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The Office of the Provost

Walden University
2019

Abstract

Health Care Leaders' Strategies to Reduce Nursing Turnover

by

John Phelps

MA, Wayland Baptist University, 2014

BSOE, Wayland Baptist University, 2008

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

August 2019

Abstract

Health care leaders who lack effective nurse turnover strategies can negatively affect patient quality of care, productivity, and profitability. The purpose of this single case study was to explore strategies health care leaders used to reduce nursing turnover in a health care organization. The conceptual framework for this study was Herzberg's 2-factor theory. Data were collected from semistructured interviews with 4 health care leaders in the West Texas region who had a history of reducing nurse turnover for a minimum of 5 years from the date of hire, and from review of organizational documents related to the strategies to reduce nurse turnover, including policy handbooks and annual reports. Data were analyzed using word frequency and coding to distinguish patterns. Three key themes emerged: leadership support, job satisfaction, and compensation. The results of this study might contribute to social change through an increased understanding of nurse turnover strategies that would improve productivity and the overall quality of patient care to yield organizational success, decreased mortality rates, and improved community health.

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Dedication

Glory to God, for those that believe in him, anything is possible. I dedicate this study to my children; you are the future, do not be afraid to take a leap, you can accomplish anything you put your mind to. I also dedicate this study to my wife Jessica for her love, support, and motivation throughout this entire journey. I would also like to dedicate this study to my late mother Janet, thank you for raising me with a drive and passion to reach my goals with whatever obstacle may come my way. Throughout this entire journey, my family and I have faced many obstacles. It is with your love and support throughout your years on earth that gave me the strength and perseverance to accomplish anything I put my mind to. To all my family and friends thank you for the encouragement, motivation, and most importantly believing in me.

Acknowledgments

This journey would not have been possible without the mentorship and guidance from Walden University faculty and staff. First, I would like to thank my committee chair and mentor Dr. Janie Hall. Your continued support and guidance motivated me that I could reach my goal. Special thanks to my family for believing in me and giving me the encouragement for success. I want to thank all my classmates for the motivation to achieve success.

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Section 1: Foundation of the Study

Background of the Problem

Health care leaders must remain engaged in retaining employees in their organization (Hauff, Richter, & Tressin, 2015). Human resource directors maintain strategic goals for employee retention in these organizations (Vivek & Satyanarayana, 2016). To retain employees, organizational leaders must collect data on the factors that determine employee turnover within an organization (Hauff et al., 2015). In a competitive health care market, health care leaders must reduce employee turnover to continue generating long-term profits for all stakeholders. Thus, key employees lead to improved organizational profits and promote sustainability (Martin, 2015).

By 2025, the shortage of nurses in the United States is projected to increase by 260,000 to 1 million nurse jobs (Monahan, 2015). Employee turnover can decrease productivity and harm economic performance (Gupta & Shaw, 2014). According to Kayyali (2014), health care leaders face multiple challenges when addressing increased employee turnover rates. However, registered nurse employment is expected to rise 19% during the 10-year period, 2012 to 2022, surpassing other occupations (U.S. Department of Labor Bureau of Labor Statistics [BLS], 2015).

Problem Statement

Because of employee turnover problems, organizations suffer an estimated $300 billion in costs annually, including the nursing industry (Cho, Rutherford, Friend, Hamwi, & Park, 2017). In 2016, the median turnover rate in Texas for registered nurses (RNs) was 21.9%, for licensed vocational nurses (LVN) it was 16.7%, and for nursing

aides (NA) it was 28.6% (Texas Center for Nursing Workforce Studies, 2016). The general business problem is that some health care organizations have increased employee turnover rates among their nurses, which result in decreased productivity and profitability. The specific business problem is that some leaders in the health care industry lack the strategies to reduce nursing turnover.

Purpose Statement

The purpose of this qualitative single case study was to identify the strategies some health care leaders to use to reduce nursing turnover. The target population for this study included four health care leaders with successful experience planning and implementing strategies to retain leaders from the same organization in the health care industry in West Texas. The implications for positive social change include the potential to reduce nursing turnover that could improve productivity, profitability, and the quality of care provided to the community.

Nature of the Study

I chose a qualitative research method to explore the strategies health care leaders use to reduce nursing turnover in hospitals in West Texas. Researchers use the qualitative method to recognize the details of a problem (Yin, 2018). According to Brockington (2014), researchers may choose a quantitative method when searching to quantify information by collecting a sample within a target population. Researchers use a mixed method to combine quantified data and qualitative research to evaluate facts (Leedy & Ormrod, 2013). Quantitative and mixed methods were inappropriate for this study

because I did not include quantified data. I chose the qualitative method to explore the successful leader strategies to reduce nursing turnover rates at a hospital in West Texas.

I selected the case study design to explore the in-depth strategies used by health care leaders to reduce nursing turnover in West Texas. Researchers who use a case study method are seek to evaluate a situation in detail while keeping the appropriate framework in mind (Yin, 2018). I chose a case study design rather than selecting an ethnography, phenomenology, or narrative design. Specific cultural or ethnic groups are a primary focus using an ethnography study (McCusker & Gunaydin, 2015). I did not choose the ethnography method because this study was not about a specific culture group. Researchers explore a specific phenomenon that a participant may experience in phenomenological designs (Yates & Leggett, 2016). Therefore, a phenomenological method was not appropriate for my study. Researchers use a narrative design in gathering data from participants to present as stories (Yin, 2018). But stories were not the intent of my study.

Research Question

The overarching research question was: What strategies do health care leaders use to reduce nursing turnover rates?

Interview Questions

I will ask participants to respond to the following questions:

1. What strategies do you use to reduce nursing turnover rates?

2. How did you assess the effectiveness of your strategies to reduce nursing turnover rates?

3. What methods have been the most effective to reduce nursing turnover rates in this hospital?

4. What were the key barriers to reduce nursing turnover within the hospital?

5. How did your organization address the crucial barriers to implementing the strategies for reducing nursing turnover within your hospital?

6. What additional information do you have about the strategies used to reduce nursing turnover rates?

Conceptual Framework

I selected the Herzberg two-factor theory as the conceptual framework for this study; the theory was created in 1959 by Herzberg, Mausner, and Snyderman (1959). The theorists used the two-factor theory to determine how job satisfaction and job dissatisfaction influenced staff turnover (Herzberg, 1966). The quality of work-life (QWL) used in Herzberg's two-factor theory may affect workers' dissatisfaction or satisfaction at work (Herzberg et al., 1959). Furthermore, Herzberg et al. discovered that a reduction in employee turnover might improve the QWL (Herzberg et al., 1959). Salary, supervision, career growth, and working conditions are factors that influence employee turnover in a firm (Asegid, Belachew, & Yimam, 2014). Organizations promoting a positive atmosphere through leadership may reduce employee turnover using the two-factor theory (Islam, Ahmad, & Ahmed, 2013). Based on my literature review, I expected that the two-factor learning theory could provide the lens for me to understand the process from the participants point of view and provide a potential means for analyzing the relevance of the study to understand the overarching research question.

Operational Definitions

Employee retention: Employee retention is a combination of components including job satisfaction and organizational commitment that encourages employees to remain employed within an organization (Deery & Jago, 2015).

Employee turnover: Employee turnover references the number of employees who leave an organization voluntarily or involuntarily (Rahim & Cosby, 2016).

Assumptions, Limitations, and Delimitations

Assumptions are unproven facts a researcher considers true (O'Brien, Harris, Beckman, Reed, & Cook, 2014). Fryer et al. (2016) suggested researchers must recognize and explain the limitations of research with the audience. According to Goldberg & Allen (2015), researchers use delimitations to limit the scope of the study.

Assumptions

Assumptions are unverified facts researchers use when conducting their study (Locke, Spirduso, & Silverman, 2014). I assumed health care administrators were involved and had the ability to reduce nursing turnover. Secondly, I assumed that, when answering interview questions, participants would not be biased and would be honest with the knowledge of successful strategies to reduce turnover. I also assumed that I would reach data saturation through interviews leading to reliable and valid conclusions.

Limitations

Limitations may affect the validity of a study due to weaknesses beyond the control of the researcher (Singh, 2015). Data collection from participants can be problematic, because of required travel and time restrictions at meeting location.

Additionally, I was prepared to conduct a face to face interview to accommodate any schedule limitations needed to achieve data saturation.

Delimitations

Delimitations are used by researchers to define the boundaries and scope of a study (Ody-Brasier & Vermeulen, 2014). I used a single case study to explore how health care leaders address the reduction of nursing turnover within the health care industry. Moreover, I limited this study to the leaders of health care institutions in West Texas. The participants selected were successful in managing nursing employee reduction.

<p align="center">**Significance of the Study**</p>

The findings from this case study are expected to provide health care administration leaders with the tactics to make healthier decisions in the development and implementation of strategies for reducing nursing turnover. According to Kovner, Brewer, Fatechi, and Jun (2014), health care institutions lose approximately $1.4 to $2.1 billion annually due to nurse turnover. Quality employees play an integral role in the success of organizational leaders achieving productivity for their institutions (Vomberg, Homburg, & Bornemann, 2015).

Contribution to Business Practice

The health care industry continues to experience increased turnover rates with employees, which can lead to rising health care costs and a reduction in the quality of patient care (Van Bogaert et al., 2014). According to Hofler and Thomas (2016), over 40% of nurses leave their place of employment within the first 2 years of completing their nursing degree. Health care administrators seek methods to develop strategies

needed to reduce nurse turnover and increase profits. Organizations continue to experience high organizational costs due to employee turnover and recruitment problems (Batt, Lee, & Lakhani, 2014). The findings from this study provided new ideas of effective strategies to assist health care leaders in reducing nurse turnover.

Implications for Social Change

This study was expected to result in positive social change: reducing nursing turnover through the implementation of effective strategies that improve the quality of care provided to the community. Health care personnel may provide effective and uninterrupted patient care by reducing employee turnover (Backhaus, Verbeek, van Rossum, Capezuti, & Hamers, 2014). The organizational culture which reflects on employees' values is often a priority when health care professionals are seeking employment with organizations (Ladelsky, 2014). Administrative leaders may notice a reduction in new employee associated costs and recruitment expenses, which may allow reallocation of health care resources within the organization (Nancarrow, 2015). The findings from this study were expected to help health care leaders reduce nursing turnover, thereby increasing staff levels to care for patients. The overall quality of care provided to the community would increase with the reduction of nursing turnover rates.

A Review of the Professional and Academic Literature

The purpose of this qualitative, single case study was to explore the strategies health care leaders use to reduce nursing turnover. I used the following databases: ProQuest Central, SAGE Premier, MEDLINE with Full Text, Nursing and Allied Health, EBSCOHost, Academic Search Complete, and ProQuest Health and Medical Collection

to collect data in this study. My review of the literature concluded with a summary including prior research comparing and contrasting research study procedures and outcomes.

In seeking peer-reviewed journal articles and dissertations from 2014 to the present, I used the following keywords and pairs: *employee turnover, turnover, job satisfaction, employee behavior and morale, turnover and retention strategies,* and *salary and turnover*. . Additionally, I organized my literature using reference management software, Zotero.

The central research question was: What strategies do health care leaders use to reduce nursing turnover rates? The review of literature began with a background of RNs for understanding the significant role RNs play in the contribution to business practices. Also, I included references to the conceptual framework, nursing turnover strategies, and alternate theories.

My review of the literature for this study included 103 total references of which 90 were peer-reviewed journal articles. Ninety-seven percent of the peer-reviewed references were published between 2014 and2018. The number of references I used for this study by category included 90 (94%) peer-reviewed journal articles and 9 (7%) seminal books.

Herzberg Motivation-Hygiene Theory

The conceptual framework in this study is Herzberg's motivation-hygiene theory, otherwise known as Herzberg's dual factor theory. Herzberg developed the two-factor theory in 1950 (Herzberg, 1974). Herzberg used the two-factor theory to define how

leaders motivate employees. Herzberg identified rewards and recognition, advancement, responsibility, and advancement as factors for motivating employees in reducing turnover. Furthermore, Herzberg provided that insufficient salaries and subpar working environments lead to employee dissatisfaction which leads to a turnover.

Health care leaders should emphasize employee satisfaction within their organization to reduce nurse turnover. Herzberg (1974) used the motivation-hygiene theory to explain the aspects that lead to employee work satisfaction or work dissatisfaction which include growth, advancement, recognition, responsibility, and achievement. Moreover, Herzberg recognized employees experience a higher level of work satisfaction within organizations that provide opportunities for advancement, recognize their staff, and promote growth in the workplace. According to Atalic, Can, and Canturk (2016), leaders can vastly improve satisfaction in the work environment by understanding the importance of growth, advancement, recognition, achievement, and responsibility. Employees with improved job satisfaction could have reduced turnover within their organization because of recognition of their work and the opportunities for advancement.

Health care leaders who provide an adequate work environment for employees could decrease employee job dissatisfaction reducing organizational turnover. Herzberg (1974) used the motivation-hygiene theory to explore and define several factors to include work conditions, salaries, policies, management, and interpersonal relationships leading to dissatisfaction in the workplace. Employees within organizations having leaders who provide ineffective management, poor working conditions, and implemented

policies those employees consider useless experience higher levels of work

dissatisfaction (Herzberg, 1974). Employees experienced an increase in work

dissatisfaction when management, conditions at work, organizational policies, and

interpersonal relationships were insufficient (Atalic et al., 2016). Therefore, health care

leaders could reduce employee turnover in their organization by providing an acceptable

work environment for personnel.

Employees experiencing work satisfaction could experience factors of work

dissatisfaction. Job satisfaction is a direct result of employee achievement or quality

performance (Herzberg, 1974). Leaders who provide goals that are obtainable for

employees or recognize employees for the quality of work could lead to higher job

satisfaction. Employees with positive attitudes and recognition for the quality of work

can increase employee satisfaction (Herzberg, 1974). Additionally, Herzberg (1974)

explained that job satisfaction and dissatisfaction are different phenomena. Furthermore,

the same may be true for employees; missing factors associated with work dissatisfaction

would not mean employees are satisfied with work.

Leaders who develop and follow organizational policies provide an environment

for employees to accomplish higher satisfaction on the job. Herzberg (1974) highlighted

leaders that follow institutional policies and procedures will produce an environment for

staff to attain a much higher work satisfaction. Furthermore, leaders who enforce the

organizational policies and procedures increases enhanced work performance and

commitment as a direct result of employee work satisfaction (Herzberg, 1974). Moreover,

scholars who support Herzberg's outcomes indicate organizational policies supported by

its leaders are more effective at improving employee work satisfaction (Siahaan, 2017).

Organizational policies with support from institutional leaders will lead to reduced

turnover through employee job satisfaction.

Rival Theories

Exploring the foundation of Maslow's hierarchy of needs theory and the

expectancy theory is critical. Researchers found Maslow's approach to defining a

person's needs had a consistent structure (Barrick, Thurgood, Smith, & Courtright, 2015).

Vroom (1964) emphasized human behavior effects, which are the opposite of Maslow's

(1943a) focus on the basics of human needs. Therefore, researchers who use the

expectancy theory and Maslow's hierarchy of needs theory would understand the effects

of employee turnover through the study of human behaviors or the basics of human

needs.

Maslow's hierarchy of needs theory. Maslow introduced the hierarchy of needs

theory in 1943 to recognize how leaders can motivate their employees and reduce

employee turnover within an organization. Maslow's theory includes physiological,

social, self-actualizing, ego, and safety as the five levels of employee needs (Maslow,

1943a). Additionally, Maslow suggested leaders could increase employee motivation

with an understanding of their employee's basic needs. Maslow theorized employees

must satisfy their individual basic needs before reaching their fullest potential

(Baumeister, 2016). Maslow has used the theory to define the fundamentals leaders need

to motivate their employees.

Leaders improve job satisfaction and reduce employee turnover by meeting the needs of their employees (Barrick et al., 2015). Meeting the needs of employees will lead to longevity of experienced, skilled workers. Maslow (1943) recommended leaders satisfy one need before moving on to the next need. According to Chiniara and Bentein (2016), Maslow's theory is a model where leaders motivate employees to participate in manners that satisfy them to maximize their full potential.

Maslow's theory is beneficial to researchers exploring employee job satisfaction. According to Siahaan (2017), Maslow's theory proposes clarification for motivating employees due to basic needs being the primary concern of people. Moreover, Maslow's theory provides a leader with the information needed to reduce employee turnover by meeting the needs of their employees (Thibodeaux, Labat, Lee, & Labat, 2015). Leaders who embrace Maslow's theory improve job satisfaction, which could reduce employee turnover.

Expectancy theory. The expectancy theory defines how a person's behavior is dependent on the result of a chosen behavior (Vroom, 1964). Therefore, Vroom used the expectancy theory to address the thought process a person may have when they are making decisions. Vroom explored financial compensation and advancement effects on employee's motivation. Health care leaders use strategies to provide financial rewards to personnel that is effective with increasing personnel motivation (Chang, Hsu, & Wu, 2015). Increasing employee motivation could lead to a reduction in employee turnover.

Researchers used the expectancy theory to understand employee behavior and the connection to the motivation of employees. Personnel who did not receive nor expect

recognition for their work remained unbiased (Chang et al., 2015). However, the personnel who had the chance to obtain an award presented with a more positive behavior (Chang et al., 2015). Furthermore, employee behavior reflected the choices they would make (Vroom, 1964). Therefore, researchers could use the expectancy theory to understand how to motivate nurse employees to produce a positive behavior in an organization.

Employees who received monetary benefits demonstrated positive behaviors versus those employees who did not receive a reward (Chang et al., 2015). Vroom (1964) found that leaders could motivate their personnel through monetary rewards based on performance. Maslow (1943a) focused his research on basic human needs whereas, Vroom focused primarily on the consequences of behaviors. Some leaders motivate their employees through performance recognition and financial gain to reduce employee turnover.

History of the Nursing Industry

Nurses have played a vital role in the history of health care throughout communities. Additionally, nurses have a role in disease recognition and prevention through administration and education (Davenport, Castle, Brady, Smith, & Keen, 2015). Nurses make up the biggest group of health care professionals around the globe (Rezaei-Adaryani, Salsali, & Mohammadi, 2012). The nursing role is complex and active due to life and death circumstances (Paul & MacDonald, 2014). The role nurses fill is key to the success of a health care organization.

Changes in nursing history. Throughout the history of the United States health care, the nursing industry continues to change. According to Chung and Fitzsimons (2013), the nursing industry includes four generations of nursing cohorts: veterans, baby boomers, Generation X, and Generation Y. The nursing veterans make up the smallest percentage, and the baby boomers make up the largest percentage of employed nurses (Havens, Warshawsky, & Vasey, 2013). Moreover, Havens et al. (2013) suggested Generation X nurses will replace the baby boomers while Generation Y nurses will continue to increase within the industry filling nurse vacancies. Health care leaders' concerns continue to increase regarding how well the Generation Y nurses would be prepared or interested in stepping into roles in leadership (Gunawan, 2016). Engaging all generations of nurses in the workforce culture of organizations will increase retention rates (Chung & Fitzsimons, 2013). Leaders in the health care industry who have a greater understanding of the various generations of nurses and continue to change and provide implication may reduce turnover intentions of their employees.

History of nursing turnover. Employee turnover in the nursing industry continues to prove problematic for health care leaders. Daskin, Arasli, and Kasim (2015) estimated nurse turnover to range from 20% to 30% in for-profit hospitals and 48% to 86% in nonprofit hospitals. Additionally, nursing leaders continue not to apply the knowledge learned to reduce nurse turnover (Daskin et al., 2015). Employees with a leader of high quality have decreased turnover intentions due to increased access to resources and support leading to job satisfaction (Brunetto et al., 2013). Health care leaders and health care organizations throughout the U.S. continue to struggle with

reducing voluntary nurse turnover (Hayward, Bungay, Wolff, & MacDonald, 2016). Health care organizations created a workforce culture to focus on reducing nurse turnover by increasing job satisfaction.

Nurse Turnover Synopsis

Leaders in the health care industry who understood the factors leading to nurse turnover ensured success to an organization. Rahman and Nas (2013) stated the great importance needed for health care leaders to understand the thought process nurses make when considering a change in jobs from an organization. Kovner et al. (2014) supported the need to reduce nurse turnover due to a significant increase in operational expenses from nurses leaving organizations. Management within a healthcare system must understand the effects of nurse turnover on organizational productivity with an industry turnover rate greater than 10% (Rosseter, 2014). Leaders in health care ensured organizational success with a reduction in nurse turnover.

Health care leaders must understand the effects and the causes of nurse turnover. Nurse turnover in a health care organization has a negative impact on department staffing levels and patient to nurse ratios (Collini, Guidroz, & Perez, 2015). According to von Knorring, Alexanderson, and Eliasson (2016), leaders who make poor decisions lead to employee frustration and turnover. The health care industry is competitive; health care organizational leaders must provide available funding to appeal and maintain experienced employees (Nayak, Sahoo, Mohanty, & Sundaray, 2016). Health care leaders who made sound decisions and improved nurse satisfaction demonstrated a healthy organization.

Factors Influencing Nurse Turnover

Several factors contributed to nursing turnover within an organization. Many employees leave their organization due to poor compensation, lack of professional development, unfair treatment, and a meager work environment (Yoon Jik & Poister, 2014). There are several factors that are associated with nurse turnover that include opportunities such as the following: (a) professional development, (b) continuing education, (c) manager to nurse relationships, (d) leadership support, and (e) their work environment (Black, 2015). Spence Laschinger, Wong, Cummings, and Grau (2014) found that lost productivity costs an organization an estimated $11,581 per nurse annually. Motivational factors have a positive effect on job satisfaction leading to higher performance (Smith & Shields, 2013). Health care leaders who recognized and understood the factors that influence nurse turnover improved organizational success.

Health care leaders possessed the skills needed to retain experienced nurses and promote job satisfaction to reduce the intent of turnover within the organization. Managers who promote an environment to motivate would have an increase of nurses remaining with the institution (George, 2015). Additionally, George (2015), acknowledged the need for leaders to reduce turnover by motivating employees to prevent the loss of qualified staff. Moreover, manager engagement in the organization would reduce burnout leading to a reduction in nurse turnover enhancing the quality of patient care (Dempsey & Reilly, 2016). Leaders who motivated the nursing staff promoted job satisfaction and patient care leading to organizational success.

Compensation. Health care leaders may reduce nurse turnover by ensuring critical practices to include motivation, employee productivity, and compensation (Holtom & Burch, 2016). Compensation continues to be the most critical factor to reduce nurse turnover (Call, Nyberg, Ployhart, & Weekley, 2015). Equally, organizational decisions relating to compensation is the most important factor to reduce personnel turnover (Call et al., 2015). Leaders used compensation as an incentive to reduce turnover and obtain qualified applicants.

Leaders in the health care industry could work together by reviewing training, performance, and the compensation factors in place to avoid employee turnover (Holtom & Burch, 2016). The shortfall of support from leadership staff, job satisfaction, compensation, and institutional fit will affect employee turnover (Zhang, 2016). Huffman, Casper, and Payne (2014) explained that providing leadership support and competitive wages could be effective at reducing employee turnover. Organizational leaders who compete with compensation in the market could be a critical motivation to reduce employee turnover (Peltokorpi, Allen, & Froese, 2015). Compensation is a vital component in reducing employee turnover and retaining experienced nursing staff.

Health care leaders could reduce nurse turnover with a competitive compensation plan. Compensation is a valuable tool for organizations to use when focusing on reducing employee turnover intentions (Gialuisi & Coetzer, 2013). Institutions are required to offer compensation in exchange for services rendered (Christine, Devie, & Tarigan, 2015). Additionally, organizations must structure personnel compensation systems properly to reduce employee turnover intentions (Christine et al., 2015). Furthermore, Christine et al.

(2015) explained a decision on compensation within an institution would have a significant impact on employee turnover. Organizations with effective compensation plans led to a successful outcome for an organization and reduced employee turnover intentions.

Productivity. Nurse turnover had a negative impact on employee productivity. Penrose (2015) explained that employee turnover will have a direct effect on employee turnover. As voluntary employee turnover increases, employees who remain with the organization have decreased job productivity (Penrose, 2015). However, employees who are included in the internal decision-making process were able to increase the relationships between managers and personnel (Fu, 2014). Improved relationships with leadership and employees increased work productivity.

Productivity continued to play a vital role in organizational success. Leaders must address job dissatisfaction and job satisfaction to increase productivity within an organization (Herzberg et al., 1959). Leaders who collaborate with their employees can maximize innovation and productivity in an organization (Allio, 2015). Furthermore, leaders must emphasize the aspects that increase employee retention to reduce costs associated with employee turnover (Wayne, Casper, Matthews, & Allen, (2013). Job satisfaction continued to be a critical component in an organization due to employee job dissatisfaction. which is the leading cause of increased employee turnover rates (Boxall, Hutchison, & Wassenaar, 2015). Leaders achieved organizational success by increasing productivity and decreasing nurse turnover.

Motivation. Employee motivation is critical to employee success in an organization (Bernard, 2013). Motivation has a direct relationship with employee commitment and their performance (Paille, 2013). As employee motivation increases, employee commitment to the institution continues to increase (Bernard, 2013). Thus, employee commitment and performance were a direct result of motivation from leadership in an organization.

Several motivational factors affect an employee's ability to increase work commitment and satisfaction (Chu, 2014). Employees who are satisfied with their salaries and enjoy their job are more likely to be loyal to their organization (Evans, Shuqing, & Nagarajan, 2014). Call et al. (2015) suggested leaders who examine motivated employees could gain a greater understanding at reducing employee turnover. Health care leaders focused on motivating employees to increase employee work performance and reduce nurse turnover within their organization.

Professional development. Health care leaders reduced nurse turnover by increasing job satisfaction by providing professional development. Rahman and Nas (2013) noted employees have increased productivity and have less intent to leave their job with opportunities for professional development. Employees who lack the opportunity for professional development, decreased compensation, and poor treatment are more likely to leave the institution they work in (Yoon Jik, & Poister, 2014). A manager who engages employees could promote positive outcomes and performance thus leading to a decrease in turnover rates (Keyko, Cummings, Yonge, & Wong, 2016).

Health care leaders focused on improving professional development for their staff to reduce turnover intentions.

Leaders in the health care industry reached organizational success by implementing professional development programs for nurses. Stakeholders will reach organizational success with implementation of appropriate professional development programs for employees (Festing, & Schäfer, 2014). Additionally, employees that complete professional development programs are providing greater quality of work (Festing, & Schäfer, 2014). Leaders who implement effective employee development programs would establish and maintain an effective leader-employee relationship (Khattak, Rehman, & Abdul Rehman, 2014). Health care organizations and leaders reached success with an effective professional development plan for nursing staff.

Job satisfaction. Many factors contributed to nursing turnover, and job satisfaction in the workplace continues to be a contributing factor. Allison, Flaherty, Jung, and Washburn (2016) explained leaders within organizations could provide the resources to motivate personnel to accomplish satisfaction on the job. Employees could perform work-related tasks but, they may lack the support needed to accomplish their work well (Yi-Feng, 2016). Leaders who create and continue an organizational culture would include the guidelines for employee behavior (Denhardt, Denhardt, & Aristigueta, 2015). Furthermore, leaders increased job satisfaction through promoted a positive work environment.

Leaders could identify the factors of employee job satisfaction by recognizing employee's behavior in their work performance or their generational cohort (Lu &

Gursoy, 2016). Employers are less likely to find outside employment versus finding a different position within an organization (Denhardt et al., 2015). Additionally, Lu and Gursoy (2016) found that there are more similarities than differences with generational employees work satisfaction, wages, and turnover. Thus, improving job satisfaction across all generations led to reduced employee turnover.

An employee who was satisfied with their work was committed to their organization. Satisfaction on the job has a substantial impact on maintaining organizational commitment (Pomirleanu, & John-Mariadoss, 2015). Personnel satisfied with their job have increased job performance and are committed to their organization (Johnson & Friend, 2015). Leaders who provide support to their employees could increase commitment to the institution and increase job performance (Lu, Guo, Luo, & Chen, 2015). Ingold, Kleinmann, König, Melchers, and Van Iddekinge (2015) found personnel would have a decreased intention employee turnover with an increase in organizational commitment. Therefore, a leader focused on increasing employee job satisfaction improved organizational commitment.

Strategies to Reduce Nurse Turnover

Health care leaders reduced nurse turnover within their organization by employing successful strategies. Health care leaders who emphasize administrative and human resource best practices would reduce employee turnover in institutions (Holtom & Burch, 2016). Moreover, leaders who engage the workforce within their organization could aid in the reduction of employee turnover (Ellingson, Tews, & Dachner, 2016). Koistinen and Jarvinen (2016) acknowledged leaders with impractical opportunities for

job performance could cause personnel to question occupation choices. Therefore, health care leaders who engaged their employees and implemented best practices throughout the organization reduced nurse turnover.

Leader support. Researchers studied the differences between leader support and how their support effects employee turnover (Lu, Tu, Li, & Ho, 2016). Leaders play an important role in reducing employee turnover intentions (Tymon, Stumpf, & Smith, 2011). Moreover, leaders who support their employees are effective at reducing work stress leading to a reduction in employee turnover (Herrmann & Felfe, 2014). Leaders coud reduce employee stress by providing feedback to employees and through continued guidance (Buzeti, Klun, & Stare, 2016). Nurses were reluctant to leave an organization with little to no work stress.

Leaders who support employees by using conflict resolution techniques may lead to a reduction in employee turnover (Albu & Flyverbom, 2016). Mayr (2017) identified conflict resolution with leadership involvement is vital to organizational success no matter the industry. Furthermore, leaders who care about their employees and provide support were able to figure out the types of conflicts that affected their employees (Siyanbola & Gilman, 2017). Leaders reduced employee turnover through managing employee conflicts.

Health care leaders reduced nurse turnover by supporting employee goals. Dubey, Gunasekaran, Altay, Childe, & Papadopoulos (2016) acknowledged leaders who supported employee goals could reduce the intentions of employee turnover. Employees appreciate leaders who mentor their employees to prepare them for future organizational

opportunities (Naim & Lenka, 2017). Leaders who provide mentorship to employees increase productivity and reduce employee turnover (Ugoani, 2016). Therefore, leadership in support of their employees was influential to the reduction of nurse turnover intentions.

Organizational commitment. Employee commitment to an organization is a critical factor in employee turnover (Purpora & Blegen, 2015). Leaders who engage their employees is key to increased employee commitment with an organization (Sangaran & Garg, 2015). Additionally, leaders increasing employee salaries could motivate employees to commit to an institution (Wister & Speechley, 2015). An employee's age and years of service played an additional role with employee commitment to an organization (Gialuisi & Coetzer, 2013). Health care leaders reduced nurse turnover with attention to the multiple factors that contribute to employee commitment with an organization.

Nurse commitment to an organization affected the demographics and current employment opportunities. Employee commitment to an organization impacted by demographics could result in higher turnover rates (Harland, 2014). Additionally, employees are less likely to leave an organization due to a deficiency in new job opportunities (Jaekwon, SeungUk, & Smith-Walter, 2013). Boyas, Wind, and Ruiz (2015) recognized employee loyalty to an organization would avoid stress to an employee's family. Furthermore, Bratt, Baernholdt, and Pruszynski (2014) found that nurses in rural areas had a higher commitment to their organization than that of urban

nurses. Thus, demographics and employment opportunities in the area were contributors to nurse commitment with their organization.

Training and advancement Leaders must promote a workforce to reduce employee turnover (Ellingson et al., 2016). Holtom and Burch (2016) recommended institutional leaders work in partnership with employees to ensure training opportunities are in place to aid in reducing employee turnover. Training is an investment used by many organizations to decrease employee turnover (Allen, 2016). Furthermore, if an employee leaves an organization soon after being employed, expenses associated with their employee training will be a waste (Kehoe & Wright, 2013). Increased employee turnover would not motivate training staff efforts to train newly hired employees effectively (Allen, 2016). Therefore, effective training to newly hired employees aided in the reduction of nurse turnover in organizations.

Leaders who provided advancement opportunities within an organization may contribute to high nurse turnover. Employee turnover is increased in organizations that have limited advancement opportunities for employees (Koistinen & Jarvinen, 2016). Leaders could increase job satisfaction and reduce employee turnover by understanding the importance of advancement opportunities in organizations (Atalic, et al., 2016). Employee perception for their career advancement is influential in reducing turnover with the intention of leaving an organization (Rahman & Nas, 2013). Employee opportunity to advance within their organization contributed to a reduction in nurse turnover.

Manager-Nurse relationship. Managers within organizations reduced nurse turnover by promoting strong relationships between management and nursing staff.

Supervisors who increase the communication levels with their employees could increase employee satisfaction in the workplace (Mumuni & O'Reilly, 2014). Leaders could have a strong relationship with employees by managing the emotions of others effectively (Nolan, 2015). According to Cascio (2014), employees are less productive in an environment containing poor leader relationships. Therefore, supervisors who maintained a healthy working relationship with employees promoted employee productivity and retention.

Managers who effectively communicated with nurses led to a strong manager-nurse relationship. Chang, Wang, and Huang (2013) informed leaders to promote communication techniques in their organization to reduce employee turnover. Hayward et al. (2016) stated that leaders could improve supervisor and employee relationships by communicating information with employees. Institutions that maintain quality communication practices will increase job satisfaction, productivity, and employer-employee relationships (Chang et al., 2013). Therefore, managers expected employee turnover to decrease in an organization where good communication techniques are used.

Recruitment. Health care leaders reduced nurse turnover with recruitment strategies. Success within an organization includes recruiting talented individuals that are a fit for the organization (Allio, 2015). A human resource team provides the staff and their resources for an organization (Flood, Minkler, Lavery, Estrada, & Falbe, 2015). Allio (2015) stated leaders who mentor their staff would increase their talents leading to increased productivity. An effective human resource team reduced employee turnover through the selection of qualified candidates.

Leaders in health care reduced nurse turnover by assessing their quality of leadership management within the organization. Employees with a higher quality of an employee-manager relationship had access to the resources and support leading to increased job satisfaction and reduced employee turnover (Brunetto et al., 2013). Johansen (2013) found that mid-level managers had a higher degree of impact on employees than upper-level managers. Nurses who presented with a high quality of work life had an increase in loyalty to their organization (Peltier, Schibrowsky, & Nill, 2013). Leaders with successful strategies of managing employees led to reduced turnover and increased recruitment of nurses.

Organizational leaders with successful recruitment strategies found the right fit for the organization. Leaders who enhance the recruitment efforts would select the most qualified individual, continuously review job descriptions and specifications, and use appropriate supervision with staff (Vidal-Salazar, Cordon-Pozo, & de la Torre-Ruiz, 2016). Employee turnover has a negative effect on the finances associated with the recruitment and selection of qualified individuals (Khoele, & Daya, 2014). Leaders in the health care industry can use the knowledge of job satisfaction to implement recruitment strategies for obtaining qualified and valuable employees (Bednarska & Szczyt, 2015). Leaders obtained the most qualified individual for their organization through successful recruitment strategies.

Summary and Transition

The purpose of this qualitative case study was to establish an understanding of strategies health care leaders used to reduce nurse turnover. A sample of four health care

leaders responded to semistructured interview questions. In Section 1, I used the research problem and conceptual framework to establish an understanding of strategies health care leaders used to reduce nurse turnover. I provided background on nurse turnover, causes of nurse turnover, and the conceptual framework used by previous researchers in exploring nurse turnover strategies.

In Section 2, I provide justification of the research design and method used to support this research study. Section 2 includes my role as the primary instrument, encompassing the specifics of participants, data collection and organization techniques, and reliability and validity.

In Section 3, I present my research outcomes and describe how the findings apply to professional practice, the implications for social change, and recommendations for future research.

Section 2: The Project

Purpose Statement

The purpose of this qualitative single case study is to identify the strategies some health care leaders use to reduce nursing turnover. The target population for this study included four health care leaders with successful experience in planning and implementing strategies to retain leaders from the same organization in the health care industry in West Texas. The implications for positive social change included the potential to reduce nursing turnover, which, in turn, would improve the quality of care provided to the community.

Role of the Researcher

As the researcher, I played an essential role in enlisting participants for the study, supervising the interview method, being the key tool for gathering information and analyzing data collected from the interviews (Fusch & Ness, 2015). As the researcher, I used face-to-face meetings to gather information for this qualitative, single case study. I sent an e-mail to potential participants requesting their participation in the study. Additionally, I used effective communication during the interviewsand integrated active listening with the open-ended questions. A qualitative researcher must be able to mitigate any bias to meet the requirements for conducting research (Merriam & Tisdell, 2015).

The focus of this study was to explore the strategies that health care leaders use to reduce nursing turnover. A researcher's relationship with participants could lead to bias and compromise the quality of the study (Joseph, Keller, & Ainsworth, 2016). Therefore,

I maintained a distant professional relationship with the participants and health care organizations used for gathering data in this study.

I served as the primary data collector and gathered data by adhering to procedures outlined in the *Belmont Report* to mitigate bias (*Belmont Report*, 1979). The *Report* also protects participants: it ensures researchers' knowledge of the research process, their awareness of roles for the researcher and participant, and participants' willingness to take part in research (Marshall & Rossman, 2016). I used confidentiality procedures to protect participants throughout the research process, includingpseudonyms to maintain privacy.

Researchers use an protocol to regulate interview procedures in qualitative research (Leonidaki, 2015). I used a semistructured interview method to collect data from participants and maintain control of the interview process. This protocol was used to set the tone, enable consistency, create order, and help participants to understand their rights (Castillo-Montoya, 2016). The protocol (Appendix A) helped to ensure consistency with the research question.

The topic of this study was familiar to me as a health care leader who previously experienced employee turnover in the nursing industry. Interview protocols encourage a uniformed interview process leading to the improvement and saturation of data (Salterio, Kenno, & McCracken, 2016). According to Overgaard (2015), researchers who decrease personal bias while collecting information and data analysis help to guarantee the integrity and analysis of the evidence collected. I recognized the possibility of personal bias and avoided it by preventing relationships with hospital employees that would interfere with research results.

Participants

Researchers must guarantee participants in their study possess the knowledge to provide information about the topic (Hoyland, Hollund, & Olsen, 2015). The organization selected for participation in this study was a health care facility in West Texas. Researchers recommend using the purposive sampling technique to address the research question of a study when choosing qualified participants (Yin, 2018). The primary criteria for selecting qualified individuals for this study included participants who are health care leaders with experience in developing successful strategies for reducing nurse turnover in their organization.

Researchers must gain access to individuals willing to participate in a study and who are qualified to complete a successful study (Peticca-Harris, deGama, & Elias, 2016). The Director of Human Resources in the health care organization received a letter of consent and facilitated access to qualified participants after obtaining IRB approval. Additionally, the participants were asked to send a reply via e-mail confirming receipt of informed consent and the desire to participate in the study. Researchers will strengthen meetings and make the research process move forward seamlessly by forming a working relationship with all individuals participating in the research (Yin, 2018). Therefore, I sustained a working relationship with all participants and made them comfortable by emphasizing their experiences and opinions in the study. I asked participants the same questions in numerical order. Additionally, I assured the protection of each participants' identity by using pseudonyms. The use of data coding and pseudonyms will ensure participant privacy when reporting results (Yin, 2018). Participants had the right to

terminate the study without penalty. I collected names of participants, consent forms, and data from interviews to store them for five years using secure folders on my personal computer. Researchers who use the necessary procedures to deliver protection and privacy to human participants are following ethical research practices (Wong & Hui, 2015). I will remove and destroy all data from my computer at the end of five years from the study completion date.

Research Method and Design

Researchers may use three methods to study a phenomenon: (a) qualitative, (b) quantitative, and (c) mixed methods. A researcher who is directing a study will include the research method and design to signify a plan for a successful study (Antwi & Hamza, 2015). I included the dialogue of research methodologies and designs in this section.

Research Method

I selected the qualitative research method for this study to explore the strategies health care leaders use to reduce nursing turnover. Qualitative researchers ask *how* and *why* questions when using research to gain a deeper understanding (Yin, 2018). Additionally, open-ended questions used during interviews will provide participants the opportunity to express their opinions on the topic (Gustafsson, Jertfelt, Blanchin, & Li, 2016). According to McCusker and Gunaydin (2015), evaluating information using a qualitative method to explore will clarify a theory rather than quantify the phenomenon.

Researchers using the quantitative research method are required to formulate and test a theory to investigate dependent and independent variables (Babones, 2016). According to Long (2014), researchers selecting a quantitative approach will make

predictions based on consistent information collection methods, theory testing, and examining data using statistical analysis to describe a phenomenon. Researchers can reach more participants than other study designs and can offer data to test a hypothesis in a quantitative study (Wouters, Maesschalck, Peeters, & Roosen, 2014). The quantitative research method was not appropriate for my study because this study did not involve a statistical examination of current data.

The mixed method approach contains subjective qualitative data and quantitative data (McKim, 2015). Johnson and Friend (2015) suggested researchers using a mixed methods approach will have the ability to provide an in-depth understanding of the theory and produce a complete understanding of a phenomenon. Researchers using mixed methods will connect pieces of a qualitative approach to increase the awareness of an exceptional phenomenon and use statistical data to measure tendencies, significance, reasons, and consequences (Pluye & Hong, 2014). Therefore, a mixed methods approach was not appropriate for this study because my objective was not to complete a test of a hypothesis and evaluate variables

Research Design

I selected a single case study design to complete my doctoral study. Researchers who use a case study approach will explore and complete a comprehensive investigation of a case to gain an understanding of the actual context (Tang, 2014). Moreover, researchers use three elements to justify the use of a case study design, (a) nature of research question; (b) deficiency of requirement to control behaviors, and (c) focus of the

study on developing topics (Yin, 2018). The three elements will exist throughout this study. A case study design is most appropriate for this study.

The ethnography approach was the first approach considered for this study. Specific cultural or ethnic groups are a primary focus using an ethnography study (McCusker & Gunaydin, 2015). Researchers who use the ethnography design will witness the perspectives of each participant and their culture to gain an understanding of their common experiences (Kaplan et al., 2014). According to Siwale (2015), researchers using an ethnography study must be aware of the expenses needed to complete this study due to the length of time researchers must spend with the participants. I did not choose the ethnography method because this study was not about a specific culture group.

A phenomenological method was the second approach considered for this study. Researchers explore a specific phenomenon a participant may experience in a phenomenological design (Yates & Leggett, 2016). Researchers who focus on individual lived experiences have adopted the phenomenological design (Dasgupta, 2015). The purpose of a phenomenological study is to find the precipitating aspects that account for participant experiences (Manen, 2016). The phenomenological method is not appropriate for my study because I will not examine a phenomenon.

The third approach considered for this study was the narrative design. Researchers collect information from participants in the form of stories to capture the experiences of the participant (McMahon & McGannon, 2016). Additionally, data collected by researchers using a narrative design will advance their skills used in problem-solving (Lewis, 2015). Furthermore, researchers use a narrative design in gathering data from

participants to present as stories communicated by researchers (Yin, 2018). The purpose of this study was to explore the strategies used to reduce nurse turnover in West Texas instead of the narration of the effects of nurse turnover. Therefore, the narrative design is not the intent of my study.

I continued to interview until I reached data saturation. Data saturation included data that contains no new concepts or themes in qualitative research (Salmons, 2015). Researchers will not observe new methods of data until all the information collected for the study is saturated (Morse, 2015). Researchers deliberate to ensure their approved approach is vital to achieving data saturation (Tran, Porcher, Tran, & Ravaud, 2016). The target population for this study included four health care leaders with successful experience planning and implementing strategies to retain leaders from the same organization in the health care industry in West Texas.

Population and Sampling

The target population for this study was four successful health care leaders working in a hospital in West Texas. Purposeful sampling includes choosing participants who provide data providing clear boundaries (Coyne, 2008). I selected this population to answer the following research question, what strategies do health care leaders use to reduce nursing turnover rates? Mayo and Tsey (2009) used purposeful sampling to examine collective research relationship in their study. Researchers should confirm a participant sample for research studies are a representative of the population and small enough to enable a thorough case analysis (Boddy, 2016). Moreover, researchers use sampling to target a specific study population to meet the criteria established by the

researcher to answer the research question (Balyakina et al., 2014). The sample size in a study is related to data saturation (Marshall & Rossman, 2016). Researchers use data saturation to provide the credibility and dependability to qualitative research (Kaczynski, Salmona, & Smith, 2014).

The participants selected for this study met the following criteria: (a) employed as a health care leader in a hospital setting, (b) employed within the host organization, (c) maintained employment role for at least one year. Researchers using the qualitative method identify participants based on a connection with the research question and phenomenon addressed by the research question (Marshall & Rossman, 2016). A pool of participants that contain the characteristics needed to provide a vision is necessary to answer the overarching research question of a study (Balyakina et al., 2014).

The study participants received an invitation by phone to participate in the study. The Human Resource department provided phone numbers or extensions of potential study participants. I followed the phone call with an e-mail to the potential participant requesting their participation in the study. Participants received an informed consent form via e-mail. Additionally, the participant were asked to send a reply via e-mail confirming receipt of informed consent and their desire to participate in the study. I will arrange the face-to-face interviews in a comfortable setting that is free from distraction. Researchers use face-to-face interviews to collect data for a qualitative study (Zhang & Guttormsen, 2016). Researchers arrange interviews to provide a clear structure to the participant and create a dependable framework (Lord, Bolton, Fleming, & Anderson, 2016). I used written journal notes to record the interviews.

Ethical Research

Researchers are accountable to protect participants and support the legitimacy of

the research outcomes (Berger, 2015). I requested the permission to complete research for

this study from the Walden University Institutional Review Board (IRB) to ensure my

compliance with the ethical standards and to protect the study participants. The IRB

approval number for this study was 03-07-19-0601089. The research design I have

chosen followed the protocols of the Belmont Report ensuring the participant understood

their role in the study.

I gave each participant an informed consent form. Researchers view consent

forms as part of a conversation development with an intent to obtain an understanding of

the participants (Wall & Pentz, 2016). The study participant will have the right to remove

their consent and withdraw from the study at any point during the research process (U.S.

Department of Health & Human Services [HHS], 2018). Participants involved in the

study can withdraw through notification via e-mail or phone. Researchers must destroy

all information collected and discontinue all communications with the participant at the

participant's request (HHS, 2018). Researchers may provide incentives to participants

ensuring that the incentives will not affect the quality of data provided by participants

(Bouter, 2015). I did not offer any incentives for the participation in this study; therefore,

I ensured all participants understood their participation was voluntary.

I conducted face-to-face, semistructured interviews using the interview protocol

established after receiving the informed consent from contributors (Appendix A).

Additionally, I asked the participants the same interview questions. I gathered and stored

data throughout the study electronically as a digital file that was password-protected and will be kept in my residence for 5 years to protect the identity of the individuals and organization who participated in this study. Researchers are suggested to keep all information collected for 5 years after study completion in a locked cabinet (Check, Wolf, Dame, & Beskow, 2014). I stored electronic files containing participant information and will delete them after 5 years. Additionally, documents collected throughout the study containing data will be stored and locked in a fireproof safe at my residence. Researchers must take every effort possible to alleviate possible harm to participants through safeguarding confidential data and obtaining informed consent (Wall & Pentz, 2016). Destroying documents is a reliable means to get rid of research documents and media (Yin, 2018). I assigned participants a code consisting of a letter and a number (P1, P2, P3, and P4) to maintain the confidentiality of the study contributor. Furthermore, I did not use any organizational name in my research study.

<div align="center">**Data Collection Instruments**</div>

The objective of this study was to explore the insights and actions of four health care leaders who successfully used business strategies to reduce nursing turnover. The researcher serves as the main instrument for collecting data in a case study (Houghton, Murphy, Brooker, & Casey, 2016). Additionally, researchers gather information using written documents, interviews, and observations (Petty, Thomson, & Stew, 2012). In this study, I served as the primary instrument for data collection. Moreover, I submitted a Letter of Consent to the HR Director. The interview protocol was used as a guide outlining the procedures to conduct interviews and collect data (Appendix A). De Massis

and Kotlar (2014) explained that researchers collect information from multiple sources when completing a case study and may profit from including both objective and perceptual data. Researchers using a case study design contains various sources of data to explore case details (Phillips, Kenny, Esterman, & Smith, 2014). I used semistructured interviews for collecting data to explore strategies some health care leaders use to reduce nursing turnover. Structured interviews are more likely quantitative, and semistructured interviews are commonly exploratory (Green et al., 2015). Interviews are a critical source of evidence in a case study with a majority of them containing human activities or matters (Yin, 2018). I asked permission from the interviewer to use a recording device and take notes from the open-ended questions asked during the interview. The combination of reflective journaling and interviews contain data examination through methodological triangulation (Yin, 2018). I maintained a reflective journal from notes taken throughout the interview process, noting the participant's tone of voice, and their facial expressions.

I used an interview protocol (Appendix A) to guarantee participants were asked the same questions systematically. According to Erickson (2014), interview protocols are important to guide the discussion and interaction with each participant. Upon obtaining informed consent from contributors, I conducted face-to-face semistructured interviews using the interview protocol established (Appendix A). Researchers who use the interview protocol could help guarantee the face-to-face interview is efficient. The qualitative interview process is a method researchers use to collect experiences and comprehend how participants give meaning to their experiences (Zhu & Mostafavi,

2017). The interview protocol will be followed by addressing any privacy concerns and deciding on a time, date, and location convenient for the participants. The interview protocol development and quality are a vital task in semistructured interviews and will directly affect the quality of the study (Zhu & Mostafavi, 2017). I used a handheld (iPhone 6S Plus) recording device to store data. Furthermore, I used the handheld recording device to replay interviews to transcribe and gather data with participant permission.

I provided participants with information regarding member checking procedures researchers use to confirm validity and reliability of data. Member checking will occur near the end of the research project through sharing summaries and reports with contributors to evaluate the authenticity of the work (Andraski, Chandler, Powell, Humes, & Wakefield, 2014). Upon completion of the interviews, I used the member checking strategy to ensure reliability and validity of the data collection process. During member checking, I asked the chosen members to view and comment on the study's conclusions to support the work as a precise illustration of the phenomenon (Neuman, 2014). Furthermore, member checking is the most important action a qualitative researcher can take to ensure the reliability of a study's conclusions (Neuman, 2014). I interpreted participant responses from interviews and allowed the participants to approve or correct my interpretations provided during the interview process.

Data Collection Technique

I used face-to-face semistructured interviews as the primary method to collect and capture the viewpoints of each participant. Interviews are among the most popular

method of collecting data in qualitative research (Onwuegbuzie & Byers, 2014). Upon

approval of the IRB, I interviewed participants to ask questions and reduce personal bias

to protect the participants. Neuman (2014) advised researchers to record interviews to

confirm the highest conversion of participant responses and to improve the data

examination technique. Qualitative interviews include human interface and the

participation of live human subjects, which requires complex dynamics and ethical

matters (Cairney & Denny, 2015). Documentation is an influential source for qualitative

researchers (Yin, 2018). Researchers use reflective journaling to develop critical

thinking, self-understanding, and cultural awareness (Taliaferro & Diesel, 2016).

Therefore, I documented participant tones of voice and facial expressions in a reflective

journal. Researchers use an interview protocol to set the tone, enable consistency, create

order, and assist participants to understand their rights (Castillo-Montoya, 2016). I used

an interview protocol (Appendix A) to use as a guide ensuring consistency to the research

question; I asked the participant to send an e-mail confirming receipt of informed consent

and the desire to participate in the study.

I used an open-ended semistructured interview approach. Yin (2018)

recommended open-ended interview questions to allow participants to express their views

and experiences freely. Researchers who use semistructured interviews will collect

information about how participants think, make judgments, or interpret information

(Elsawah, Guillaume, Filatova, Rook, & Jakeman, 2015). Moreover, researchers will

have flexibility with questions for participants in semistructured interviews to produce

responses within a given stem of analysis (Morse & Coulehan, 2015). In this study, face-

to-face interviews allowed for an in-depth understanding of health care leaders under this study.

I recalled the information for examination through face-to-face interviews to ensure answers were complete and seek further clarification. Researchers who use face-to-face interviews have the advantage of seeking further clarification for incomplete answers, offering detailed information regarding personal feelings and perceptions (Borron, 2013). The disadvantages of face-to-face interviews could include (a) the cost of traveling to perform interviews, (b) the participant ceasing from answering a question, and (c) the breach of privacy (Birt, Scott, Cavers, Campbell, & Walter, 2016). Upon completing the interview, the researcher will ask the chosen members to view and comment on the study's conclusions to support the work as a precise illustration of the phenomenon (Neuman, 2014). To maintain confidentiality, I stored the data in a locked container for 5 years.

I triangulated the outcome of the interviews with policies and procedure handbooks used by the health care leaders. Methodological triangulation is a method used to verify information through cross authentication from two or more sources (Joslin & Müller, 2016). The two bases of gathering data included the interviews and review of organization policies and procedure manuals. Member checking is a method of the researcher summarizing data received from a study participant to guarantee accuracy (Lee, O'Donnell, & Rogat, 2015). According to Mayoh and Onwuegbuzie (2013), member checking enables participants to validate the precision of the interpretations with participant's real-life experiences. I allowed each participant to have five calendar days to

review the data analysis. Additionally, I allowed the participants to inform me of any

findings to be inconsistent or advise me that the interpretations are true and credible.

Researchers use member checking to compare the participant s' statement during the

interview process and verify the accuracy of the interpretation (Birt et al., 2016). Member

checking and methodological triangulation increased the reliability of interpretations for

this study.

Data Organization Technique

In this qualitative case study, I established a means to protect the integrity of the

participants and maintain organization of information gathered. Data organization is a

significant characteristic of research, as it will confirm the integrity and availability of

data files (Salman et al., 2014). Researchers who use the data organization technique will

bring direction and structure to the study through management and organization of

information taken from notes, interviews, and documents (Malagon-Maldonado, 2014).

Additionally, a researcher assigning a nonspecific code to each contributor will aid to

achieve confidentiality in a study (Gibson, Benson, & Brand, 2013). Therefore, I

assigned a code to each contributor and labeled the file P1, P2, P3, and P4 to protect the

confidentiality of each contributor. According to Gibson et al. (2013), confidentiality and

informed consent will protect the rights of the contributor and minimize the risk of harm.

While completing the interview, I used a digital recorder with each contributors'

participation.

I collected and stored the information throughout the study electronically as a

password protected digital file and kept in my residence for 5 years to protect the identity

of the individuals and organization who participate in this study. Researchers recommend

keeping all information collected for 5 years after study completion in a locked cabinet

(Check et al., 2014). The storage of information included audio recordings, interview

transcriptions, and consent forms in a password encrypted computer file. I stored

documents that do not contain electronic data in a locked, fireproof safe at my residence.

Furthermore, I am the sole person with access to this locked safe. Wall & Pentz (2016)

explained researchers must make every effort possible to alleviate possible harm to

participants through safeguarding confidential data and obtaining informed consent. The

researcher is responsible for protecting the privacy and discretion of the participants

(Marshall & Rossman, 2016). I have a secured password and remain the only individual

with access to the file.

Data Analysis

I used methodological triangulation as the main method for analysis in this study.

Methodological triangulation, triangulation of sources, theory, perspective triangulation,

and analyst triangulation are four types of triangulation that researchers could use in a

study (Joslin & Müller, 2016). Additionally, methodological triangulation is gathering

information from various sources to gain a comprehensive view of the phenomenon in a

study (Cope, 2014). Methodological triangulation is fitting for use in a case study due to

the technique being helpful for presenting combined relations among data collected from

various data collection sources (Yin, 2018). To triangulate the data in this study, I used

face-to-face semistructured interviews, documentation collected in a reflective journal,

the participant's tone of voice and facial expressions, and the company documents.

Yin (2018) suggested five phases for researchers to complete a successful qualitative data study which includes compiling, dissembling, reassembling, interpreting, and concluding. In the compiling phase, I used NVivo 12 software for Windows to create a database that will organize all data. Researchers using NVivo software will ensure data organization and systemic access to retrieve and manipulate the data (Bird et al., 2016). I separated the information collected using the NVivo 12 software for Windows. Next, I took the separated information and placed in to fragments and labels. The data investigation of all information will ensure cross-referencing by using various sources (De Massis & Kotlar, 2014). Furthermore, I used the NVivo 12 software for Windows to support the reassembling process by categorizing the labels created into an arrangement of groups. In conclusion, I created narratives from the group arrangements to finalize the interpretation of the information collected.

I used methodological triangulation to improve the understanding of the phenomenon. Researchers can explore subjective experiences and circumstances surrounding a phenomenon using methodological triangulation (Gabriel, 2015). Qualitative researchers transform information into categories and themes using data analysis techniques (De Massis & Kotlar, 2014). I used methodological triangulation of sources such as face-to-face semistructured interviews, documentation collected in a reflective journal, participant's tones of voice, facial expressions, and company documents to facilitate and produce an understanding of the lived event. According to Popa and Guillermin (2015), researchers who use methodological triangulation will advance in understanding the complex nature of the phenomenon. I gained a

comprehensive understanding of the phenomenon by utilizing various data sources through methodological triangulation.

Reliability and Validity

Researchers evaluate and safeguard the quality of their research to ensure the reliability and validity of their study. Additionally, researchers assess and protect research quality with evidence to update their research (Baillie, 2015). The four characteristics researchers use in qualitative studies include (a) dependability, (b) credibility, (c) transferability, and (d) confirmability (Anney, 2015). Moreover, researchers who use qualitative research develop trust through dependability, credibility, transferability, and confirmability (Pacho, 2015). Researchers maintain reliability and validity to ensure the accuracy of the study.

Reliability

Researchers maintain dependability in qualitative research to produce reliable results. Dependability in a qualitative method is a degree of outcomes in a study that represent the opinions of participants (Bernard, 2013). Researchers who use member checking techniques confirm participant responses during the interview process to create validity and reliability (Koelsch, 2014). Additionally, researchers ensure interpretations of information are accurate from the participants using member checking (Koelsch, 2014). I used member checking to establish validity and dependability of the data collected from each participant.

I confirmed the dependability of this study with member checking that pertains to the phenomenon; described modifications that may have occurred, and how the

modifications influenced the research outcomes. Researchers refer to the data which the researcher trusts to confirm dependability (Morse, 2015). Readers will rely on the research findings and follow specific techniques researchers use to ensure dependability in a qualitative study (Marshall & Rossman, 2016). Researchers who maintain dependability within a qualitative study ensure the same conclusions from the study are attainable if they recur over time and contain comparable circumstances (Marshall & Rossman, 2016). I ensured dependability through using the same interview questions to avoid bias and searching for variations amongst contributor responses.

Validity

I collected various data from sources using semistructured interviews and my observations within the nursing industry. Researchers understand the validity of a study through the convergence of data gathered from multiple sources (Yin, 2018). Credibility, transferability, and confirmability are part of the research validation framework (Cope, 2014). Researchers use validity in qualitative research focusing on credibility and the capability to use outcomes when making decisions (Morse, 2015). As the investigator, I used credibility, transferability, confirmability, and data saturation to ensure validity in this study.

Researchers add credibility to the study with methodological triangulation (Munn, Porritt, Lockwood, Aromataris, & Pearson, 2014). Researchers who complete a thorough review of transcripts capture every characteristic of the participants' viewpoints' (Swafford, 2014). Additionally, researchers use data triangulation and data saturation procedures to support the credibility and dependability of qualitative research (Kaczynski

et al., 2014). I reinforced the credibility of this study using member checking and methodological triangulation.

The ability for a researcher to transfer research methods and their findings to additional frameworks, people, places, and times refers to transferability (Hallberg, 2013). Researchers use transferability to focus on a concept of validity, which centers on the application of results from one study to another framework (Kihn & Ihantola, 2015). Furthermore, researchers select a case study to present outcomes in an intuitive arrangement to increase transferability (Yin, 2018). I provided detailed and acceptable descriptions of important characteristics in this study enabling researchers to transfer the outcomes in this study to additional studies.

Qualitative researchers use confirmability to support their research outcomes are without bias and objective (Sallnas, 2016). Researchers, to maintain alignment and consistency with collected information, the conceptual framework, and outcomes (Eriksson, 2015), must examine results of qualitative research. Researchers use techniques such as member checking, methodological triangulation, and questions to probe the interviewee throughout the process to enhance the confirmability of the outcomes of the research study (Marshall & Rossman, 2016). I ensured confirmability using member checking, documenting procedures for checking and rechecking data during the data collection process, methodological triangulation, and through recording all personal feelings, biases, and perceptions.

Researchers can strengthen the confirmability of a case study using data saturation (Yazan, 2015). According to Yin (2018), data saturation is a vital concern

throughout qualitative case study research. I continued to interview participants involved in the study until collected data becomes repetitive and no new information emerges. Researchers obtain data saturation from participants when no new emerging themes are mentioned (Morse & Coulehan, 2015). I continued to triangulate information collected during the interviews with documentation and archival records collected until data saturation is evident.

Summary and Transition

The purpose of Section 2 was to provide comprehensive descriptions of the methodologies and strategies used in this study. I included justification of this qualitative single case study, the role of the researcher, and criteria used for participant selection. Additionally, I discussed data collection, data analysis, and methods I used to establish the reliability and validity of this study.

Section 3 will include the application of professional practice, demonstration of results, the implications for social change, and recommendations for actions and future studies.

Section 3: Application to Professional Practice and Implications for Change

Introduction

The purpose of this qualitative, single case study was to identify the strategies some health care leaders used to reduce nursing turnover. I conducted face-to-face interviews, using open-ended questions, with four health care leaders from the same health care organization in West Texas. According to the findings of this study, health care leaders were aware of the implications involved with nurse turnover. The major themes from the results were (a) leadership support, (b) job satisfaction, and (c) compensation. In Section 3, I include the presentation of findings, applications to professional practice, implications for social change, recommendations for action, recommendations for further research, reflections, and the conclusion.

Presentation of the Findings

The overarching research question was: What strategies do health care leaders use to reduce nursing turnover rates? Four participants from the same organization in the health care industry were chosen, based on their experiences as leaders in health care. Prior to the interviews, participants replied to my e-mail accepting the invitation and signed the consent form electronically. The interviews took place in their private offices where they would feel relaxed giving responses to each semistructured question. Throughout the interview process, the participants shared their opinions and insights on developing strategies to reduce nurse turnover. I used alphanumeric codes—P1, P2, P3, and P4—to identify the participants. I reviewed employee manuals to confirm and triangulate the data.

I reviewed the Herzberg two-factor theory as it related to the findings of my study. Additionally, I gained a greater understanding of the strategies health care leaders use to reduce nurse turnover rates in West Texas. All participant responses supported Herzberg's two-factor theory.

Table 1

Major Themes, Number of Participants and Frequency

Themes	Participants	Frequency
Leadership support	4	35
Job satisfaction	4	31
Compensation	4	27

Theme 1: Leadership Support

The first theme that emerged was the leadership support component the leaders used to decrease nurse turnover. All participants agreed that continuous employee support from the health care leadership team is vital to mitigating nurse turnover.

Nurses demand support from leadership to promote a positive culture through mentorship, building leader relationships with employees, and to increase staff involvement. Employees are less likely to leave their place of employment when satisfied with leadership support, compensation, and organizational decisions (Leider, Harper, Shon, Sellers, & Castrucci, 2016). The leadership style has a key role in increasing the commitment of employees, job satisfaction, and decreasing turnover intentions within an organization (Cheng, Bartram, Karimi, & Leggat, 2016). Health care leaders provide the administrative and operational support for their organization to be successful.

Employees do not leave their organization because of the requirements of the job; they leave due to the way leadership treats them (Okan & Akyuz, 2015). P2 stated that health care leaders must remain engaged with nurses by focusing on their happiness. Participant P3 stated, "Nurses do not leave their job; however, they leave their boss." Hussain et al. (2016) suggested leadership support and involvement with employees aids to the reduction of employee turnover and retention of experienced employees. P4 noted that leaders should always listen and be attentive to the needs of their employees. Participant P3 stated leaders should provide assistance to the nursing staff to get better or the help needed to be successful at their job. Participant P4 explained the importance of providing an open-door policy to nurses as a critical component to reducing nurse turnover in an organization. P1 reaffirmed the significant impact of leaders within an organization creating a positive work environment to reducing nurse turnover. Leaders could encourage employees to take ownership in their work through motivation and inspiring them (Aldatmaz, Ouimet, & Van Wesep, 2018). Moreover, some nurses have the desire for reassurance of support from their leadership teams.

All four participants agreed on the importance of relationship development and building with nurses. Leaders who build relationships with employees promotes commitment, engagement, and trust (Matthews, Carsten, Ayers, & Menachemi, 2018). Health care leaders could influence job satisfaction and reduce employee turnover with having strong relationships with nursing staff. According to Dutta and Khatri (2017), employees feel appreciated, empowered, and increase productivity when leaders focus on

building leader-employee relationships. P1 stated that relationships with nurses are a critical strategy to the reduction of nurse turnover.

Leadership support obstacle. All participants agreed on the importance of understanding the needs of their nurses. A negative leadership and employee relationship would reduce job satisfaction (Hussain & Deery, 2018). Participant 2 noted that exit surveys help in identifying reasons for employee turnover. P1 stated, "Exit surveys taken by nurses as they leave the organization provided areas to improve employee engagement." Participant 4 shared that the exit surveys provides leaders with the tools needed to enhance leadership support for their nursing staff. Gaps in leadership support increase job dissatisfaction, which affect the health and well-being of nurses (Hayward, Bungay, Wolff, & MacDonald, 2016).

Communication among health care leaders and nurses is a critical component to leadership support. P3 noted with the exit survey that nurses may depart the organization due to job dissatisfaction however nurse turnover intentions would be prevented with open communication. Moreover, participant 4 shared that feedback, good or bad, is an important aspect of leadership support to improve nurse job satisfaction. Hom, Lee, Shaw, and Hausknecht (2017) described communication as a critical component to the success of an organization. Each participant shared that communication is an effective tool for providing support from leadership. Communication plays a part in an employee's decision to remain with an organization (Baciu & Virga, 2018).

The findings indicated that health care leaders who implement the strategy of supporting their nurses are demonstrating the best practice for reducing nurse turnover.

Herzberg (1974) theorized that employees within organizations having leaders who provide ineffective management, poor working conditions, and implemented policies those employees consider useless, experience higher levels of work dissatisfaction and turnover. The leadership support theme aligned with the conceptual framework, which was Herzberg's dual factor theory. Leaders who enforce the organizational policies and procedures would enhance work performance and commitment as a direct result of employee work satisfaction (Herzberg, 1974). Leaders who increase work satisfaction would reduce employee turnover by understanding the significance of advancement opportunities in organizations (Atalic, et al., 2016). In this study, leadership support is a major theme referenced as a critical factor to mitigating nurse turnover.

Theme 2: Job Satisfaction

The second theme that emerged from the study of the participant's responses was job satisfaction that was used to decrease nurse turnover. The theme of job satisfaction derived from the participants' interview responses from the interview questions. All participants agreed that job satisfaction is a critical component to reducing nurse turnover.

All participants shared the importance of selecting the appropriate nurse to influence job satisfaction. Employees are satisfied with their work when the performance outcomes are aligned with their professional goals (Malik, Javed, & Hassan, 2017). Participant 3 and P4 noted that nurses who are appropriately matched improves job satisfaction and aids in reducing nurse turnover. Potgieter, Coetzee, and Ferreira (2018) suggested employees who have an increased level of satisfaction on the job enjoyed their

work more. Furthermore, P1 indicated, "Nurses who are satisfied with their job have extended longevity with our organization." Health care leaders who ensure successful job matching would witness reduces nurse turnover with longevity in the organization.

P2 discussed the importance to grow their own nurses. According to P2, the organization should have a strong relationship with area school districts and work with them to recruit high school students into the nursing industry. New nurses accepted and supported by their employer have increased levels of job satisfaction (Strauss et al., 2016). P4 noted the importance of growing your own nurses reinforces the organization's support for the community. Furthermore, P2 expressed that having career days, health care career fairs, and tours of their facility eased the transition from school to work. New graduates who participate in organization transition programs have smoother transitions and higher levels of job satisfaction than those who do not participate in one (Rush et al., 2015). Moreover, P3 stated, "Nursing skills are easy to learn. However, it is difficult to find nurses with the personality needed for the environment in which they work." P3 stressed the importance of looking for personalities in future nurses that are a fit for the organization would improve job satisfaction.

P4 explained the importance for nurse continuing education programs to increase job satisfaction for an organization. P3 shared that providing continuing education will provide opportunities to advance within the organization, which is a motivator for job satisfaction. Continuing education programs could improve the opportunity for employee advancement, development, and marketability (Tourangeau, Patterson, Saari, Thomson, & Cranley, 2017). P1 stated, "Nurses have the opportunity to work in a specialty unit,

emergency room, operating room, wound care, and various clinics within our organization. Continuing education opportunities allow for transfers and advancement within the organization, leading to increased job satisfaction and longevity." Advancement opportunities are critical factors to employee turnover (Nichols, Swanberg, & Bright, 2016). Moreover, Huang and Su (2016) noted that a lack in education and training could increase employee turnover rates. P2 confirmed the importance of continued education to remain current with new skills needed to complete their jobs.

Analysis of the interview data indicated that participants P1, P2, and P4 support an autonomous work environment having a positive effect on increasing job satisfaction. P4 explained that having an autonomous work environment has aided increasing job satisfaction and reduced turnover. Autonomy could increase job satisfaction leading to reduced employee turnover (Galbany-Estragues & Comas-d Argemir, 2016). P4 claimed that due to the autonomous environment, nurses were satisfied with their work and demonstrated more compassion for their patients. P3 shared that nurses were more satisfied when given freedom to make decisions in their perspective unit by leaders demonstrating trust in their staff. Employees express increased job satisfaction through support and trust demonstrated by their leadership (Hocine, Zhang, Song, & Ye, 2014). P4 expressed her team of nurses are committed to the organization when given the freedom to be involved in the decision-making process.

Job satisfaction obstacle. All participants in the study recognized that multiple factors contribute to nurse job satisfaction. Employee performance is directly influenced by job satisfaction (Kakar, Raziq, & Khan, 2015). Moreover, all participants suggested

that a factor of spousal employment influenced some employees. Factors can have a negative or positive influence on job satisfaction (Naidoo, 2018). All participants recognized by increasing the factors that influence job satisfaction, employee turnover intentions decreased.

The findings indicated that job satisfaction was a critical component in this study due to literature supporting participant responses. Each participant gave a response expanding on the importance of health care leaders using job satisfaction as a predictor to nurse turnover. Yelamanchili (2018) described the role of job satisfaction and its relation to employee's intention to remain with an organization. Furthermore, the analysis of the data collected from the participants indicated that nurses who were satisfied with their jobs remained committed to their organization.

The theme of job satisfaction and the participant's responses aligned with Herzberg's dual factor theory. Herzberg (1974) suggested leaders who want to increase job satisfaction must provide employees with the opportunity to advance within the organization. According to Atalic, Can, and Canturk (2016), leaders can immensely improve satisfaction in the work environment by understanding the significance of growth, advancement, acknowledgement, achievement, and responsibility. Moreover, leaders who limit job dissatisfaction and maximize job satisfaction would reduce employee turnover (Herzberg, 1974). Participant responses supported that job satisfaction was a strategy successful at reducing nurse turnover.

Theme 3: Compensation

The third theme that emerged from the study of the participant's responses was that increased compensation reduced nurse turnover. The theme of compensation derived from the participants' interview responses from the interview questions. All participants agreed on the importance of compensation packages to reducing nurse turnover.

All participants expressed the importance of having a competitive pay scale to reduce employee turnover. Compensation comprises all benefits given to employees for their performance in specific job duties (Dhanpat et al., 2018). P1 explained that nurses would remain with their organization when pay is competitive. According to P2, competitive compensation packages indicates organizational support for employees thus leading to a reduction in nurse turnover. According to Green (2016), fair compensation affects employee turnover at an organization.

P1 explained the various opportunities for pay and scheduling throughout the organization. P2 stated, "Nurses have the flexibility to create their own schedules by choosing the department in which they work in." P4 discussed that with various schedules in place within the organization, nurses have the opportunity to earn shift differential pay. Leaders who provide flexible schedules in their organization reduce employee turnover (Lozano, Hamplova, & Le Bourdais, 2016). P4 shared that having the option to provide nurses with flexible schedules reduced organization nurse turnover.

P3 discussed the importance for managers to be involved with their employees. P3 stated, "Offering monthly rewards to staff reduces nurse turnover." Kundu and Mor (2017) noted that organizations that reward employees for their work would reduce employee turnover. P3 and P4 individually shared that nursing performance is evaluated

and rewarded on a monthly basis. An organization could support reduced employee turnover when employees are recognized for their performance (Kundu & Mor, 2017). P2 supported that when leaders acknowledge nurse performance, nurses are inspired to remain with the organization.

Compensation obstacle. All participants in the study recognized that compensation packages were a contributing factor to nurse turnover in their organization. Additionally, all participants shared the importance of maintaining a competitive compensation plan as nurses could compare their compensation packages with competitors. Employee compensation could cause confusion and lead to increased turnover in search for greater compensation (Sitzmann & Weinhardt, 2018). P2 discussed the importance of competitive pay to maintain skilled employees to reduce organizational expenses in seeking contract labor.

P1, P2, and P3 discussed that compensation is a contributing factor to nurse turnover. Moreover, all participants explained if an organization offers competitive compensation packages, the probability of a nurse wanting to leave their job declines. Leaders use compensation as a means to reduce employee turnover within an organization (Pregnolato, Bussin, & Schlechter, 2017). On the other hand, all participants implied that compensation alone is not the determining factor why nurses leave their organization. Leaders who reward and recognize employees would positively impact employee performance (Malik et al., 2015). Nurse compensation was a critical component within this study.

The theme of compensation and the participant's responses aligned with Herzberg's dual factor theory. Herzberg (1974) theorized that compensation is a factor having a positive effect on job satisfaction. All participants shared that employees who were satisfied with their salary remained with the organization long term. Employees satisfied with their compensation is a driving force affecting employee job satisfaction (Herzberg, 1974). Motivational factors such as compensation have a positive effect on job satisfaction leading to higher performance (Smith & Shields, 2013). Participant responses supported that compensation was a successful strategy used to reduce nurse turnover.

Applications to Professional Practice

Health care leaders use data collected from research to implement the strategies they use to reduce nursing turnover in West Texas. From an organization in healthcare and business perspective, work satisfaction is significant to improving organizational performance and reducing employee turnover (Ismail, Romle, & Azmar, 2015). The focus of this qualitative single case study was to explore the strategies health care leaders use to reduce nursing turnover in West Texas. Health care leaders who acknowledge the factors that influence nurse turnover would achieve organizational success. According to Hongvichit (2015), controlling and predicting employee turnover are crucial practices to many businesses. The findings from this study could encourage health care leaders to implement the recommendations provided in this study to develop the strategies needed to reduce nurse turnover.

Health care leaders who implement strategies to reduce nurse turnover could increase the quality of patient care and reduce organizational vulnerability. Organizations with high employee turnover had increased vulnerability due to reduced capacity and efficacy (Alshanbri et al., 2015). Kumar, Jauhari, Rastogi, and Sivakumar (2018) noted job satisfaction had intense influence on productivity and quality of patient care. Based on my findings within this study, job satisfaction is a key factor to be considered by leaders in health care when developing nurse turnover strategies.

The findings in this study were helpful to health care leaders that have struggled with nurse turnover. Leaders who have used employee turnover strategies reduced the intention of employee turnover and all the associated costs (Deery & Jago, 2015). Hee and Kamaludin (2016) described that creating a useful knowledge sharing system would increase employee job satisfaction and performance, thus profitability and productivity would increase for the organization. Findings from this study indicated the strategies that health care leaders could use to implement effective practices to reduce nurse turnover.

Implications for Social Change

Health care leaders who carry the responsibility to hire employees have an important role to attracting and retaining quality talent in the health care industry (Sarker & Ashrafi, 2018). Leaders in health care who maintain successful employee turnover strategies have increased job satisfaction leading to increased patient satisfaction (Kirby, 2018). Furthermore, health care leaders who do not use successful employee turnover strategies could endanger organizational operations and have reduced employee productivity (Kirby, 2018). Health care leaders who attract quality nurses and reduce

turnover of quality nurses could improve the quality of life for nurses and patients in West Texas.

The implications for positive social change include the potential to reduce nurse turnover. Positive results of reducing nurse turnover through the implementation of effective strategies could improve the quality of patient care provided to the community. Health care personnel may provide effective and uninterrupted patient care by reducing employee turnover (Backhaus et al., 2014). Administrative leaders may notice a reduction in new employee associated costs and recruitment expenses, which may allow reallocation of health care resources within the organization (Nancarrow, 2015). The findings from this study assisted health care leaders to reduce nursing turnover, thereby increasing available staff levels to care for patients.

Recommendations for Action

My focus in this research study was to explore the strategies health care leaders use to reduce nursing turnover in West Texas. Researchers past and present have found that the ability for health care leaders to provide quality patient care and achieve long term success are directly affected by employee turnover (Dong, 2015). Health care leaders could improve the quality of patient care by implementing effective nurse turnover strategies in their organization. The date collected and shared by participant interviews might provide the insight health care leaders could use to reduce nurse turnover in organizations.

The key themes that emerged included: (a) leadership support, (b) job satisfaction, and (c) compensation. I recommend that new, existing, and future health care leaders

develop and implement leadership support, job satisfaction, and compensation strategies. Employees are less likely to leave their place of employment when satisfied with compensation, organizational decisions, and leadership support (Leider, Harper, Shon, Sellers, & Castrucci, 2016). All participants expressed the importance of leadership support, job satisfaction, and compensation as successful strategies used to reduce nurse turnover. Potgieter et al., (2018) noted that job satisfaction was a critical component to reducing employee turnover. Additionally, health care leaders use compensation strategies to reduce turnover for continued organizational success (Vidal-Salazar et al., 2016). Healthcare leaders can access this this study through the ProQuest/UMI dissertation database. Furthermore, I will disseminate the findings through a network of health care leaders, conferences, and business journals.

Recommendations for Further Research

The purpose of this qualitative single case study was to explore the strategies health care leaders use to reduce nursing turnover in West Texas. The study included information about successful nurse turnover strategies from four participants. The findings from the study are limited to the four participant's experience and knowledge in reducing nurse turnover. I relied on the data that the four participants provided as successful strategies to reduce nursing turnover that health care leaders could use to reduce nursing turnover in the health care industry. Future researchers may consider increasing the size of the targeted population incorporated with this study's findings to provide additional nursing turnover strategies that health care leaders could apply within their organization.

The selected participants were from the same health care organization and location in West Texas. Future research could include a multiple case study design expanding to other geographical locations to enhance the overview of this study's outcomes. Flick (2014) discussed the limitations of the qualitative research method as a challenge to the generalization of its conclusions. Moreover, researchers could consider future research to select eligible participants outside of the health care industry.

I recommend that a quantitative study be performed to extend the target population and to consider industries outside of the health care industry. The quantitative study is recommended for future research to determine relationship of this study's outcomes with the reduction of nursing turnover. Leadership support, job satisfaction, and compensation are strategies that could reduce employee turnover (Potgieter et al., 2018). The results from this study would provide health care leaders the importance of implementing the strategies to reduce nursing turnover.

Reflections

My decision to research nursing turnover emerged from my professional experiences working in the health care industry. I observed how turnover affected my organizations. The bad strategies used by these organizations inspired me to learn the best strategies needed to reduce nursing turnover. Although I have worked in the health care industry, my role as a researcher to conduct a qualitative single case study was to collect information without bias from prior experiences to increase the reliability and ethical standards of my outcomes. Throughout the process of reviewing literature, gathering and analyzing information, I increased my knowledge on the complexity of the nursing

industry and the impact of nurse turnover on the organization and patient care. Health care leaders will have access to the tools needed to reduce nurse turnover through the findings of this study.

When you feel like quitting, remember the reason for beginning this journey. My journey throughout the Walden University Doctor of Business Administration Program has been challenging but rewarding. I faced multiple challenges of family, a newborn, losing my job, and work commitments. I began the DBA program prepared to take on whatever came at me. I was unaware of the obstacles that I would run in to and often felt discouraged, overwhelmed, and frustrated as time passed. Each time I felt like quitting, witnessing the graduation of classmates, the support from my family, chair, and colleagues gave me the momentum to strive towards my goal. I am grateful to the Walden University family for expanding upon my knowledge and experience in the health care industry.

Conclusion

The purpose of this study was to explore the strategies health care leaders use to reduce nursing turnover in West Texas. Nurse turnover could affect the profitability and productivity of any health care organization. Organizations with increased nursing turnover suffer a loss in productivity and profitability. I completed semistructured interviews with health care leaders who provided effective strategies that reduced nurse turnover. I achieved methodological triangulation with multiple data collection methods. I identified the following key themes: (a) leadership support, (b) job satisfaction, and (c) compensation. The themes aligned with Herzberg's two-factor motivational theory of this

study. I suggest that leadership support, job satisfaction, and compensation can potentially aid health care leaders to reduce nursing turnover and improve the quality of life to citizens in West Texas through the findings from this study.

The goal of health care organizations is to increase productivity leading to an increase in organizational profitability. Among the measures identified in this study, leadership support should be addressed by health care leaders due to its correlation to nurse turnover. Health care leaders who address leadership support with their nurses can potentially reduce nurse turnover. Furthermore, health care leaders should take the steps necessary to address job satisfaction and compensation to retain experienced and quality nurses to reduce their turnover. The benefits of applying the nurse turnover strategies found in this study will promote organizational growth, which could lead to positive social change in the area to which they serve.

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Appendix A: Interview Protocol

This interview is aimed at exploring the phenomenon of strategies health care leaders use to reduce nursing turnover. Each participant will be asked the same set of questions in the same protocol outlined below:

1. Arrive approximately 5-10 minutes prior to interview time to set up recording device and prepare paperwork.

2. I will introduce myself to participants as a doctoral student at Walden University.

3. I will present a copy of the informed consent form for the participant to read and sign before any interview starting. The participant will be encouraged to ask any questions to seek any clarifications they believe necessary.

4. Once the consent form is signed, I will give a copy to the participants.

5. I will explain what will happen during the interview, remind them that I will be audio recording the entire interview and that if they become uncomfortable or choose to stop participation at any time, they may do so.

6. I will commence interview with interview instrument.

7. I will take observation notes of the participant throughout the interview.

8. I will commence the interview by asking the questions and recording answers in the same sequence as noted on the research instrument.

9. Upon completion of interview questions, ask the participant if there is anything else they feel is important for me to know or understand. Was there something that I did not ask that he/she may like to add?

10. Shut off recording device and thank the participant for their interview.

11. Remind the participant about the member checking process that will need to

occur. Explain the importance of this process to the study and thank them

again for their willingness to participate with this study.

Appendix B: Interview Questions

1. How does nurse turnover affect your organization?

2. How do you track nurses that leave your organization?

3. What common themes of the job lead to nurse turnover?

4. What are the consequences that result from nurse turnover?

5. What strategies are the most effective to reduce nurse turnover?

6. How do your nurses respond to these strategies?

7. What are some of the common characteristics of nurses who leave versus the nurses that stay?

8. How do you screen those characteristics?

9. How do you track and/or manage employee motivation, job satisfaction and dissatisfaction?

10. What information do you consider to be important for reducing nurse turnover?