TL5a

Provide one example, with supporting evidence, of the CNO's advocacy for and acquisition of organizational resources specific to nurses' well-being.

Example a: CNO Advocacy and Acquisition of Organizational Resources for Nurses' Well-Being

CNO Advocacy for Resources Related to Employee Recognition

In May 2022, Cindy Boily, MSN, RN, NEA-BC, Chief Nursing Officer and Senior Vice President at WakeMed, corresponded with Susan McFarland, Director of Employee Relations in Human Resources, about clinical nurse turnover rates. Boily requested recent clinical nurse turnover rates for all WakeMed Health & Hospitals sites. For April 2021 to March 2022, these ranged from 12% to 26%. (Evidence TL5a-1, Turnover Email)

Recognizing that RN turnover, including among WakeMed supplemental staff, was at an all-time high, Boily convened a team of key stakeholders to discuss how well-being initiatives might help stabilize the existing RN staff and attract top talent to WakeMed. The following met on May 23, 2022 to discuss well-being strategies focused on three initiatives: charge nurse recognition, preceptor recognition, and the Nursing Professional Development Program (NPDP) career ladder: Boily; Sabrina Tyndall, MSN, RN, NEA-BC, Executive Director, Cary Hospital; Waqiah Ellis, PhD, RN, NE-BC, BCC, Vice President, Nursing, Raleigh; Beth Fifield, MSN, RN, NE-BC, Executive Director, North Hospital; Sandy Wheaton, MSN, RN, NE-BC, Director, Staffing Resources; Veronica Baricevic, MS, CCP, Executive Director, Total Rewards & Human Resources Information System (HRIS); and Jeronica Goodwin, DHA, Senior Vice President Human Resources & Chief People Officer.

While nurses who participated in the NPDP had received points for serving as a charge nurse or preceptor, those not in the NPDP did not receive charge or preceptor pay differentials. The group discussed a proposal to offer charge nurse and preceptor pay regardless of participation in NPDP. Tyndall expressed the concern that providing charge nurse and preceptor pay would negatively affect participation in the NPDP. Baricevic offered to investigate whether the current existing pay for serving in the charge nurse and preceptor role was market competitive. Boily advocated for a change in charge nurse and preceptor pay for those not participating in the NPDP. She proposed that WakeMed ensure the differential pay be increased to the top of the proposed scale to remain market competitive.

The group also discussed adding years of experience to the NPDP program criteria. Nurses had requested that both their education and years of experience be recognized in the career ladder program. In February-March 2024, a survey was sent to clinical nurses who participate in NPDP, Clinical Nurse Council representatives, and clinical nurses who serve on councils, requesting their input into the current NPDP. The response rate was 20%. Clinical nurses expressed dissatisfaction with the program and not being recognized for their contributions, with some stating the following: "no longer

motivated;" "feel our work is not valued;" "my years of service, my contributions, my experience, my time, nor my effort are of no value;" and "not incentivized for professional growth or leadership."

The program had two levels based on educational preparation, neither of which recognized years of experience. A market analysis revealed that other area hospital career ladder programs offered multiple levels based on education and years of experience. Tyndall, Ellis, Fifield, and Wheaton recommended that additional levels be developed for the NPDP that would incorporate years of experience. As Boily recognizes the importance of supporting nurse well-being through employee recognition, she advocated that the team move forward with developing a clinical ladder program that recognizes both education and years of experience, and includes differential pay for charge nurse and preceptor roles. Boily introduced the proposal to Tom Gough, MA, Chief Operating Officer, and Rick Carrico, MBA, Chief Financial Officer, for their approval at the May 23, 2022, Retention Strategies for Nurse Wellbeing meeting. (Evidence TL5a-2, Retention Strategies for Nurse Well-Being May 2022 Meeting Minutes)

Leaders from Nursing, Human Resources, and Administration met several times in July and August 2022 to review, update, and finalize the proposed nurse recognition and compensation plan, ensuring alignment of priorities. At the July 2022 Retention Strategies for Nurse Well-Being meeting, Baricevic gave a PowerPoint presentation to review turnover and vacancy rates, financial impact of compensation programs, market analysis, projected costs, and considerations. Topics discussed included base pay, preceptor pay, and charge nurse pay. Boily supported the proposed changes and advocated for the Clinical Nurse I–IV Level Ladder and pay practices to be presented to executive partners for sign off and approval.

Boily requested that Carrico; Gough; Stephanie Sessoms, Vice President Finance; and Barry McKee, MBA, Executive Director Financial Planning, be added to the Retention Strategies for Nurse Well-Being team meetings. Boily also asked Human Resources, as the content experts, to present the current state, projected compensation models, and financial considerations to the executive leaders on the Retention Strategies for Nurse Well-Being Team at the August 16, 2022, meeting. In Baricevic's PowerPoint presentation she also reviewed preceptor pay details including market pay ranges (an additional \$1.40 – \$2.90 per hour) and charge nurse market pay ranges (\$1.50 – \$1.75). At their August 2022 meeting, the team discussed the clinical ladder, approved pay for preceptors and charge nurses, and readied it to be added into the job descriptions in Halogen. (Evidence TL5a-3, Retention Strategies for Nurse Well-Being August 2022 Meeting Minutes)

CNO Acquisition of Resources for Organization's Nurses

The new nursing clinical ladder promoting employee recognition as a key strategy for nurse well-being and retention was implemented on September 25, 2022. Each eligible nurse received an individualized letter from Boily and Donald Gintzig, President and

Chief Executive Officer, recognizing their new job title based on their educational preparation and years of experience. (Evidence TL5a-4, Employee Letter)

Since recognizing years of experience as part of the updated NPDP and implementing charge nurse pay at \$2.00/hr and preceptor pay at \$2.00/hr to support nurse well-being, clinical nurse turnover improved to 17.79% in April 2024 (including supplemental staff). Nurses report feeling valued and recognized for their expertise and clinical competence, which are essential to overall well-being. (Evidence TL5a-5, Turnover Dashboard)