dennis Sherrod, EdD, RN, president of the NCNA and coleader of the project. Half of the focus groups will be made up of staff nurses, and the rest will be made up of nurse managers. Information gathered from the nurses will serve as the basis of a white paper on strategies to retain mature nurses. Although the focus group questions have yet to be formulated, Sherrod wants to explore certain strategies that have surfaced in literature reviews and discussions with colleagues.

“Flexible scheduling is important to all nurses,” Sherrod says. “But because many older nurses are part of

the sandwich generation—having to take care of their children and their parents—scheduling can become even more crucial.

“Some nurses also have expressed a desire to decrease the number of hours they work through job sharing,” he says, “but it’s not an option at most hospitals.” However, there are some health care facilities that are offering nurses contracts that enable them to work six months out of the year, and others that are implementing phased-in retirement programs. Sherrod also wants to explore benefits, technology, and redesigned roles that will keep mature nurses in the workforce—for example, a program that allows nurses to put more funds into 401K plans so they’ll be better prepared for retirement.

Meanwhile, the center plans to continue working on national efforts, including continuing its partnership with the influential AARP, according to DeWitty. In addition to the online financial-literacy program, the center plans two other online programs, including a “self-health” survey aimed at mature nurses that will be available midsummer. The online programs are partially supported through a technical assistance grant awarded to the center from the Nurse Competence in Aging (NCA) initiative, a five-year program funded by the Atlantic Philanthropies, awarded to the ANA through the American Nurses Foundation.

Says DeWitty, “We’re very deliberately and systematically developing the best strategies to give the mature nursing workforce an enhanced work experience.”

For up-to-date information on the Mature Nurses Initiative activities, go to www.nursingworld.org and click on the Center for American Nurses. ▼