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Abstract

Nurses are found to be a crucial element of healthcare and comprise the largest portion of the healthcare profession (Ulrich et al., 2019). In society, the profession of nursing is entrusted to offer competent and safe care to those sick, injured, and at-risk populations. Through the integration of transformational leadership, the staff nurse can potentially influence the organizational commitment as well as the work environment. When a positive relationship is developed between nurses and leadership, it can result in higher retention rates of nurses and improved satisfaction among patients.

Framed within the Plan, Do, Study, and Act model, the main goal of this change improvement project was to design an educational program that involved didactic and competencies on transformational leadership for unit senior nurses. For the project, a team approach was involving different nurse educators and a quality initiative team of the healthcare organization. Competencies related to transformational leadership in nursing practices were an essential part of this educational program. The educational program entailed the significance and management of transformational leadership associated with the motivation, power, and characteristics of the transformational leader.

The evaluation of the educational program was conducted by four nurse educators with the help of 12 items yes or no tool for each of the criteria. One of the nurse educators answered no for the learning objective section and following this revision, the design of the program was re-evaluated. A recommendation was made by one nurse educator to change the evaluation format for the identification of the leadership style portion of the program. This project possesses significant implications for social change as senior nurses struggle to act on best leadership practices, thus positively influencing the well-being as well as the satisfaction of fellow nurses and patients.

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Integration of Change Project of Transformational Leadership to Improve Nurse Retention Rates

Chapter 1 - Introduction

Background of Problem

Nurses are found to be a crucial element of healthcare and comprise the largest portion of the healthcare profession (Ulrich et al., 2019). In society, the profession of nursing is entrusted to offer competent and safe care to those sick, injured, and at-risk populations. In accordance with the report of the World Health Organisation, approximately 29 million nurses are present across the world, with 3.9 million nurses present in the United States (Chadha & Mishra, 2022). As stated by The American Nurses Association (ANA), higher levels of registered nurses are required through the year 2022 as compared to any of the other professions in the United States (Haddad et al., 2022).

In the healthcare setting, appropriate staffing levels of registered nurses with adequate skills, expertise, and knowledge are required for the optimization of positive health care outcomes among patients (Ganann et al., 2019). Professional nurses are found to be primary caregivers in healthcare organizations. In the year 2014, registered nurses were estimated to be only 61% of the 2.8 million jobs in private and public hospitals in the United States of America (Bakhamis et al., 2019). Experienced nurses are among the first healthcare professionals to determine any change in the health condition of patients and implement different interventions to prevent further decline or worse outcomes (Drennan & Ross, 2019). It has been revealed that professional nurses, with a minimum of 20 years of work experience, have the required expertise and skills, involving effective communication skills, critical thinking as well as leadership capabilities (Song & McCreary, 2020).

An increased level of hospitalizations, involving an aging population as well as a high prevalence of diseases, elevates the urgency to retain skilled and experienced nurses in order to maintain safe ratios of nurses and patients (Gray Miceli et al., 2021). When years of working experience are combined with appropriate nursing education, it leads to expert nurses in the clinical settings that are needed for an intuitive understanding of patient care and related treatment procedures (Aasen et al., 2022). The nursing research of Benner modified Dreyfuss's skill acquisition theory in order to demonstrate how novice nursing professionals progress across five levels of skill proficiency. Each level is associated with more confidence, knowledge, and relevant skills required for an expert nurse (Murray, Sundin, & Cope, 2019). In a healthcare setting, fewer number of experienced nurses providing care and support to sick patients leads to the development of job stress, resulting in burnout, incivility, and compassion fatigue among the nurses in the workplace (Needleman et al., 2020). The presence of tension and incivility results in the establishment of aggressive behaviors and interprofessional bullying among nurses, which is commonly referred to as lateral or horizontal violence (Malikeh et al., 2020). In addition, it has been revealed that the presence of distinct generations of registered nurses collaborating together leads to workplace conflicts in the context of expectations of work, communication, skill set, and acknowledgment of modern technology (Tie et al., 2019). Moreover, when temporary and part-time nurses are recruited in the clinical setting to complete the workforce, it results in dissatisfaction among workers, increases additional cost in healthcare, and establish conflicts between temporary and permanent nursing professionals (Senek et al., 2020).

An elevation in the attrition rates of new graduate nurses leads to a shortage of nurses when these new ones in the nursing profession leave the workforce during the initial years of their profession (Graf et al., 2020). In 2016, a nurse with a minimum of one of experience was recruited for half of

the nurse turnover in the United States (Guo et al., 2019). Newly graduated nurses do not continue their jobs in the clinical setting sufficient enough for accomplishing the required relevant nursing and critical thinking skills. Recent findings reveal that approximately 30% of new nurses leave their profession during the initial years of employment, resulting in 70% of nurse retention in the clinical workforce (Favaro, Wong, & Oudshoorn, 2021). A wide range of elements is present influencing the appropriate staffing levels of nurses in the healthcare organization and impacting patient health outcomes. Therefore, research is required to determine different strategies for improving the retention rates of experienced nurses in healthcare. A research study is required to determine an improvement plan that carefully addresses all the problems related to nursing retention and improves it significantly.

In order to retain staff nurses, it is important for senior nurses to understand leadership strategies. Due to a number of healthcare challenges, new strategies of leadership are required for achieving organizational goals (Efendi et al., 2019). Traditional management practices, involving inappropriate management of complicated situations, ineffective interpersonal skills, and not encouraging strategic alliances, are found to be quite harmful in the present era (Shaturaev et al., 2022). The use of proper leadership is essential for the success of the healthcare organization. The shortage of nurses and increased turnover rates is a complex issue globally. In order to manage this complication, senior nurse managers should assess and evaluate the turnover rates of nurses and formulate, integrate and monitor retention rates (Chan et al., 2019). As the situation is complex, no one strategy will solve high nursing turnover rates and therefore, a number of strategies are required together for better effects (Marcé et al., 2019). Chegini et al. (2019) revealed that management should work on determining why nurses quit organizations and identify what attracts and retains them. Strategies for possible recruitment and retention that should be

considered by organizations are pay levels, management style, and promotional opportunities. Leadership in nursing should adopt new strategies for improving retention rates in healthcare.

Statement of the Problem

The major problem is that experienced and highly qualified nurses are leaving the profession of nursing before attaining the age for retirement eligibility due to different factors, involving the aging population, retirement, burn-out, decreased job satisfaction, lack of educational resources, increase in travel nurses. Due to these challenges, the decisions of nursing professionals for early retirement increase while decreasing the number of experienced nurses within the healthcare workforce for delivering competent and safe patient care (Anderson et al., 2021). A reduction in experienced nurses negatively influences the vulnerable and sick population in clinical settings. Patients as well as hospital administrators depend on qualified nurses and their skills of critical thinking and assessment for optimizing patient outcomes (Tamata et al., 2021). One of the major business problems is that senior nurse managers lack effective leadership skills and strategies to successfully manage the retention of staff nurses in hospitals.

Social Significance of Nursing Retention

An increasing shortage of nurses has become a global challenge that is adversely affecting the health care sector, in this regard devising an appropriate nurse retention strategy has become a necessity (Nurdiana et al., 2019). With an increased nurse turnover rate as per the WHO from the healthcare institutions, the healthcare sector is facing a challenging time. The emerging issues about health concerns in the area have shed light on general care (Efendi et al., 2019). An efficient and skilled volume of the workforce is essential in order to achieve global healthcare equitability (Collard et al., 2020). Quality of meeting universally defined epidemiological challenges and a change in the healthcare demands requires plenty of healthcare workforce who are experts in their

work. The critical necessity of nurses and the social workforce is subject to rising by the year 2030, as per the reports of the World Health Organization (WHO) (Putra et al., 2020). Further illustrated by the projections of WHO, the shortage of nurses can be tackled with the employment of 40 million nurses. As to Hurriyat & Nurdiana, highly educated nurses aid the largest workforce in the health care sector in many countries (Hariyati & Nurdiana, 2018). High-quality healthcare is the result of professional nurses contributing to this sector as their populace is about half of the global workforce in the healthcare sector. WHO reported, that there was a noticeable shortage of around 9 million nurses in the healthcare sector in the year 2014 (Tee & Scammell, 2018). An addition of 40 million new staff for nursing still would disclose a shortage of 7.6 million nurses in the year 2030 as projected by WHO (Armstrong et al., 2017). A similar situation of shortages of nurses is being analyzed by WHO in some parts of Asia and Africa (Jackson, 2020). Reportedly in the year 2018 (WHO), a population of around 21 million nurses existed across the world (Dewanto, 2018). Despite the difficulties imposed by financial crises all across the countries in the year 2008, the world saw a rising growth in nurses (Hill et al., 2020). The distribution of nurses varies from small to bigger countries, with 3 million nurses in large countries like China, India, and the US, while around 5000 nurses are in less populated countries like Jamaica, Iceland, and Guinea (Zhang, 2017). Many countries still lack the appropriate data about the types, trends, and distribution of nurses and other medical professionals, as per the research by WHO. Consideration is given to the dire need for nurses in light of healthcare difficulties in the system, the growth of the population, the economy's capacity, and other requirements of healthcare professionals (Kline, 2018). The prevailing issues impact the nature of the distribution of nurses across the world. Additionally, a successful system for distributing nurses shows a strong relationship with the right organization in the healthcare industry. Therefore, leadership in the healthcare industry reveals the distribution of

nurses by having an effect on nurse retention (Colwell, 2019). The issue of nurse retention is also a factor in the criteria designed to provide a remedy for the problem associated with the lack of nurses in the healthcare workforce. Several factors are critical when addressing the problem of workforce shortages worldwide (Razak et al., 2018). The female gender is the most prominent when it comes to the nursing population as around 90% of nurses are women (Razak et al., 2018). The population of men as nursing professionals is less than 10%, despite various campaigns for the inclusion of men in this profession; the stats remain low in the regions such as the U.S. Moreover, the amount nurses earn is way less than the earnings of other working populations (Brooks, 2017). As per pieces of evidence available, it is reported that female nurses make fewer wages than male nurses on an average basis (Razak et al., 2018). Nurses from the minority sector earn way less compared to the majority society in a country (Phillips et al., 2017). Despite substantial efforts by international policies in primary healthcare (P.H.C.) strengthening, the third element shows that the majority of nurses manage to find employment in hospital settings. Last but not least, although the majority of nurses work as salaried employees, in other nations they are independent, self-employed professionals (Trotman, 2018). The nursing unit has an impact on workforce stability in the healthcare industry. The unchanging nursing system shows a favorable effect if considering the evidence available that nurses make up the majority of the healthcare workforce (Brinegar, 2017). Therefore, finding a solution to the healthcare problems associated with a lack of nurses is of utmost importance in the medical field. The situation of nursing shortages in healthcare is made worse by the use of efficient procedures coupled with nurse retention methods (Pelletier, 2019). Apart from that, Due to the increased social need for nurse retention, efficiency in the healthcare workforce increases efficacy and encourages the appropriate healthcare delivery technique (Nantsupawat et al., 2017). In order to improve nurse retention in

the healthcare environment, the seminar paper aims to pinpoint the causes of high rates of nurse turnover and offer strategies, and achieve the perfect solution to this problem.

Data was collected and compared in 4 countries including Australia, the U.S., New Zealand, and Canada to measure the cost of turnover rates of nurses (Edwards et al., 2021). The results were set in U.S. dollars and as a result, Australia reported a turnover cost of \$4879 (Jackson et al., 2020). The high rates were due to an increased rate of dismissal (constituted 50% of the indirect costs) and temporary substitutions (comprised 90% of the direct costs). As for the other countries, the turnover cost reached \$20561(U.S.), \$26652 (Canada), and 23711 (New Zealand) correspondingly. As for the percentage the countries achieved the representation as follows: 44.3% in New Zealand, 26.8% in the U.S., 19.9% in Canada, and 15.1% in Australia. The study concluded on the results that the turnover cost was significantly proportionate to the criteria of temporary replacement which surged the necessity of retention of nurses (Zhang et al., 2017).

Personal Significance of Nursing Retention

Leadership style and strategy are significant in healthcare facilities as this can potentially influence the retention of nursing staff as well as overall patient care. As stated by American Nurses Association (ANA), a nurse leader is considered to be a healthcare professional who possesses a passion to excel in health care through the implementation of leadership principles and skills (American Nurses Association, 2009). The leadership and management skills of nurse leaders are required for shaping positive cultures in facilities. The effectiveness of leadership skills will directly influence how nurses manage and provide care and support to their patients (Robbins & Davidhizar, 2020). If senior nurses have successfully developed a culture of open communication, respect, and dignity within their team, a solid foundation will be eventually established, leading to

the success of the healthcare facility (Al Dossary et al., 2017). A proper and effective leadership style helps the staff nurses to be better prepared for putting patient care and safety at the forefront.

Moreover, staff nurses play a pivotal and paramount role in facilitating the accomplishment of hospital values, missions, and goals in procedures of the work routine. Effective leadership style can result in enhancing these outcomes with the help of staff nurses leading the transition (Paterson et al., 2010). During routine clinical practice, senior nurses are involved in a wide range of leadership activities that some of them will naturally develop a better leadership style and offer improved leadership roles, while others might find the concept of leadership complicated to understand or they do not see themselves competent (Bianchi et al., 2018). Rational thinking as well as exceptional communication qualities should be possessed by senior nurses which are normally measured by their influential ability to attain health care goals (Ndawo et al., 2021).

Furthermore, leadership is very critical for providing quality care to patients and facilitating positive staff development in healthcare facilities (Alzahrani et al., 2019). In accordance with the literature, nurses should have the ability to work under pressure and take prompt actions to manage complicated situations. In addition, they must be taught and learned in the work environment. Nonetheless, leaders should present emotional intelligence for managing their own as well as other feelings (Marufu et al., 2021). Additionally, they must possess a transformational role to influence the performance of their own and others. All these qualities of nurse leaders will eventually help the healthcare facilities to attract and retain the staff nurses successfully, leading to success and better patient outcomes (Berridge et al., 2020).

Conclusion

The senior nurses are present in a position where they can establish an atmosphere to improve the primary quality measures, such as elevating patient satisfaction, reducing patient stay, and

enhancing nursing retention. However, the process of nursing leadership is found to be quite complex and includes a number of variables that should be significantly adopted by leader nurses to retain the workforce of experienced and qualified nurses for the betterment and success of the healthcare organization.

Chapter 2: Literature Review

Literature Search Strategy

The literature search method made use of several different search engines, including Google Scholar, CINAHL, Education, a Sage full-text database, ProQuest Dissertations and Theses, and PUBMED, which also includes Medline and Psych INFO. Approximately, a total of 50 research articles were reviewed, and included 20 research studies in this literature review. The conclusion of the literature review was reached in the spring.

Challenge of Poor Nursing Retention

WHO (World Health Organization) is an internationally recognized United Nations Organization that is accountable for maintaining public health standards around the globe and performing various surveys in order to keep a check on health standards. In a recent survey WHO reported the shortage of nurses globally whereas the requirement ratio of nurses is increasing rapidly. In addition to the rapid demand for nurses, there is a very small proportion of people willing to study nursing as a profession, due to which there is no group of young nurses left, hence the aging factor of nurses is creating mishaps in the health care sector (Son et al., 2019; Farokhzadian et al., 2018; Oulton et al., 2016).

The American Association of Nursing Colleges (AACN) surveyed in 2016-2017 and found that due to a shortfall of nursing teachers, a confined number of students were permitted to register themselves in the nursing training programs. Two-thirds of the medical nursing colleges were unable to enroll excellent minds in their programs due to a shortage of teaching faculty. Due to the absence of teaching faculty, the standard and quality of education and deliverance were badly affected (Abdelsalam & Mohamed, 2016; El Desoky et al., 2021)

In the past few years, hundreds of nurses had relocated from underdeveloped countries to developed ones. 50% of WHO members have affirmed that among a ratio of thousands, only 3 nurses and assistant nurses are working while 25% affirms that less than 1% of staff is working in a crowd of 1000 people. It has been said that this tragic condition could worsen if the higher authorities would not seriously act on it (McDermid et al., 2020). According to the Organization for Economic Cooperation and Development (OECD), even the largest countries of the world such as the United Kingdom, Australia, and Canada are facing inconveniences due to the unavailability of the nursing staff and medical care takers over the past few years (World Health Organization, 2018). It has been forecasted that the deficiency of nursing and medical staff is expected to rise by the 2030s. This famine of nurses is not only going to impact the healthcare areas but the educational areas as well (Charlesworth, & Johnson, 2018). Educated nurses are capable of lowering mortality rates and bringing patients back to life. Educated and highly qualified nurses are an asset to a country hence it is really important to work on their diminishing rate (Juraschek et al., 2012). Prominent changes in the health care sectors have been noticed due to the shortage of nurses which is leaving a negative impression on the health care sectors (Halcomb et al., 2020). Nature fluctuations around the globe have left an incredible influence on the ratio of nursing retention, such as the Covid-19 pandemic. Covid-19 was a natural and global pandemic that affected more than half of the world's population which included skilled workers, doctors, medical care takers, and nurses as well as led to the turnover of many medical workers and nurses (Putra et al., 2020). The staff attrition of nurses has affected the concerns of safety and quality world widely because the number of qualified and experienced staff is responsible for the best handling and treatment of patients, however, the health care organizations are responsible to appoint educated and experienced nursing staff (Zhang et al., 2017). Prevention of nursing turnover is equivalent to the

standards of care taking measures of patients because the increment in the number of professional and trained nursing staff can professionally handle the patient's conditions and can maintain the health standards of the people according to WHO (Trotman, 2018). This shortage of nurses will affect individuals around the globe, as there will be very few nurses that would be given charge of taking care of public health across the world (Zhang et al., 2017). Various reasons and problems for the nurse's turnover were noted, on which the higher authorities worked to minimize the ratio. The reasons which lead to nursing retentions were extracted and alleviated (Pelletier et al., 2019). The reasons that provoked retention cases were down sloped to build up a convincing work environment for the nurses because a convincing work environment could empower and encourage nurses to stay (Nurdiana et al., 2019). The nursing leadership and management hold vacant spaces for efficient and progressive work in different areas and positions, but there is a definite need of rearranging the rules and policies of leadership in various areas of health care and introduce some measures while keeping in mind the necessities of nursing staff (Brinegar, 2017). The approaches and measures that leadership and nurse management adopt, need to be amended to boost productivity and amenity for creating a comforting and convenient environment for the nursing staff. In the hospitals and medical centers of the U.S, the nurses and staff turnover ratio was about 14.2% to 19.1% which included operational nurses as well (Putra et al., 2020). Almost 57 major countries of the world have rendered similar obstacles and hindrances faced by the nursing staff leading to a turnover. The nursing turnover ratio in 2020 was about 44 % in the European countries and approx. 12% in England (Senek et al., 2020). The nurses and medical care takers of Canada crossed a ratio of about 17% in 2016 (Putra et al., 2020). Even the highly progressive countries of the world faced a nursing staff turnover of about 25%. Accordingly, the nursing staff turnover ratio lies in a range between medium to high all over the world (Armstrong et al., 2017). Therefore,

health care organizations around the world are developing effective strategies and measures by spending money on the work environment and amenities of the nurses to lower the rate of staff turnover all over the world. (Brooks, 2017).

While the world was already tackling the barriers to the retention of nurses, the Covid-19 pandemic was declared a global pandemic and caused further exacerbation of the issue (Maben et al., 2022). Nurses who makeup 59% of the workforce in healthcare institutions all over the world, and played a key role in combating the crises, were afflicted with additional pressure, due to the shortage of nurses, globally (Stawicki et al., 2020). The nurses are not only encountering physical challenges but are also faced with emotional and psychological hurdles 3 in addition to the heavy workload (Spoorthy et al., 2020). This is because the Covid-19 pandemic was responsible for severe disease progression among the patients and hence, the nurses were at the highest risk of themselves contracting the virus (Abbas et al., 2021; Irawan et al., 2020).

The high turnover rates among the nurses did not just come out of a vacuum and have persisted in healthcare institutions for a while now; however, the issue has been deprived of its due attention. The issue has only emerged on the surface as a result of the pandemic which exposed major discrepancies in the healthcare systems all over the world including the extra workload and inadequate staffing which is correlated with the decreased quality of care to the patients. While according to Straw et al. (2018), the construct of the turnover intention is initiated with psychological responses to the negative elements of the current job, which further quadruples and prompts an individual into quitting. Although, the process of nurses leaving their jobs is itself a loss to the profession and a serious issue the sharp incline in the turnover rate among the nurses has resulted in causing a substantial financial burden on the healthcare institutions such as hiring

candidates, training the nurses, etc. and has become an issue of major concern for the healthcare systems worldwide.

Extensive research has been conducted on the subject to narrow down the factors that have contributed to increasing the rate of turnover of nurses and the findings have indicated that there is a number of factors including interpersonal, organization, and psychological factors that have contributed to and have prompted nurses into leaving the job.

Psychological Factors

During the Covid-19 pandemic, multiple psychological factors were found to be associated with the intention of turnover among the nurses while among them, the fear and threat of getting infected with the virus was one of the primary factors (De los Santos & Labrague, 2021). Other than the fear of getting infected, multiple psychological symptoms such as fatigue, burnout, exhaustion, and even PTSD symptoms were one of the fundamental reasons which negatively impacted their resilience and in turn provoked the nurses into leaving their field. The existential threats experienced by the nurses during the pandemic, along with the risk of death from the infection is an important predictor of the nurses' intention in quitting. The threat and the fear due to the pandemic have also been witnessed previously during the Middle East respiratory syndrome (MERS) epidemic, which was the primary element in causing havoc in the healthcare system (Khattak et al., 2021).

Burnout

Burnout among nurses has also been one of the factors affecting nurses all over the world. This is indicated through the staggering statistics globally, according to which more than half of the nurses experience burnout during their job within the healthcare settings with the likelihood of causing personal consequences along with job dysfunction all while causing a risk of decreased quality of

care to the patients (Kelly et al., 2021). Burnout generally is characterized by three symptoms of exhaustion, depersonalization, and decreased personal accomplishment (Maslach & Leiter, 2016) and hence, has been one of the contributing factors to the nurse's increasing turnover. Even if the nurses fight through and do not quit their jobs, they become exhausted performing their jobs and are unable to deliver the best quality care to the patients while the chances of recovery are none to minimal.

Compassion Fatigue

Other than burnout, a nurse working in healthcare institutions also suffers from a phenomenon termed compassion fatigue. The phenomenon of compassion fatigue is caused due to the prolonged exposure of the healthcare professional to the stress as a result of being in contact with the patient for a long duration and has been characterized by different healthcare professionals; however, has been largely prevalent among the nurses. Other than contributing to the turnover rate of the nurses, the phenomenon is also responsible for causing physical, social, and psychological distress among the nurses while they are also susceptible to experiencing burnout, grief, depression, confusion, and insomnia (Yang & Kim, 2016). Other than impacting nurses, the phenomenon also has detrimental effects on patient outcomes due to the nurses being at a high risk of making poor healthcare decisions and incorrect assessments.

While the studies conducted on the impact of the burnout and workload on the nursing staff itself have multiple implications. Other than providing decreased quality of care to the patients and making the incorrect assessment, nursing burnout is also responsible for causing medication errors in healthcare while the nurses experiencing fatigue are more likely to take sick leaves from their jobs as a result of exhaustion or due to in musculoskeletal injuries (Möller & Magalhães, 2015).

Anxiety, Depression and PTSD

The arrival of the Covid-19 pandemic had detrimental consequences as the chaos integrated into the healthcare systems and the healthcare workers were afflicted with mental health issues such as depression, stress, and anxiety. Nurses like other healthcare professionals were also faced with such psychological issues, necessitating the healthcare institutions to take measures for the perseverance of the mental health of the nurses and provide psychological support to them. This could not be done by training the nursing staff, enabling them in developing coping mechanisms, and enhancing their ability to regulate emotions. The continuous strains of the disease further contributed to the deterioration of the mental health condition among nurses and proved to be the causative factor of depression, anxiety, and inadequate sleep. While nurses dealing with Covid-19 patients directly, are reported to be struggling with post-traumatic stress disorder (PTSD) due to decreased job satisfaction and thereby causing an increase in the organizational turnover (Huang et al., 2020; Labrague & de Los Santos, 2021).

Organisational Factors

Among the factors responsible for causing an increase in nurse turnover, organizational factors also exist. The likelihood of such factors causing lower morale and decreased job satisfaction is also significantly high.

Increased working hours

The heavy workload burden on the nursing staff causes an increase in the working hours of the nurses which drains them both emotionally and physically and leaves them unable to cope with the demand which, consequently, increases the rate of turnover among the nurses. Furthermore, the research has also indicated that the excessive workload on the nurses is associated with negative patient outcomes, including patient complaints and dissatisfaction among them causing

violence (Casey, 2019). As extra working hours place the responsibility of heavy workload on the nurses, they are coerced into handling work beyond their capacity. This contributes to a higher number of tasks being undone by the nurses and leads to patients' complaints, while in escalated situations, being unable to deliver effective care results in frustrated and anxious patients who turn violent towards the nurses (Labrague et al., 2020; Park et al., 2019; Nurdiana et al., 2019).

Poor Work Environment

Several studies have indicated that healthcare facilities with a positive work environment along with adequate staffing of the nurses created improved outcomes both for the patients as well as for the nursing staff (White et al., 2020). This leads to increased job satisfaction among the nurse workforce while a poor work environment causes an unbalanced workforce with decreased job satisfaction among the employees as well as negative effects on the job outcomes such as low job satisfaction, high turnover, and decrease quality of care delivered to the patients (Adams et al., 2019). The poor working conditions in the healthcare institutions particularly in the nursing workforce involves lower autonomy over their job and decreased participation in the decision-making process are some of the features of a poor work environment while the shortage of the nursing staff, inadequate resources to deliver care such as during the pandemic when the healthcare staff were not provided with essential personal protective equipment and were left to deal with the influx of the patient on their own (Shamsi & Peyravi, 2020; Khan et al., 2019). Furthermore, the lack of support from the leadership with increased physical and emotional work demand led to a decreased job satisfaction among the employees.

Inadequate pay

Excessive workload, and poor working conditions, are all factors contributing to increasing the turnover of the nurse. Similarly, the inadequate wage is also one of the reasons behind nurses

seeking jobs at other organizations (Labrague et al., 2020; Shamsi & Peyravi, 2020). According to the studies, a satisfactory wage among the nurses can play a significant role in decreasing the intention of turnover among the nurses which can result in nurse retention.

Nursing Retention Factors

Although, multiple initiatives have been taken to solve the problem of nurse turnover, yet the problem of nursing shortage has persisted. In order to assist and improve the rate of nurse turnover, it is important that the senior nurse leadership plays an important role and take all essential measures pertaining to the monitoring, development, and implementation of the nursing retention strategies within the healthcare systems (Thompson et al., 2019). Being mindful of the gravity associated with the plight of nurse retention, a significant aspect has already been introduced that there is no significant strategy that can assist in solving all problems related to the high rates of nurse turnover. Therefore, in order to address the obstacles, present in nurse retention, it is important that the healthcare institutions lay out the essential requirements for the assimilation of a systematic approach comprising multiple strategies and measures (Hopson et al., 2018). This would enable the healthcare institutions in addressing multiple issues regarding nurse retention while a motivational aspect will also be promoted to the employees and the nursing staff. Furthermore, the feature of nurse retention can also achieve the objective of remarkable advancement within the healthcare setting due to an increase in job satisfaction in the workplace due to having a quality managerial impact (Heywood et al., 2018).

Job Satisfaction

The low rate of job satisfaction is the central reason behind nurse turnover as stress, burnout, physiological needs, and other contributing factors are responsible for turnover intention; however, the low job satisfaction is the sole contributor that prompts the nurses into leaving their jobs

(Mester et al., 2018). The decreased nature correlated with job satisfaction exhibits the inefficiency among the nurse employees and causes low quality service and output, while that nature is associated with nurses quitting their jobs (Maryniak et al., 2017).

The nurses in the healthcare system demonstrate high workload efficiency for inducing the aspect largely attributed to job satisfaction and incompetency in the process pertaining to the performance of the duties. Furthermore, the high rate of nurse turnover causes reduced morale among the existing employees while the engagement between them diminishes, and therefore, the execution of the job duties is also hindered because of it (Oloruntola Coates et al., 2020). Hence, the call for effective organizational leadership is stronger for facilitating a plight solution associated with the low rates of nurse satisfaction and high turnover among them in healthcare settings. Traditionally, organizational leaders can employ strategies and introduce initiatives in order to increase employee motivation which leads to greater job satisfaction among them.

Consequently, the organizational leadership can also strive to reduce employee workload and distribute it evenly for the sake of decreasing the rate of turnover among the nurses (Uthaman et al., 2016), while extending social support to them during stress and excessive workload can prove to be beneficial in lowering the turnover rate among them. The support and guidance of the senior leaders are of paramount importance and prove to be one of the reasons behind the nurses' satisfaction (Baker et al., 2016). The leaders can devise plans to create engagement among the nursing staff and assist them in achieving the work-life balance which is of pivotal importance. The approach related to enhancing nursing retention in the healthcare setting will also prove significant in boosting the morale of the employees while the nurses' engagement will also be facilitated through the strategy (Aamir et al., 2016; Rikhotso et al., 2019).

Social Support

Receiving social support from the senior leadership or colleagues can prove to be a contributing factor in lowering the rate of turnover intention. The findings have proven to explain the process of stress reduction and hence, have been demonstrated under both normal as well as in times of crisis such as the MERS epidemic (Vardaman et al., 2020; Devi et al., 2021). Extensive leadership support has always proven to be efficient, especially during the times of Covid-19 when senior managers and supervisors played a central role in influencing the turnover rate, while the positive impact of the leadership style and leadership support emphasized the importance of social cordial relationships, appreciation apart from the remuneration and assisted in navigating the catastrophe (Nasurdin et al., 2020).

Effect of Transformational Leadership on Nursing Retention

A wide range of studies has examined the effects of transformational leadership in the nursing workforce (Hutchinson & Jackson, 2012; Boamah et al., 2018). There have also been studies to examine the methodology for teaching transformational leadership (Labrague et al., 2020). In the present days of healthcare, when senior nurses have a responsibility to retain and improve the performance of young junior nurses. In this context, leadership style is very imperative to accomplish these goals (Labrague & Obeidat, 2022). It has been reported by Nursing Agenda for the Future that “it is essential to fully make use of the expertise and skills of professional nurses and to guarantee their retention in the profession” (American Association of Colleges of Nursing, 2002, p. 36). It has been found by Alhamwan et al., (2015) that due to the elevated rates of nursing turnover, a devastating effect has been developed on the financial operations, resources, and the quality of patient care and support within the healthcare atmosphere. During these unstable economic situations, senior nurses and leaders are under significant challenge in order to find

innovative and creative ways for obtaining, training, and retaining high-quality nursing professionals. The standard of patient care, care maintenance, and continuity along with consistency are all significant for the success and welfare of healthcare organizations. By saying in a positive statement, primary agenda items were listed by American Nurses Association for the future. One of the key items listed was to promote the recruitment and retention of nursing professionals as a primary focus. The shortage of hospital nurses is considered to be a worldwide issue and affects the entire operation as well as the quality of care in healthcare settings.

Organizational commitment is found to be an outcome resulting from the positive exchange relationship between an organization and its workers (Colquitt et al., 2014). It has been shown by research that salary increments and other monetary benefits are not suitable options to resolve the issue of nurse shortage in hospitals (Chang et al., 2011). Within the non-monetary factors, leadership is found to be a promising factor for employee commitment (Avolio et al., 2014). Transformational leadership is the most effective leadership style that develops increased levels of commitment among employees. Transformational leadership is defined as “a process through which leaders and followers raise one another to higher levels of mortality and motivation” (Burns et al., 1978, p. 20). Similarly, concerning nursing retention, transformational leadership among senior nurses has been found quite helpful and should be promoted in all healthcare organizations (Iqbal et al., 2019).

Conclusion

It has been supported by literature that staff nurses are present in the front-line position where they better get engaged with patient care. Through the integration of transformational leadership, the staff nurse can potentially influence the organizational commitment as well as the work environment. When a positive relationship is developed between nurses and leadership, it can

result in higher retention rates of nurses and improved satisfaction among patients (Waltz et al., 2020). Research studies over the last ten years have revealed an association between effective leadership behaviors and job satisfaction in nursing, impacting patient care outcomes indirectly. The traits possessed by a transformational leader are crucial for directing the motivation and development of personnel, according to the data reviewed, which places transformational leadership as the preferable practice for management in the nursing unit. A collaborative effort should be developed for the successful adoption of transformational practice towards a service improvement project, helping in clarifying oriented innovation and shared goals with the help of the team, organizational, and team transformation. A varying range of different kinds of educational and creative inquiry should be incorporated into the program in a systematic and structured manner for better results (Quek et al., 2021). In chapter 3, the approach and procedures will be demonstrated in a manner through which nurse leaders will be educated about transformational leadership.

Chapter 3: Research Plan

Action Research

This piece of work is based on the principles of action research which is a philosophy as well as methodology or research. It involves transformative change with the help of simultaneous procedures of different actions and performing research that is linked together with critical analysis (Hine et al., 2013). Additionally, action research is a collaborative inquiry technique that combines problem-solving efforts carried out in a group setting with data-driven analysis or study to identify root causes and make predictions about future individual and organizational change. Action research is normally qualitative in nature; however, in this work, the qualitative research design was accompanied by a qualitative approach as the data was collected from participants in the form of interviews as well as questionnaires that were later assessed quantitatively.

Project Goal

The Healthcare system is dynamic and is on continuous metamorphosis, hence it is imperative for nurse leaders to embrace a leadership style that enables followers to adapt to the changes and works toward the organizational vision (DeChant et al., 2022). Transformational leadership is considered one of the most effective leadership strategies to achieve this. A transformational leader inspires followers and creates a sense of commitment among them. The four components of transformational leadership include inspirational motivation; intellectual stimulation; idealized influence and individualized consideration (Faulks et al., 2020; Fragouli & Turlaki, 2020). Even though these four components are interdependent, they must harmonize to yield a performance that is beyond expectations. Transformational leadership is a powerful management strategy for nurse leaders and has got wide implications for nursing administration (Pearson et al., 2020). As a

result of transformational leadership nurses at all levels in the organization perceive that their voices are heard, their inputs are valued and their practices are being supported.

Transformational leadership is a powerful management strategy for nurse leaders and has got wide implications for nursing administration. Transformational leadership is an excellent strategy to mentor novice nurses. A novice nurse trained under transformational leadership develops trust and commitment to the organization (Krepia et al., 2018). Professional values such as teamwork, accountability, and responsibility can be instilled in them so that they get transformed to be an effective team player. The transformational change enables leaders to implement change effectively (Singh et al., 2020). The transformational leader goes above and beyond the call of duty by encouraging original thinking to solve issues, acting as a mentor, developing a vision, and outlining strategies to realize that vision. It has been revealed by Purwanto et al., (2021) that the implementation of a transformational leadership style of the leader might lead to a significant effect on the organizational commitment as well as the work environment. Increased nurse retention and patient satisfaction can result from a good working relationship between the nurse and nursing leadership (Vipraprastha et al., 2018).

Therefore, the planned change for this project was to develop and bring transformational leadership in the healthcare facility as this leads to many benefits as demonstrated above, resulting in better nursing retention rates. The outcomes for this project were:

- Development of educational program
- Implementation plan
- Evaluation plan
- Expert Evaluation of the Curriculum

Project Methods

PDSA Cycle

The method used in this project for the execution of change was Plan Do Study Act (PDSA) cycle which is a change improvement model (Chen et al., 2020). Leadership is a component of the institution's quality improvement (QI) process and uses the PDSA framework to direct all QI projects. When rapid change is required, this method is straightforward but effective. When an objective, a team, and measures are created, the process encompasses change implementation and assessment or testing. This tool promotes action-oriented learning with a framework based on the scientific method (Jiang et al., 2021).

In accordance with Pan et al., (2022), integration of the PDSA change model will shift the organization for the examination of issues and alignment of methods in order to accomplish the end goal of the competent practice entailing transformational theory among the staff nurses. The nursing process of assessment, diagnosis, planning, implementation, and evaluation is consistent with the PDSA stages. The PDSA technique can be quickly adopted by using a test cycle on small size and then replication on a bigger scale till the desired conclusion (Gao et al., 2021). Change must involve those who will put the change into practice (Yi, Feng, & Yuan, 2021).

Team Based Project

Secondly, this project was a team effort. It has been noted by Oh & Yang (2019) that team work and efforts should not be underestimated in all organizations, especially during change projects. In the presented project, the front-line or senior nurses were paramount to enacting the change significantly because they embodied the ambitions of the organization to accomplish the goals. Staggars et al., (2018) indicated that team members involved in change improvement projects should come from the organizational system and be representative of staff who have the

responsibility of conducting the intervention to accomplish the goal. Furthermore, it has been noted by Wang et al., (2020) that the involvement of employees is considered a powerful impact not only on the accomplishment of goals but also on individual patient sensitive outcomes. Analyzing these perspectives, a significant characteristic of a leader is to persistently remain on the level with expectations, direction, and ambition of the organization. When similarity exists between the leader and the entire organization, there are higher chances that followers become unified.

Considering the overall effectiveness of the team signifies the ability to involve those who are qualified and experts in their own specialist areas of clinical practice and who is eventually influenced by the proposed change (Ahmad & Karim, 2019). As stated by Furness et al., (2020), it is recommended by the Institute of Health Care Improvement that all teams should encompass clinical leadership, be technology experts, have someone from the leadership staff, and be a sponsor for the change project.

According to Grumbach and Bodenheimer (2004), a total of five key elements must be presented during team building: clear goals with measurable outcomes, clinical and administrative systems, division of labor, training, and communication.

Successful teams cooperate to achieve a common objective. Due to their diverse skill sets and traits, the team members are chosen for inclusion. In order for each team member to be equipped with the necessary skill set to do their individual work, an efficient team must also ensure that labor is allocated fairly and within each individual's capabilities. If training turns out to be necessary, training is given, and communication is ongoing for a brief period of time.

Actions planned for the Change

A summary regarding the advantages of the transformational leadership style will be presented to the QI team of the hospital and collaboration for the development educational program will then be started. The team members will involve experienced professionals who were familiar with acute care settings and have experience as nurses, leaders, and educators. They will remain aware of the formulation and assessment elements of the project. The participants for change improvement involved:

Participants:

- One nurse educator was a family nurse practitioner employed within the inpatient arena and responsible for educating staff nurses.
- One nurse educator was a doctoral candidate and was a former nurse manager and taught all aspects of nursing in the Bachelor program.
- Another nurse educator was a family nurse practitioner and an associate professor within the Associate degree of nursing.
- The last nurse educator was also a family nurse practitioner who was working as an adjunct in the clinical setting. This candidate was also the clinical instructor in the training session for BSN in the acute care settings.

The whole team will be tasked with developing the education program along with its evaluation process and implementation plans. Evaluation of the ongoing change process will happen during the meetings in the form of qualitative responses. In addition, an evaluation of the educational program will also be conducted by team members. The project team will carry out meetings through conference calls. An agenda will be attained by each team member in advance and

subsequently offered feedback according to the guidelines set by the researcher. Additionally, copies of all types of communication will be received by all team members through email so as to maintain transparency. Based on the evidence-based information, the team will effectively involve an evaluation during the ongoing process. It has been supported by literature that amendments and revisions should be carried out continuously for improvement of change (Beaulieu et al., 2020). During the meetings, the goals of the project will be outlined by the team members involving:

Presentation of literature synthesis

Presentation of program evaluation

Discussion of the evaluation process

Final presentation of the project and completion of the evaluation and implementation process.

Project Measurements

Outcome 1 Educational Program

The proposed program will be divided into three parts. The project plan will involve four weeks of instruction in classrooms for a total of five hours a day. The four weeks of instruction will include independent self-study, didactic and online learning. From the fifth week, real time observation will be carried out with an RN educator along with feedback as well as implementation on the unit. All the team members will conduct mentorship of the staff nurses for at least one month, with an allowed maximum period of 6 months. Evaluation of the staff nurses will be out at sixth- and eight-weeks intervals respectively with the help of a transformational leadership competency survey.

The nurses will be instructed on the style, characteristics, and attributes that will be displayed by the transformational leader. During classroom instruction, didactic learning, role plays, case

studies, and other interactive exercises will be demonstrated. In addition, the theoretical aspect of transformational leadership will be taught along with four components of transformational leadership. During the instruction sessions, the nurses will be taught regarding the differences between transformational leadership styles with other styles.

Outcome 2 Expert Evaluation of the Curriculum

All the team members will be involved in the evaluation process, review of program design, and the evaluation of the program's content. This evaluation process will be carried out with the help of a 12-item yes or no evaluation tool that is designed by the researcher. Each individual item could attain a maximum of four points and a least of zero points. In addition, team members will also encourage to provide reviews and feedback on the formulated evaluation tool.

Outcome 3 Implementation Plan

The efficiency of the designed nurse educator implementation plan will be examined by the team of specialists. An evaluation strategy for both the nurse educator who delivers the program and the nurses who finish the transformational leadership theoretical curriculum is included in the evaluation plan. The content specialists will look through evaluation items to make sure they meet the learning objectives and goals of the transformational leadership program. They will evaluate based on performance and integrative transformative leadership qualities. The two evaluation criteria developed for this evaluation were:

Evaluation of the program's nursing graduates.

Assessment of the nurse educator delivering the program.

Outcome 4 Evaluation Plan

The implementation will be reviewed by team members for the aspects of practicality and sensibility. This will include details like suitable timings (hours/shifts) for implementation, meeting times for leadership projects, curriculum rollout plans, and re-evaluation timelines.

- Transformational Competency Survey

The team of experts will assess an evaluation involving 7 items that are meant for administration to staff nurses following the completion of the program. The items evaluate the nurses with the help of a Likert scale ranging from 1 to 5, with a maximum score of five and a minimum score of one for each item. According to Kandasamy et al., (2020), the Likert scale offers the most generalized measurements regarding the topics, opinions, thoughts, and data that are in line with the factors contributing significantly. This is the main reason that the Likert scale is used for the purpose of evaluation.

In addition, the evaluation also encompasses the procedure and leaves space for the team member for their views and feedback for any item scored 3 or less than that. This examination is designed to gauge the proficiency of staff nurses in outlining, defining, and illustrating the elements of transformational leadership theory. The team of experts will be given the responsibility of examining this item to evaluate whether it accurately measures the learning.

- Evaluation of Nurse Educators

The panel of experts looked over a 17-item evaluation that will be given to unit staff nurses at the end of the course. On a Likert scale of 1 to 5, with 1 being the lowest possible score and 5 being the most for any one item, the items rate the transformation leadership instructor. Through this test, the student's perceptions of the nurse educator's efficacy will be assessed.

Ethical Research

The individuals taking part in the study were provided with adequate information pertaining to the study such as an explanation of the background of the study the potential role they were to play and how their input would result as beneficial for the study and enhance management techniques that will have an impact on the rate of nurse retention. While the next step entailed obtaining informed consent from the participants, it is essential that the risks associated with the study are explained to the participants prior to obtaining their consent so that they can acquire scientific knowledge (Resnik et al, 2015). Once the participants had carefully reviewed the information pertaining to the study, they were asked to sign the form in order to demonstrate that they are willing to participate in the study. the participants were also informed about confidentiality and secure data storage in order to prevent or reduce the negative impact on participants as well as their associated organizations. The participants were allowed to withdraw from the study at any time either verbally or in writing without penalty. while no monetary incentives but offered to any of the participants for taking part in the research.

According to the authors Rashid, Caine, and Goez (2015), ethics is not just comprised of obtaining consent from the participants instead, it goes beyond the consent form and asserts that the confidentiality and privacy of each participant must be upheld throughout the study. Hence, each participant was assigned a number while their contact information and the name of the organization, they were associated with, were removed from the study. The essential data pertaining to the study will be stored in a secure way that will be retained from the study for a period of five years and destroyed after the mentioned duration. Moreover, the institutional review board (IRB) at Walden University makes sure that all ethical guidelines and US regulations adhere to the study.

Conclusion

Chapter 3 of the project demonstrated the project involving the PDSA change model associated with approach, methods, and evaluation. Due to different challenges and changes in leadership, an unforeseen delay resulted to move forward with the education project on transformational leadership.⁸ Nevertheless, different outcomes were yielded from the design aspect of the project, involving the education program, design and evaluation plan, program review and implementation plan, provision of transformational leadership survey competency tool and nurse educator evaluation tool, and lastly the evaluation of the education program. All tools created were deemed to be useful and in line with the objectives of the content specialists. Section 4 will go over the conclusions, assessment, and interpretation.

Chapter 4: Measurement, Results and Interpretations

Introduction

The main purpose of the change project was to establish an education program for the staff nurses for developing transformational leadership skills and behaviors. The goal of this change initiative project was to bring and promote the knowledge of transformational knowledge to the clinical setting. The outcomes of this project involved:

- Development of educational program
- Implementation plan
- Evaluation plan
- Expert Evaluation of the Curriculum

The purpose of the following discussion is to present findings, evaluations, and interpretations in relation to the change project.

Outcome 1 Development of Education Program and Outcome 4 Expert Evaluation

The transformational leadership program was formulated and monitored by a team of experts for its effectiveness to meet the objective of teaching different aspects of this concept along with the evaluation of competencies of staff nurses. The process of evaluation was carried out via formative feedback in a series of meetings and with the help of content evaluation of the final program plan. The purpose of the project, the formative evaluation, the literature study, the curriculum presentation, and the change improvement project design were all included in this formative evaluation.

Evaluation

A formative evaluation of the education program was carried out during the meetings and was reflected in the minutes. Following the completion of the program review, each member of the expert team completed an evaluation of program content in order to analyze the items of education activity for conciseness, clarity, applicability, and acceptability among the nurses in the healthcare facility. Within the 12-item tool, a series of yes or no questions were involved as well as an additional space for response and feedback during the event of a disagreement.

Findings

Among the four team members, three of them scored the content of the program 12 out of 12 points, indicating that the educational content was clear, proper, evidence based, and relevant for the nurses. Therefore, it can be said that the proposed program was meeting different aspects of transformational leadership. However, there was one nurse educator who mentioned no in regards to the learning objectives section and recommended a change in the evaluation format to better identify leadership style. After the integration of recommendation and program revision, a second evaluation was conducted and this time all the nurse educators agreed on different aspects and components of the education program.

Discussion

According to the feedback provided during meetings and by one of the nurse educators, revisions were carried out in the program. The post-evaluation structure for the curriculum's leadership style identification module was modified from an essay to a multiple-choice test. Following the completion of revisions, nurse educators re-evaluated the educational program. At the time of the second evaluation, all the team members rated the items 12 out of 12 points. The curriculum was

given approval by the group members of the expert team as a means of educating the nurses who care for patients on transformational leadership theory.

Outcome 2 Implementation Plan and Outcome 3 Plan for Evaluation

Evaluation

The intended execution of the project, roles and duties of a team member, and implementation processes were all included in the implementation plan. The evaluation strategy included instruments and techniques for assessing both the nurse educators who were involved in the program and the registered nurses who finished the transformational leadership curriculum.

Findings

The team of nurse educators was shown the implementation plan and the evaluation plan, but neither was assessed.

Discussion

One of the nurse educators did compliment the aspects of an implementation plan and remarked that it would be a worthwhile project to implement in other hospital facilities. Therefore, the discussion was also carried out on the possible implementation of this education program at the facilities of nurse educators that are also quite similar to the project hospital. In addition, the nurse educators also offered reviews and feedback on the evaluation plan in which they suggested that testing times of registered nurses should be adjusted during the program completion, permitting for increased real time observation. The tools, techniques, and evaluation plans were deemed sufficient for evaluating the program and the integration of transformational leadership theory knowledge according to the content experts. The evaluation plan, however, was not properly evaluated.

Chapter 5: Summary and Discussion

Project Summary

In healthcare, outcome driven organizations have different kinds of processes that firmly recognize patient care, nurse satisfaction, and clinical indicators measuring leadership behavior. Within an organization, the most important element for change implementation is a baseline evaluation for identifying the leadership skills and styles of prominent figures being studied (Hanelt et al., 2021). Organizational issues develop when there is misalignment occurs between organizational goals and management goals, especially when the followers are fully aware of the discord of readily available leaders, resulting in poor retention of nursing staff. Education and understanding of transformational leadership can potentially alter the perceptions of unit staff nurses, promote better communication, and elevate their autonomy, and commitment to the organization (Abd El Muksoud et al., 2022). The concept behind transformational leadership is found to be significant for the promotion of a sense of ownership for the goals and missions of the organization along with better patient care outcomes. When nurses are striving for organizational commitment as well as its goals and mission, it will eventually attract and retain them in the healthcare facility (Lei et al., 2020). This is the reason that a wide range of literature has highlighted and acknowledged transformational leadership as an essential aspect of successful and better management at any leadership phase.

The theory of transformational leadership is recognized as a premier one for a nurse leader or senior nurse within the clinical settings of the present day. Across the country, there are many magnet organizations that have embraced and practiced transformational leadership, leading to improved nursing sensitive outcomes that are constantly at or above national benchmark percentile levels developed by The Joint Commission and other well-known organizations (Cummings et al.,

2021). It has been recognized by professional organizations that different medical tasks performed by healthcare providers and the existence of multiple comorbidities at the same time require a nursing leader who can not only motivate and inspire the staff nurses but also bring and implement changes in an organization (Garnand et al., 2022). Several pieces of research have recommended that healthcare facilities properly endorsed transformational leadership as the main leadership style for better nurse retention and overcoming shortages (Schenk et al., 2019).

For the success of any business model, it is crucial that the model should support and involves all its key members (Zucchella & Previtali, 2019; Freudenreich et al., 2020). Within an organization, members are required to be invested personally for the actualization of organizational goals. Research findings have revealed that the implication of transformational leadership theory promotes a personal investment in organizational mission and goals on a middle level of management, involving a study correlating senior nurses with transformational leadership and increased scores of patient satisfaction as well as elevated nursing retention (Manoppo et al., 2020). Although a gap exists in the literature, the main findings are that senior nurses with the knowledge of transformational leadership can indirectly influence the perception and personal investment of staff nurses, motivating for an appropriate understanding of organizational goals and determination to look at how to accomplish those goals.

The bedside nurse may feel overwhelmed by the demands of nursing and everything it entails. The technical nursing skills that are obtained are insufficient to address the varied needs and provide the high-quality, evidence-based care that is required at the bedside. In these circumstances, it is the duty of the organization to inspire and encourage nurses to work harder in order to care for patients who are sicker today than they were in the past, in less than half the time that was available in the past, and at roughly half the expense. Innovation, teamwork, cooperation, problem-solving,

problem identification, and self-analysis are therefore crucial traits that the nurse at the bedside must possess. The characteristics of transformational leadership establish commitment and create patient centered outcomes, resulting in reduced organizational cost and improved retention of nurses. Transformational leadership considers logistics from the perspective of the organization's bottom line, allowing the leader to control the team rather than having the team take the initiative.

The presented project is aimed to influence the nursing staff and restructures their values so that they become more aligned with goals and mission organization for better retention. By utilizing and enhancing the follower's abilities, Transformational leadership motivates the follower to go above and beyond to accomplish the goals and objectives that have been mutually agreed upon by the organization. Additionally, it encourages followers to aim for personal improvement and to use newly learned information about the unit to try to enhance procedures and structures for providing timely, quality-driven, patient-centered care.

Discussion

This change project has demonstrated how much transformational leadership is important for increasing the nursing retention rates and contains many recommendations on how to integrate this leadership style for the success of the organization. It has been revealed by Jankelová & Joniaková (2021, March) that nurses who develop transformational leadership skills are confident enough to meet the organizational goal, promote open communication, and improved management skills. Labrague et al., (2020) stated that healthcare facilities practicing a transformational style of leadership will help the nurses to develop their self-esteem as well as satisfaction through the added tools acquired for unit management. This kind of education will aid in the development of nurse confidence as well as safely offering a strong set of skills required for transforming a nurse into an individual capable of taking proper decisions and being competent and sure enough in the taken

decisions. Therefore, this kind of knowledge and education became part of this project for the adequate development of nurses. All the nurse educators involved in the project evaluation praised the elements of transformational leadership included in the educational program which can further be implemented in large healthcare organizations. Additionally, it has also been demonstrated that transformational leadership has a secondary impact on clinical outcomes that are scientifically quantified, making this project more significant and promising.

Transformational leadership affects the setting in which the nurses work, fostering a supportive practice environment through raising nursing satisfaction, nurse retention, and benchmarked nurse-sensitive quality outcomes. A safer environment for nurses to learn and develop in, along with the chance to spend more time there, fosters organizational citizenship rather than organizational business, with greater respect for and attention to patient care safety. This is directly related to transformational leadership. All the nurse educator experts were in favor of the project when all these advantages were presented to them about transformational leadership.

Policy

Alignment with organizational strategic goals targeted at boosting patient satisfaction, nurse retention, and patient length of stay all have the potential to have an impact on organizational or strategic planning. Policies relating to the clinical procedures and practices can be established through an interdisciplinary focus, involving open communication, decision trees of management, development, and responsibilities of staff. Policies of human resources in relation to leadership competencies and performance standards should be assessed and modified for ensuring the integration of the competencies as demonstrated by transformational leadership theory (Ali Ababneh et al., 2021). It is the responsibility of the managers to consider previous styles of ineffective leadership and restrict them to meet the organizational goals successfully. Staff nurses

are found near the bedside and therefore, have a direct effect on those facing under their immediate care and support. This is the main reason that unit senior nurses should enhance their leadership strategies beyond the traditional manner to better develop the nurses.

It has been supported by literature as well as this project that transformational leadership practices should be employed for the alignment of unit-based goals with organization wide goals. In order to encourage, motivate, and acknowledge the nurse at the bedside who excels and progresses toward professionalism, managers must look to role models of transformational leadership. The development of transformational skills can aid with communication, autonomy, confidence, and managing the patient's care. It has been acknowledged by literature that a better relationship can be developed between nurses and patients with the help of transformational leadership (Wu et al., 2020). In addition, the presented project is not restricted in scope, indicating that the projects can be applied in any unit of the hospital as well as to a kind of nurse. The project can be used in a wide range of settings at national, local, and international levels. Leadership can be significantly learned and seniors can then integrate transformational leadership into their clinical practices (Wu et al., 2020). It is supported by the evidence that nurses who wish to involve in continuing education programs, as well as leadership training sessions, have eventually led to successes in their roles and associated higher levels of knowledge (Manley & Jackson, 2020). It is the professional and moral obligation of the healthcare organization and senior nursing staff for demonstrating and assisting the front-line nursing staff in evidence-based leadership practices (Nam & Park, 2019).

Impact on Social Change

Transformational leadership education can be utilized as a tool or agent for social change and can be applied when there is a need for change or when individuals in the setting need change. It has

been found that the present healthcare system is not able to accomplish the needs of patients and nurses appropriately, resulting in poor patient health outcomes as well as decreased nursing retention. Through the introduction of significant and evidence-based knowledge of transformational leadership, the nurse will be able to develop their foundation of knowledge and grow professionally in a system that needs constant evolution (Majers & Warshawsky, 2020). When the senior nurses have adequate knowledge of transformational leadership concepts, they will then have increased expectations for their supporters. This results in the strong commitment to organizational goals among nurses that is a direct reflection of the values and self-esteem of the followers. In this manner, the staff nurse will have the significant and relevant knowledge that he /she can make a social difference in the organization as well as overall competence for accomplishing the work desired with enhanced skill and efficiency. The senior nurses will have the ability for transforming the needs and values of their followers so that those who follow them can accomplish their full potential with better performance. As a result, this social change will result in care and support that is quality oriented, patient centered, and recognize positive care outcomes for patients (Coyne et al., 2018). The implication of the proposed educational program can offer the essential skills, characteristics, and traits to the charge or senior nurses, leading to their effective retention as well as improvement in the quality of patient centered care. The findings of this change project can be disseminated within a larger healthcare setting to alter leadership practice and workplace culture.

Strengths and Limitations

One of the main strengths of this project is the effective collaboration of nurse educators who are qualified and experts in the profession, education, and leadership of nursing, and who have previous experience to develop, assess and implement evidence-based projects. Moreover, the

involvement of senior nurses present in the quality initiative team of the hospital is another strength of this project as they are the first healthcare professionals who are supposed to be influenced by the change. It has been noted by Kelly (2011) that suitable changes brought by change projects are potentially dependent on the collaboration and corporation of the individuals positioned highest within the organization system as well as those positioned in the roles of middle management.

However, if the limitations of the project are concerned, some components of the project are not properly evaluated due to limited time and resources. Another limitation is the inability to carry out this work further in the hospital setting due to the alterations in leadership. Additionally, a theoretical limitation is also present in the form of cost for project implementation (Nnaji & Karakhan, 2020). Within the program structure, it is the necessity of the curriculum that individuals need to be taken off some time from the unit floor till the education program is completed. This depends on how the healthcare facilities opt to schedule, leading to complications in care and coverage on the unit floor. Furthermore, some of the revisions recommended by nurse educators were not properly made due to time constraints.

Recommendations for Future Research

One of the crucial recommendations is to work with leadership skills and concepts by incorporating other evidence-based models that are effective in different nurse driven QI projects, such as Benner and Lewin's change model theory (Mazzotta et al., 2022). In addition to this, this education program can be integrated into the curriculum of nursing students during their leadership course. For instance, the project was not incorporated in a large healthcare setting and was considered by one of the nurse educators for implementation in a hospital that faced similar challenges of poor nursing retention. In the future, it would be beneficial to incorporate the project of education programs in large settings that are aimed to enhance departmentally based outcomes

as well as improvement of senior nurses in the context of transformational leadership. One nurse educator also stated that this EBP project would be a promising program to integrate all kinds of nurses into the healthcare organization and not solely made for senior nurses.

A wide range of research is present regarding the nursing shortage and decreased retention rates; however, research focusing on leadership styles for retaining nurses is limited. In the literature review, it has been highlighted that the healthcare industry is struggling with the challenge of a shortage of qualified nurses. Therefore, in order to solve this worldwide complication, there is a need for a promising solution that can be presented by demonstrating potential leadership styles and skills to improve nurse retention. A future study in the form of a categorical set of important indicators that should be exercised by business leaders and that can be transferable to other businesses or industries is highly suggested.

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