

Preserving the nursing workforce: the importance of job satisfaction in early career

Employing organizations and line managers need to understand how satisfaction can differ by career stage and by area of nursing. Concerns about working conditions and career prospects are often very different for a newly qualified nurse compared with a mid-career nurse and nurses contemplating retirement. Drawing on recent studies from the UK, including work on early career nurses by the National Nursing Research Unit, King's College ^[1] we consider why job satisfaction is so important to nurses after transition from student to staff nurse and identify ways in which newly qualified nurses can best be supported.

Why is job satisfaction in early career so important?

When new nurses take up their first job they may experience what Kramer called 'Reality Shock' ^[2], the reaction new nurses feel when they enter a work situation for which they feel unprepared. Responses include stress and dissatisfaction due to lack of experience and organizational skills ^[3,4]. The depth of satisfaction varies across areas of nursing with those employed in acute care settings particularly vulnerable to dissatisfaction ^[5].

In the UK, by the third year post qualification only 82% of registrants are employed as nurses ^[1]. Turnover rates of 35% to 55% in first year of employment have been reported in the USA ^[6]. Intent to quit has been found to have a strong inverse relationship with job satisfaction ^[7,8] however the relationship between job satisfaction and actual turnover is smaller ^[9]. Losing qualified staff early after investing in training, orientation and recruitment is expensive ^[7] because it creates additional replacement costs and the need to hire and orientate new staff ^[10]. High turnover has a negative impact on staff morale and the capacity to meet patient needs however the effect of nurse turnover on quality of care delivery has not yet been substantiated ^[11].

What are the key components of nurses' job satisfaction?

The international literature emphasises the importance of relationships with co-workers. Pay and benefits, working conditions and physical surroundings are often mentioned but vary by country. Management style, autonomy and leadership also have an impact ^[12]. In England eight factors emerge as important for early career nurses: patient care, staffing, relationships with co-workers, professional development, education opportunities, resources, aspects of work-life balance and pay ^[13]. A US tool designed to measure confidence in delivery of care, perceptions of the work environment and job satisfaction amongst graduate nurses identified 7 factors: professional respect, career development, work schedule, information access, competence, work management, and becoming part of a team ^[7].

What difficulties are experienced in the transition from student to nurse?

Generally new nurses say they lack confidence in skill performance and have concerns within a number of areas^[1, 3, 5]:

- peer and preceptor relationships, dependence (on others)
- becoming an independent practitioner
- work environment
- organization and priority setting
- communication with doctors.

Most new nurses take up to 12 months to become confident and satisfied with their job. Low-points between 6 and 12 months have been reported in the USA^[5-7] and between 6 months and 3 years for nurses in the UK^[1]. US graduates participating in early support initiatives were particularly vulnerable between entry and 6 months when the amount of learning can be overwhelming^[6].

In the US and UK dissatisfaction with patient care, scheduling (work-life balance) and pay may precipitate job exit^[5, 7, 14]. Students go through a “grieving process” on loss of an academic schedule and this may in part explain why nurses in early career are dissatisfied with work-life balance^[7]. Dissatisfaction with pay has been reported in the US^[5] and UK^[1] and pay satisfaction has been positively associated with intent-to-stay in early career UK nurses but there were no direct pay effects on turnover^[15]. Newly qualified nurses often have high ideals and expectations of nursing and their first post and if these are not met they can have a negative impact on job satisfaction leading to early intention to leave^[2, 14, 16].

What can be done to support newly qualified nurses?

- Establish nurse support groups that meet regularly and beyond the first year^[10]. Support programmes lasting 1 year have produced good outcomes in the USA (turnover rates of 12% compared with rates of 35-55% cited above) and positive feedback from participating chief nursing officers^[6]
- Newly qualified nurses want preceptorship but from fewer preceptors^[5].
- The development and use of expert nurse mentors should be encouraged^[10]. They should receive training and adequate rewards. In particular, nurses who have recently experienced the transition have a lot to offer newcomers
- Improve employer flexibility to facilitate work-life balance and it is important to describe expected shift patterns at interview and during orientation^[7]
- Foster good communication between managers and new nurses so that nurses are open about their intentions and solutions can be explored before they decide to leave
- Measure and monitor job satisfaction and experiences on a regular basis to provide an early warning system for intention to leave
- Provide further support such as advanced preceptorship to new nurses as they move into positions of greater responsibility.

Key issues for policy

- Current reviews of the future of nursing education in the UK contemplate an extended mandatory period of support for newly qualified nurses.
- Evidence from the USA suggests that such schemes are successful in supporting the difficult transition but need adequate resourcing to ensure success.
- Supporting nurses during this transition would help to maintain confidence and job satisfaction and would reap longer term benefits of reduced turnover, better patient care and reduction in costs.
- Newly qualified nurses often reach a low point at six months or soon thereafter and so extended periods of support should continue beyond this.
- Whether mandatory or not, a formal one year preceptorship programme should be considered best practice.

References and information

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