# Introduction

- Nurse satisfaction influences nurse retention, patient satisfaction, and quality of care, and the ability of an organization to achieve the Quadruple Aim (Bodenheimer & Sinsky, 2014; McHugh, Kutney-Lee, Cimiotti, Sloane, & Aiken, 2011; Sikka, Morath, & Leape, 2015).
- Nurse satisfaction scores from the 2017 National Database of Nursing Quality Indicators (NDNQI) Nurse Satisfaction Survey gathered from nurses on an inpatient oncology unit at a large medical center were below the benchmark for professional development opportunities and access.

# Background

- Greater access to educational opportunities and leadership involvement in improving the nurse practice environment are associated with higher nurse satisfaction (Gardulf et al., 2008; Walker et al., 2014).
- Career coaching in nursing
- can revive enthusiasm and satisfaction, which can then influence patient care and organizational effectiveness (Walker-Reed, 2016).
- can help nurse leaders promote certification, practice transitions, leadership roles, and lifelong learning, which can impact job satisfaction and organization succession planning for growth and retention (Fletcher, 2016).

# Purpose and Aims

The purpose of this quality improvement (QI) project was to determine the effect of unit leadership-led career advancement coaching sessions with the aims to increase nurses'

- knowledge of professional development opportunities
- knowledge of professional development access
- satisfaction with professional development opportunities
- satisfaction with professional development access
- engagement in professional development opportunities
- engagement in professional development access

# Methods

- **Design:** One group pre-test/post-test QI
- Setting: Inpatient oncology unit at a large medical center in the Northeastern United States
- Sample: 14 inpatient oncology staff nurses
- Intervention:
- Over a 14-week period, the nurse specialist conducted three individual career advancement coaching sessions with each of the nurses.
- Topics discussed included clinical ladder, certification, practice transitions, leadership roles, and conference attendance.
- **Data Collection**: Pre-test and post-test administered electronically through RedCap

# Career Advancement Coaching Sessions to Increase Inpatient Oncology Nurse Knowledge, Satisfaction, and Engagement in Professional Development Opportunities and Access April Camiling-Burke, MSN, RN, AOCNS, BMTCN, Sharon Kozachik, PhD, RN, FAAN, Victoria Correale, DNP, RN-BC Executive DNP Scholarly Project; Johns Hopkins University School of Nursing, Baltimore, MD

### Table 1. Analyses

Aim	Measure			
1	Knowledge assessment			
2	Knowledge assessment			
3	Satisfaction survey adapted from the Revised Nursing Work Index (NWI-R) (Aiken & Patrician, 2000)			
4	Satisfaction survey adapted from the Revised Nursing Work Index (NWI-R) (Aiken & Patrician, 2000)			
5	Engagement questionnaire			
6	Engagement questionnaire			

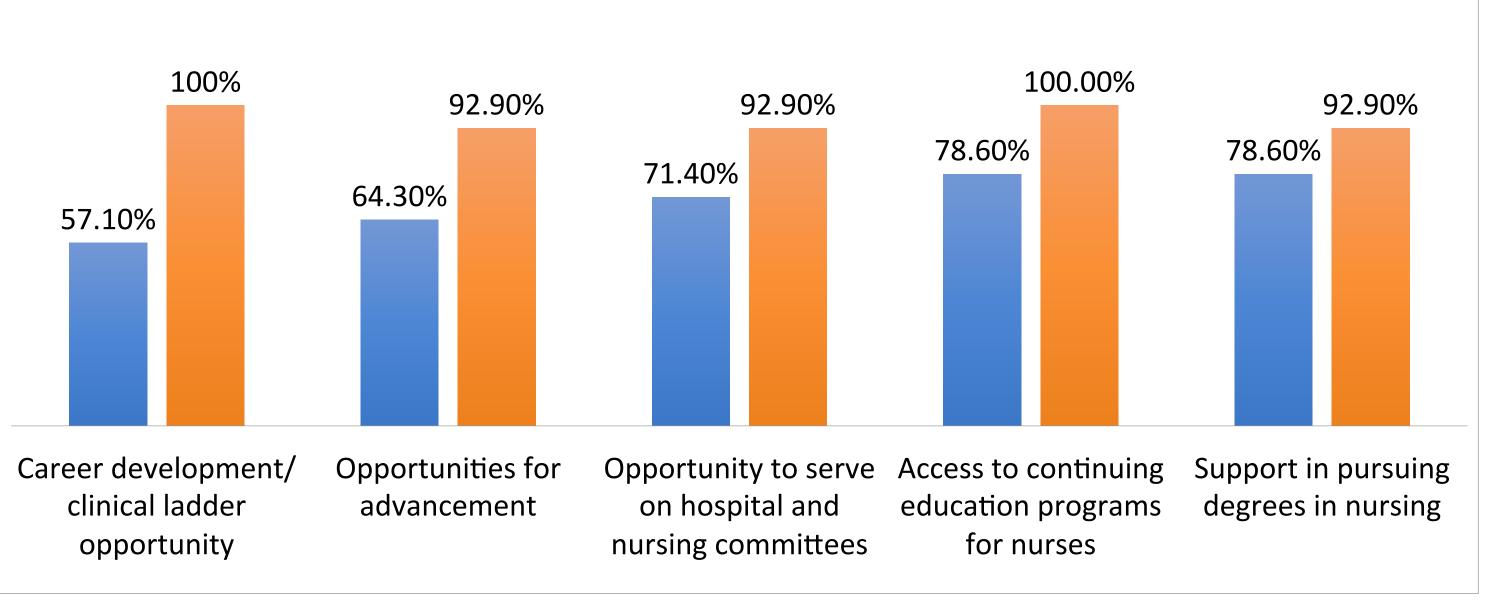
## Results

### Table 2. Baseline Characteristics of Inpatient Oncology Nurse Participants

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Demographic characteristics		(N = 14)	4)
Years practiced as a nurse at the organiza (IQR)	tion, median	4.8 (10)	)
Years practiced as a nurse on the oncolog median (IQR)	y unit,	2.5 (5)	
Gender, n (%)			
Female		13 (92.9	))
Male		1 (7.1)	
Ethnicity Hispanic or Latino, n (%)		2 (14)	
Race, n (%)			
White		9 (64.3)	)
Black-American		1 (7.1)	
Black-Caribbean		1 (7.1)	
Black-African		1 (7.1)	
American Indian or Alaska Native		1 (7.1)	
Asian		1 (7.1)	
Highest level of education in nursing, n (	2/0)		
Associate's		1 (7.1)	
Bachelor's		12 (85.7	7)
Master's		1 (7.1)	
Pursued advancement through the clinica program, n (%)	l ladder	3 (21.4)	)
IQR = interquartile range			

Aims 3 and 4: Satisfaction with Opportunities and Satisfaction with Access Figure 1. Nurse Satisfaction with Professional Development Opportunities and Access

(% Strongly Agree that this is present in your current job) (N=14)



Analyses
Wilcoxon-Signed Rank test
McNemar's test
Descriptive statistics
Descriptive statistics

Wilcoxon-Signed Rank test

McNemar's test

Pre Post

Table 3. Results of Pre- and Post- Survey Regardin
Opportunities and Access

Aim	Domain	Pre Summary Score, median (IQR)	Post Summary Score, median (IQR)	p value <sup>a</sup>
1	Knowledge of Opportunities	4.5 (4)	7 (1)	0.002*
2	Knowledge of Access	2 (1)	3 (0)	0.001*
5	Engagement in Opportunities	4 (3)	5 (2)	0.021*
6	Engagement in Access	1 (1)	2 (2)	0.125

IQR = interquartile range

<sup>a</sup>Corresponds to Wilcoxon-Signed Rank test or McNemar's test, as appropriate \*p value <0.05 are considered statistically significant

### • Aim 6: Engagement in Access

- (71.4%) of nurses post-coaching.
- which signifies individual expansions in nurse knowledge, satisfaction, and engagement.

# Conclusions

### This QI project:

- and access.
- contributed to the organization's pursuit of the Quadruple Aim.

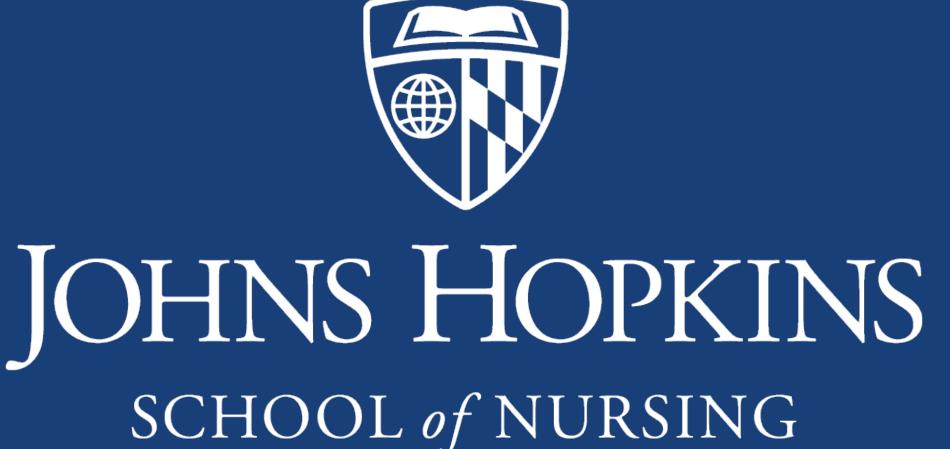
### Sustainability:

evidence-based intervention.

# References

Aiken, L. H., & Patrician, P. A. (2000). Measuring organizational traits of hospitals: The revised nursing work index. Nursing Research, 49(3), 146-153; Bodenheimer, T., & Sinsky, C. (2014). From triple to quadruple aim: care of the patient requires care of the provider. The Annals of Family Medicine, 12(6), 573-576. Retrieved from http://www.annfammed.org/content/12/6/573.full?utm\_ campaign=Top%20Content%20Rebroadcast&utm\_content=9810666 &utm\_medium=social&utm\_ \_source=twitter; Fletcher, S. (2016). Nurse education specialist utilizing career coaching to encourage lifelong learning. Journal of Nursing Education and Practice, 6(6), 71; Gardulf, A., Orton, M. L., Eriksson, L. E., Undén, M., Arnetz, B., Kajermo, K. N., & Nordström, G. (2008). Factors of importance for work satisfaction among nurses in a university hospital in Sweden. Scandinavian Journal of Caring Sciences, 22(2), 151-160; McHugh, M. D., Kutney-Lee, A., Cimiotti, J. P., Sloane, D. M., & Aiken, L. H. (2011). Nurses' widespread job dissatisfaction, burnout, and frustration with health benefits signal problems for patient care. Health Affairs, 30(2), 202-210; Sikka, R., Morath, J. M., & Leape, L. (2015). The Quadruple Aim: care, health, cost and meaning in work. Retrieved from http://citeseerx.ist.psu.edu/viewdoc/ download?doi=10.1.1.1006.9837&rep=rep1&type=pdf; Walker, K., Fitzgerald, K., & Duff, J. (2014). Supporting a healthy culture: Results of the practice environment scale, Australia in a Magnet® designated hospital. Journal of Nursing Administration, 44(12), 653-658; Walker-Reed, C.A. (2016). Clinical coaching: The means to achieving a legacy of leadership and professional development in nursing practice. Journal of Nursing Education and Practice, 6(6), 41.





### ng Knowledge and Engagement in Professional Development

• Although there was no statistically significant improvement in engagement in professional development access from pre- to post-test, 7 (50%) nurses sought or were planning to seek tuition reimbursement pre-coaching versus 10

Post-coaching engagement in conference attendance interest increased from 3 (21.4%) to 8 (57.1%) and council meeting and non-mandatory educational activity attendance increased from 8 (57.1%) to 10 (71.4%).

• The number of nurses who answered "yes" to each item in each domain after the career coaching sessions increased,

• contributed to the body of evidence on the effect of a coaching intervention on professional development opportunities

demonstrated the effectiveness of leadership-led career advancement coaching sessions on knowledge, satisfaction, and engagement in professional development opportunities and access for this adult inpatient oncology unit.

• Alignment with the organization's nursing vision and Magnet forces will aid the nurse specialist in incorporating coaching sessions into the organization's nursing structure and framework and promotes the long-term maintenance of the