Enhancing Nurse Satisfaction and Retention Through Real-Time Feedback: A Case Study at Los Angeles General Medical Center

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This study explores the efficacy of the Joslin Insight application, a mobile application designed to facilitate real-time feedback from nurses to leadership, in improving nurse satisfaction and retention at Los Angeles General Medical Center. Conducted over a 6-month period, the study involved 321 nurses and focused on communication enhancement, empowerment, and turnover rates. The findings demonstrate significant positive outcomes, advocating for the adoption of realtime feedback systems in health care settings to improve workplace environments.

n the face of persistent challenges in nurse retention and job satisfaction within health care settings, innovative solutions are critically needed. Enhanced communication between nursing staff and leadership has been identified as a key factor in improving workplace satisfaction and retention rates. The pandemic has impacted the nurse work environment and retention.

American Organization of Nursing Leaders (AONL) Foundation partnered with Joslin Insight beginning in mid-2020 to track nurse leader challenges. In the third longitudinal study conducted in 2021, the ability to retain staff became the greatest challenge. In the fifth longitudinal and latest study conducted in 2023, staff retention was listed as the top challenge by 69% of nurse leaders, up from 24% in July 2020, the first longitudinal study.¹

REVIEW OF THE LITERATURE

In their review of the literature, Bergstedt and Wei² found that nurse leaders promote nurse engagement by: being visible and accessible, including understanding the needs of the staff; practicing open communication; and taking a sincere personal interest in staff.² They further state that nurse leaders have the power to improve the work environment by being visible and engaging in open dialogue with staff. The American Association of Critical Care Nurses released the healthy work environment standards in 2005.³. One of these key standards of a healthy work environment is skilled

communication. The American Association of Critical Care Nurses further states that nurses must be as proficient in communication as they are in clinical skills. Shirey⁴ reported in her review of the literature on leadership practices for a healthy work environment, found 4 themes in the literature that were essential in leadership practices for creating and sustaining a healthy work environment.⁴. The themes are quality leadership, relational exchanges, environmental elements, and contextual factors. Under relational exchanges, Shirey⁴ said that when leader-member relationships are high, job dissatisfaction and nurse cynicism decreases. Communication and collaboration are key to relational exchanges. To build trust and build this relational

KEY POINTS

- Study explores the efficacy of a mobile application by Joslin insight for staff to provide real-time feedback to leaders.
- Studied focused on communication enhancement, empowerment and turnover with 321 nurses giving feedback to the Chief Nursing Officer.
- Findings demonstrate significant positive outcomes, advocating for the adoption of real-time feedback systems in healthcare settings.

engagement, open communication in which feedback is encouraged is essential.

Mahoney⁵ reported that nurse leaders need time to develop active listening skills, empathy, and compassion over time. She also states that active listening is a vital component of communication skills and shares that staff trust leaders who give them a voice and also provide them with the resources that they need.⁵.

This article details a case study conducted at Los Angeles General Medical Center, focusing on the impact of implementing the Joslin Insight application, which facilitates anonymous, real-time feedback from nurses.

BACKGROUND

Los Angeles General Medical Center, serving a large and diverse population, is a vital health care provider in Los Angeles County. As a teaching hospital associated with the University of Southern California, it not only provides essential services but also plays a crucial role in medical education and research. Challenges such as high turnover rates and nurse dissatisfaction prompted the exploration of innovative strategies to engage and retain nursing staff effectively. In 2022, the organization saw an all-time high turnover of 22%; some nurses retired early, and others left to work through the registry. The organization cares for a very vulnerable patient population and is a large, urban academic medical center. The hospital is a level 1 trauma center, a burn center, a stroke center, ST elevation myocardial infarction center, and has 6 adult critical care units, a pediatric intensive care unit, and one of the largest emergency departments in the country. There are several psychiatric units and the only jail ward in the county. Because of these things it is essential to have nurses who are highly skilled and committed to this patient population. It is important that retention improve. Numerous structures and processes were put in place as the hospital was on the Magnet journey, professional shared governance was implemented in 2022, and a post transition to practice new graduate residency program. The nursing leadership team was evaluating structures and practices to support the front-line clinical nurses and improve retention.

METHODOLOGY

The organization implemented real-time feedback from the front-line staff directly to the Chief Nursing Officer (CNO) through the Joslin Insight application. This personal mobile device application allowed nurses to provide immediate and ongoing feedback: providing the CNO with real-time data gathering, real-time reporting, and insights for meaningful intervention. The CNO knew what their staff was thinking and was able to let them know via their personal device that they were heard the same day. The CNO also sent emails to all the participating nurses at the end of the month,

updating them on plans to resolve issues or to commend their successes, ensuring no delay in communication. The research employed a quasi-experimental design without a control group, involving voluntary participation from nurses across various units within the hospital and clinics. Data were collected through the Joslin Insight application, in which nurses could submit feedback anonymously at any time. The study period lasted 6 months, during which feedback was monitored and categorized into several dimensions of workplace satisfaction and engagement. This study was approved through the University of Southern California Institutional Review Board and was approved to move forward. The nurses were invited to participate via flyers, email, and screensavers via OR code. With the OR code, they were brought to consent and when they consented, they were taken to the application to sign up. The nurses could remain anonymous or disclose their names when they sent a message via chat. They were sent quantitative questions weekly, and various qualitative questions were sent monthly. Sample questions can be found in Tables 1 and 2. Participation was voluntary, and although there were more than 2000 nurses, 321 chose to participate. The CNO would review the feedback regularly, and when she read and bookmarked a question, the staff member would get a message that would let them know their message had been read. The CNO would send messages back to the staff addressing their challenges, concerns, and victories via chat, and all participants would get a message directly in the application.

RESULTS

Analysis of the data revealed significant improvements across several areas. Turnover rates at the hospital decreased from 22% the previous year to 13% during the study. Nurses reported feeling more empowered and involved in decision-making processes, with increases in perceived responsiveness of leadership to their concerns. Notably, 90% of participants felt the application either helped or may have helped improve communication with their leaders. Another positive consequence of these processes that were employed over the first year of this application and other changes in the organization was the overall decrease in nurse sensitive indicators including central line blood stream infection (CLABS), catheter associated urinary tract infection (CAUTI), hospital acquired pressure ulcer (HAPI), and falls. The organization was unable to determine if this was a direct impact of the application or an impact of all the new structures and processes in place, but this was a contributor to improving both patient and nurse outcomes. The sample questions with answers for both the qualitative questions can be found in Table 3 and quantitative questions can be found in Table 4.

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Table 1. Joslin Insight App Qualitative Questions					
	Never	Rarely	At times	Often	Always
Do you feel involved in broader organizational decisions?	0	0	0	0	0
Do you feel your input on nursing practice makes a difference?	0	0	0	0	0
Do you feel you have reasonable access to your CNO?	0	0	0	0	0
Do you feel a sense of belonging at your organization?	\bigcirc	0	0	\bigcirc	0
Do you feel a sense of connection with nurses at your organization?	0	0	0	0	0

DISCUSSION

The results indicate that real-time feedback mechanisms like the Joslin Insight application can significantly enhance nurse leader communication and lead to greater job satisfaction and retention. The success of the application in fostering an environment where nurses feel heard and valued suggests that similar approaches could be beneficial in other health care settings. In addition, this application validated issues that the CNO believed that the staff was experiencing. As the study continued and the staff felt that their issues were being addressed, the staff began to post their names with their posts, which allowed the CNO to reach out and ask clarifying questions. Challenges faced during the implementation, such as ensuring consistent participation and addressing feedback in a timely manner, provide valuable lessons for future deployments. In addition, during the first year of improvement of the application, nurse engagement scores increased in the section of senior leadership responsiveness.

Call to Action for Nurse Leaders

In light of the compelling findings from the case study at Los Angeles General Medical Center, it is evident that real-time feedback systems like the Joslin Insight application are pivotal in enhancing nurse satisfaction and retention. As nurse leaders, it is essential to spearhead the adoption of similar technologies and practices within institutions. Here are key actions to consider for replicating the successes observed:

Implement Real-Time Feedback Systems

Prioritize the deployment of applications that facilitate anonymous, real-time communication between nurses and leadership. Technology such as the Joslin Insight application empowers nurses to express their concerns and suggestions without fear of repercussions, fostering an open and transparent work environment.

Increase Visibility and Accessibility

Making a conscious effort to be more visible and accessible to nursing staff is crucial. Engage regularly with teams, not only through digital platforms but also through personal interactions, which are invaluable for building trust and rapport.

Encourage Active Participation

Actively promote the use of feedback tools among nursing staff. Highlight the impact of feedback on organizational changes and improvements to emphasize the value of their voice.

Table 2. Joslin Insight App Sample Qualitative Questions

What resource do you need to better perform your job and provide excellent care to our patients?

What questions do you want your frontline leaders to ask?

What initiatives are making a positive impact on your organization's work environment?

What brings you joy at work?

What is on your mind that you would like to share with your leaders

Table 3. Qualitative Questions and Answers

Below are 3 qualitative questions posed in the Joslin Insight application, accompanied by sample responses that encompass themes including positive workforce initiatives, resource and staffing needs, and recruitment and retention concerns. All quotes are provided exactly as stated and have not been edited for grammatical correctness.

Question 1: What initiatives are making a positive impact on your organization's work environment? Cardiac Cath Lab

The RN hiring initiative has had a positive impact. Although we do have an inpatient RN staff that is disproportionately inexperienced.

L+D

This survey seems to be the only one to give direct feedback to administrators that I know they will see. GI Lab

I think the H3 program has been doing a great job offering support to employees after stressful/traumatic incidents.

ED Observation

UPC and SG councils especially having a nurse manager council

Other

this is a positive step- the survey.

Other

QAP, UPC Projects, WE CARE is gaining interest and support, EDIA involvement in policy development, the entire realm of patient experience, our Magnet journey, interdisciplinary collaboration, shared governance, mentorship, RN residency, hiring more nursing staff, Code LOVE, recognition in many ways, celebrations Other

Asking frontline staff about issues.

Med/Surg

The culture of rounding seems to make a big impact. I love the coffee and tea with the CND. it's nice to see the administration out and around. it's been nice having Mark join the team. I already feel a difference on the unit. we finally get solid time to work on projects during working hours. It's not seen as a way to get off the unit or floor but as a value part of the hospital.

Med/Surg

Initiative such as this project, healthy work environment. This survey allows me to voice my cares and concerns about my environment.

Other

the survey I believe helps. more recognition of departments and what they do.

Question 2: What resources do you need to better perform your job and provide excellent care to our patients?

. Clinic

Evidence based practice in ambulatory care

Clinic

ambulatory/outpatient education. There seems to be a disconnect between inpatient and outpatient and how things are done. example: PICC line and PCNT dressing changes.

Jail Ward

Hear from specialists of different nursing subject or real training

ED Observation

Supportive supervising staff and managers who are present and rounds regularly... supply rooms that are stocked regularly!!! we have the equipment.. just not filled as timely. The staff spend so much on unnecessary footwork to gather supplies we need, even a sack lunch!

MICU

Equal assignments, coworkers doing their fair share of work, capable coworkers Other

Better talent. More education. More money for those who have stayed on to work here. Cardiothoracic ICU

Supplies & ancillary support. Continued support from our fabulous management team - thank you

(continued on next page)

Table 3. (continued)

GI Lab

I would like to have working speakers on our computers or a way to connect headphones so we can hear training videos on Learning Link, town halls, nursing grand rounds, etc. Most of the time, our computers don't have working speakers so we can't actually hear any of the video updates.

L+D

better signage for entrance doors at 3B L&D. It is a constant daily issue. No one, visitors and employees alike, do not read the signage for entering L&D.

ED Observation

staffing is better now Thank you Dr. Blake. staffing office should not pull or float a nurse just because it's a well-staffed unit, open beds rather than float. Thank you again Dr. Blake!

Question 3: What's on your mind that you want to share with your leaders? L+D

safe staffing is always at the forefront of our minds. we cannot provide the level of care our patients deserve if we are constantly stretched too thin.

Clinic

I want to thank our SSN and manager for seeking educational opportunities for our clinic.

Clinic

Please work on retention. Many nurses in our department are getting very burnt out and feel a disconnect from leadership.

MICU

nurse retention, 3 day full time work weeks, certification bonus, time and a half for holidays L+D

Scheduling is one of my biggest concerns. I would like for my unit to implement self-scheduling like other units within our hospital facility. Not sure why other units can self-schedule & not mine. SICU

nurses need more support. ancillary staff need to do their jobs without having to ask them to do things. Other

Changing culture is hard but with consistency, transparency and clear and honest communication is possible. But together it is possible, one step at a time.

Clinic

Today the first thing I think of is how important our work environment is to patients and staff. I work in the clinic and although the design is major improvement, future clinics really need to serve everyone better. Windows, natural light, areas for quiet conversations with patients, exam rooms that accommodate wheelchairs, walkers and family or caregivers would make a huge difference to the quality of care for patients and staff. Larger work stations for staff and flexible classrooms or multipurpose rooms would be wonderful and allow flexibility. That is my main idea this week.

CND, Clinical Nursing Director; ED, emergency department; EDIA, equity, diversion, inclusion and antiracism; GI Lab, Gastrointestinal Study Lab; H3, Healers Helping Healers; ICU, Intensive Care Unit; L+D, labor and delivery; Med Surg, Medical Surgical Unit; MICU, Medical Intensive Care Unit; NICU, Neonatal Intensive Care Unit; PCNT, percutaneous nephrolithotomy; PICC, Peripherally Inserted Central Catheter; QAP, Quality

Academy Program; SSN, Supervising Staff Nurse; SICU, Surgical Intensive Care Unit; UPC, Unit Practice Council

Provide Timely Responses and Updates

Ensuring that feedback is not only collected but also promptly addressed is critical. Regular updates about the actions taken in response to the feedback should be communicated to the staff, demonstrating responsiveness and accountability.

Educate and Train Leaders

Equipping nurse leaders and managers with the necessary skills to effectively manage and utilize

feedback systems is vital. Training in technological adeptness, skilled communication, and problemsolving, will enhance the capability to respond to nurse feedback constructively;

Evaluate and Adapt

Continuously evaluating the effectiveness of communication and feedback is necessary. Being open to making necessary adjustments to improve the system based on feedback and changing organizational needs is important.

Table 4. Quantitative Question Answers
Below are 5 quantitative questions asked in the Joslin Insight application that illustrate changes observed
over 6 months during the project. Among all the quantitative questions assessed, none showed a
statistically significant decrease during this time frame

Change	Question
↑ 8%	Do you feel involved in broader organizational decisions?
↑ 4%	Do you feel your input on nursing practice makes a difference?
↑ 4%	Do you feel you have reasonable access to your CNO?
↑ 5%	Do you feel a sense of belonging at your organization?
↑ 9%	Do you feel a sense of connection with RNs at your organization?

Champion Nurse Engagement and Empowerment

Striving to create an environment where nurses feel genuinely empowered to share their insights and participate in decision-making processes that affect their work environment and patient care is essential.

By adopting these strategies, there is significant potential to influence nurse job satisfaction, reduce turnover rates, and create a more supportive and fulfilling work environment. These insights serve as a call to implement real-time feedback applications such as the Joslin Insight application, ensuring nurses feel valued, heard, and engaged.

CONCLUSION

The case study at Los Angeles General Medical Center demonstrates the potential of real-time feedback systems to transform nurse retention and satisfaction. These findings support the broader implementation of technology solutions that facilitate open communication and responsiveness in health care environments, ultimately leading to improved organizational health and staff well-being. By implementing a real-time method of engaging in communication, the overall work environment improved in the organization.

Limitations

A limitation to this study is that only 321 of the more than 2000 nurses participated in using the Joslin Insight application, but the organization does believe it was a representative sample because the feedback received in rounds and staff meetings was consistent with the feedback obtained through the application.

CREDIT AUTHORSHIP CONTRIBUTION STATEMENT

Nancy Blake: Writing – review & editing, Writing – original draft, Validation, Resources, Project administration, Methodology, Investigation, Formal analysis,

Data curation, Conceptualization. **Hunter J.** Joslin: Writing – original draft, Software, Methodology, Formal analysis, Conceptualization. **Daryl** Joslin: Writing – review & editing, Writing – original draft, Conceptualization. **Ria Sangalang:** Writing – review & editing, Writing – original draft, Methodology, Conceptualization.

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Note: We would like to thank the nurses at Los Angeles General Medical Center who took the time to give us feedback to improve the work environment. Your feedback has helped improve the work environment and ultimately improved retention and patient care. We

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extend our gratitude to the nursing staff at Los Angeles General Medical Center for their participation and candid feedback, and to the administrative and IT support teams for their crucial roles in implementing the Joslin Insight App. 1541-4612/2024/\$ See front matter Copyright 2024 by Elsevier Inc. All rights are reserved, including those for text and data mining, AI training, and similar technologies. https://doi.org/10.1016/j.mnl.2024.06.004