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Nurses' perceptions of factors that encourage or discourage registered nurses to remain in practice in a public hospital setting.

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Abstract

As a registered nurse with over twenty years in clinical practice I was concerned at the lack of experienced nurses employed in public hospital settings. There appeared to be a stability in the workforce in terms of employment of nurses but this did not reflect the experience of the nurses employed there. Hospital settings are the predominant employment area for registered nurses. Public hospitals are usually where new graduates from nursing programmes begin their nursing experience. They require the support and mentoring of experienced nurses to guide their progression from a novice practitioner to an experienced practitioner. This exploratory pilot study was designed to determine a) what factors encouraged or discouraged registered nurses from remaining in practice in a specific public hospital setting and b) what recent changes in the work environment were perceived as positive or negative. Three focus groups were utilised consisting of experienced registered nurses with more than five years experience, new graduate nurses of less than twelve months experience, and Maori registered nurses. The use of focus group interviews allowed the researcher to gain knowledge of the participants' attitudes, values and perceptions of the particular topic in a non threatening environment. Krueger (1988) and Morgan (1988) identified characteristics of a focus group as being people who possess certain characteristics and who provide data of a qualitative nature in a focused discussion. Questions concerning participants' perceptions of changes over the last twelve months and factors enhancing or reducing job satisfaction and morale were used to initiate discussion. These were followed up by questions to elicit more specific information. Common themes and ideas were identified from each group and summarised by the groups at the end of the interview. The cut and paste method was used to collate the data for analysis. Results of the study indicate that all three groups were encouraged by job security, professional development, and professional autonomy while discouraged by internal politics, external politics and political correctness. All of these factors contributed overall to the theme of job satisfaction. Communication was an underlining problem for all three groups. Recommendations resulting from the findings of this study

include: orientation and professional development programmes; adequate resources in terms of equipment and staff skill mix; and clearly defined lines of communication.

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Table of Contents

| | |
|---|-----------|
| Abstract | i |
| Acknowledgements | iii |
| Table of Contents | iv |
| List of Tables | vii |
| Glossary | viii-xi |
| | |
| Chapter 1: Introduction | 1 |
| Background | 1 |
| Kawa Whakaruruhau (Cultural Safety) | 4 |
| Recent Developments | 5 |
| Researchers interest in the subject | 7 |
| Research design | 7 |
| Organisation of the Thesis | 9 |
| | |
| Chapter 2: Background Literature | 11 |
| New Zealand | 11 |
| Kawa Whakaruruhau | 16 |
| International | 16 |
| Gaps in the Literature | 20 |
| Conclusion | 20 |
| | |
| Chapter 3: Research Method | 22 |
| Part One: Focus Group Method | 22 |
| Historical Background | 22 |
| Definition | 23 |
| Method | 24 |
| Validity and Reliability | 24 |
| Strengths and Weaknesses | 26 |
| Design Issues | 27 |

| | | |
|--|---|----|
| | Data Recording | 31 |
| | Data Analysis | 32 |
| | Comparison with other methods | 33 |
| | Conclusion | 34 |
| Part Two: The Study | | 34 |
| | Selected Approach | 36 |
| | Selection of Participants | 36 |
| | Group Size | 37 |
| | Group Homogeneity | 37 |
| | Ethical considerations | 38 |
| | Running the Group | 39 |
| | Ground rules | 40 |
| | Role of Moderator | 40 |
| | Data Recording and Transcriptions | 41 |
| | Data Analysis | 42 |
| | Reporting the Data | 45 |
| | Conclusion | 45 |
| Chapter 4: New Graduates | | 47 |
| | Summary | 56 |
| Chapter 5: Experienced Nurses | | 58 |
| | Summary | 66 |
| Chapter 6: Maori Nurses | | 68 |
| | Summary | 74 |
| Chapter 7: Encouraging and Discouraging Factors | | 77 |
| | Encouraging Factors | 78 |
| | Job Security | 79 |
| | Professional Development | 81 |
| | Professional Autonomy | 83 |

| | | |
|-------------------|--|------------|
| | Discouraging Factors | 86 |
| | Internal Politics | 88 |
| | External Politics | 91 |
| | Political Correctness | 95 |
| | Conclusion | 97 |
| Chapter 8: | Return to the Literature | 98 |
| | Job Satisfaction | 98 |
| | Job Security | 100 |
| | Professional Development | 101 |
| | Professional Autonomy | 103 |
| | Internal Politics | 105 |
| | External Politics | 107 |
| | Political Correctness | 109 |
| | Summary | 109 |
| Chapter 9: | Conclusions and Recommendations | 110 |
| | Strengths and Limitations of study. | 110 |
| | Job Satisfaction | 113 |
| | Job Security | 113 |
| | Professional Development | 114 |
| | Professional Autonomy | 114 |
| | Internal Politics | 115 |
| | External Politics | 116 |
| | Political Correctness | 116 |
| | Changes during the study | 117 |
| References | | 119 |
| Appendices | | 130 |
| | Appendix 1: Information Sheet | 131 |
| | Appendix II: Letter of Invitation | 133 |
| | Appendix III: Consent Form | 134 |
| | Appendix IV: Prioritised Factors from focus groups | 135-140 |

List of Tables

| | | |
|------------|--|----|
| Table 3.1: | Number of factors per question per group | 44 |
| Table 7.1: | Encouraging Factors | 79 |
| Table 7.2: | Discouraging Factors | 87 |

Glossary

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| Aroha | A Maori word meaning love and support |
| Code of Rights | Ten rights of consumers and duties of the providers set out in Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulation 1996 see Reference list |
| Crown Company Advisory Unit (CCMAU) | Unit responsible for monitoring and advising shareholding government Ministers on State Owned companies including Crown Health Enterprises(public hospitals). |
| Cultural Safety (Kawa Whakaruruhau) | Cultural Safety gives power to the patient and or families to define the quality of service on subjective as well as clinical levels (Nursing Council of New Zealand, 1996, p9). |
| Debriefing | An opportunity for people involved in a difficult or unusual incident to recount what happened and to determine changes in dealing with similar situations in future. |
| Enrolled Nurse | A nurse who had twelve to eighteen months theoretical and clinical training, as well as basic nursing skills such as hygiene cares, taking basic observations and doing dressings. Second level nurse. |
| Fixed Contract | A contract that has been negotiated for a set period of time. |
| Incident Forms | A document used to notify other areas in the hospital of a problem that has occurred and may require further action from other departments such as Occupational Safety and Health or Infection Control. |

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| Inservice/s | Lectures on nursing topics or practical demonstrations of nursing skills and techniques pertinent to the hospital or ward. |
| Iwi | Tribe a person or family originated from. <i>Hapu</i> - a group of whanau with common ancestral links or sub-tribe; <i>whanau</i> -relationships that have blood links to a common ancestor, or a family. |
| Kawa Whakaruruhau (Cultural Safety) | Cultural Safety gives power to the patient and or families to define the quality of service on subjective as well as clinical levels (Nursing Council of New Zealand, 1996, p9). |
| New Graduate Programme | A programme provided by the hospital, utilised in this study which assists the transition from student nurse to beginning practitioner (registered nurse). The programme consists of an orientation to a ward with combined theoretical and practical sessions. The programme can be twelve months in duration and have two six month periods in different wards such as medical and surgical. |
| Nurse Consultant Group | A group of senior nurses at management level in the organisation who provide clinical expertise to the ward nurses. They also provide nursing advice to higher management who have or may not have nursing experience. |
| Patient Loading System | Patients are awarded a number between one and five depending on the amount of nursing required by the patient per shift. The patient requiring the greater nursing care may have a loading number of five while the patient with the least nursing care may have a patient loading number of one. The loading number of one to five is a subjective assessment in relation to the nursing |

experience of the nurse allocated to the patient on the shift. Fifteen is the maximum loading number allocated to a nurse per shift. When all nurses on a shift have a patient loading of fifteen then the ward is said to have the required maximum match of nurses to patients for that shift. Any further admissions to the ward would require an increase in nursing staff for that shift.

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| Political Correctness | A term identified by Hopton (1995) as being used in the 1960s and 1970s as a tongue in cheek way in which people on the political left developed a political conscience. In the 1990s Molyneux (1993) described the term as being used by the right wing academics, politicians and ideologists as a derogatory term for moral and ethical principles which do not coincide with ones own values. |
| Professional Development Programme | A professional portfolio which demonstrates a nurse's level at which he/she practices, extra responsibilities undertaken and other types of involvement in the organisation or sector (e.g. conference attendance, or study days). |
| Registered Nurse | First level nurse who has at least three years combined theoretical and clinical training. The training was in a hospital setting: Registered General Obstetric Nurse (RGON). Currently in a Polytechnic or other tertiary training institute: Registered Comprehensive Nurse, (RCompN). |
| Tangata Whenua (Maori) | People of the land; Maori people who have ties and connections to the land specific to New Zealand. |
| Trade Union | In this study refers to the New Zealand Nurses Organisation (NZNO) both the professional and industrial sections. |

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| Treaty of Waitangi | An agreement made between representatives of Great Britain and representatives of the Maori tribes in 1840 and signed in New Zealand. |
| Treaty of Waitangi Workshops | A series of study days organised to give staff members a background to the Treaty of Waitangi and how this relates to the delivery of health in the organisation. |
| Unsafe Staffing Forms | A document used to notify other areas in the hospital utilised in this study and Union of a problem that has occurred and may require further action. |
| Whanau (Maori) | Relationships that have blood links to a common ancestor, or a family. |
| Whakapapa (Maori) | Origins ; genealogy; where a person comes from and all the associated background information that makes them; their blood links to a common ancestor or a family; their Iwi, Hapu and Whanau. |