

Determining the Impact of Best Fit for Newly Licensed Nurses

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Preparing new nursing graduates for independent practice as soon as safely possible is vital for both efficient and effective patient care. The alignment between a nurse's personality and specialty practice area may impact orientation length, as nurses who are better suited to their job role may adapt more quickly. The current study revealed that nurses hired into a specialty practice area with a higher job fit demonstrates a significant reduction in orientation time.

Registered nurses (RNs) are an essential component of healthcare delivery; however, retaining newly licensed nurses can be a challenge for organizations. The current RN turnover rate in the United States is 15.9% (Nursing Solutions, 2020). New nurses are at the highest risk of leaving, with 27.6% of all new hired nurses leaving within a year (Nursing Solutions, 2020). Finding ways to increase retention and job satisfaction while also addressing the reasons why new nurses leave is vital to improved healthcare delivery. Nursing professional development educators can help address these issues by ensuring new nurses are hired into the clinical specialty that is the best fit for their personality.

For newly licensed nurses, the transition between leaving school and beginning clinical practice can be a stressful time as they acclimate to their new roles (Blevin, 2018;

Hofler & Thomas, 2016). In addition, RNs who report higher levels of stress are more likely to leave their organization (Mazurenko et al., 2015). One potential source of stress during this period of transition may be lack of fit between a nurse's personality and the nurse specialty in which they are placed. Better job fit is associated with better job satisfaction (Warr & Inceolgu, 2012), and personality can be predictive of job performance (Riggio & Taylor, 2000). Personality has been known to be an important factor in job satisfaction and success for decades (Costa et al., 1995). However, nurses are often placed into a specialty by their own preferences or based on the organization's needs. This may not reflect the best fit for their personality, which could lead to dissatisfaction and ultimately leaving the organization. A review of the literature conducted by Kennedy et al. (2014) demonstrated a relationship between personality and nursing specialty, as well as burnout and job satisfaction; however, there is a dearth of research exploring the relationship between personality, clinical specialty placement, and retention.

Furthermore, lack of fit between a new nurse and their specialty could also lead to a longer orientation time, which can impact both nurse satisfaction and vital resources needed for safe patient care. Difficulty adapting to the work environment and unit culture is one of the major challenges a newly licensed nurse faces (Regan et al., 2017). Nurses who are better aligned to their job role can adapt and acclimate to their new environment more quickly, thereby reducing the amount of time spent in onboarding. Orientation for newly licensed RNs can be as short as 6 days or as long as a year (Pertiwi & Hariyati, 2019). Research does suggest that newly licensed RN orientation should be at least 4 weeks long, but these shorter orientations can be just as effective as longer programs (Pertiwi & Hariyati, 2019). Decreasing orientation length is a common goal of many onboarding and nurse residency programs (Allen, 2011; Beyea et al., 2010). Shorter orientation time can save organization time, money, and vital resources while serving the professional needs of the individual nurse.

Nurses who may not be well suited for a particular job role may seek other opportunities within the organization. This can lead to transfer to other units where the onboarding process starts over and the cumulative effect can be both financial and resource intensive. Despite a dearth of research into the reasons for a department transfer, nurses who start

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Elise G. Valdes and Felicia Sadler are employed by Relias, the company that makes the job fit measure used in the current study. Laura Douglas and Jessica Oliveira have no conflicts to report.

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out in specialties that have a better job fit are likely to see lower transfer rates. Numerous anecdotal reports state that self-reflection and an assessment of personality and preferences are key to choosing or changing nurse specialties (Ghannad, 2019; Hess, 2018; Swanson, 2019). However, little research has been conducted to examine these anecdotal associations of job fit and transfer.

Overall, research and anecdotal reports suggest that a better fit between a nurse's personality and their clinical specialty may have measurable benefits for hiring organizations. However, there has been little research directly correlating job fit with these important outcomes. The purpose of the current study was to examine if nurses hired into a specialty practice area that best matches their personality will have lower turnover, fewer transfers, and shorter orientation times.

METHODS

Study Setting and Participants

Memorial Hermann Health System is one of the largest not-for-profit health systems in Southeast Texas, with 17 hospitals and numerous ambulatory clinics throughout the Greater Houston area. Currently, 13 hospitals participate in the Memorial Hermann Health System Nurse Residency Program. The 12-month program accepts three cohorts of nurse residents each year and is accredited through the American Nurses Credentialing Center Practice Transitions Accreditation Program. On average, the Memorial Hermann's Nurse Residency Program accepts approximately 526 nurse residents into the program annually, with newly licensed nurses defined as nurses with less than 1 year of acute care experience. Existing data collected from all graduate nurses hired by Memorial Hermann between July 1, 2015, and July 1, 2019, at 13 acute care hospitals were included in the study with outcome data collected through May 2020. Demographic variables included age and gender. These variables will be used to describe the sample.

Job Fit Measure

The job fit assessment from the Relias Assessments prehire behavioral assessment (formerly known as Prophecy, a product of Relias) was the predictor variable. Relias Assessments assesses personality attributes, such as teamwork, skills, and ability to handle high-stress environments that help determine a candidate's suitability for a particular role. When an applicant meets the minimum requirements to apply for a job, the behavioral assessment is administered before the candidate interviews with a hiring manager. Assessment results are then utilized to match candidates with their "best fit" clinical specialty area, identified as the setting where they are more likely to be successful. Job fit scores are determined for five clinical specialty areas, including medical-surgical, intensive care unit, neonatal

intensive care unit, emergency department, and labor and delivery, and range from 0 to 100, with higher scores indicating better fit. The behavioral assessment report assists the interviewer in focusing the interview on any potentially concerning areas and to identify best fit for the organization and the role.

The assessment contains 70 Likert scale questions ranging from *strongly disagree* to *strongly agree* on a 5-point continuum. The assessment is based on the Big 5 Personality Inventory (Costa et al., 1995; Pytlik Zillig et al., 2002) and is reliable, with Cronbach's alphas ranging from .61 to .83, and valid, with median correlation of .71 with the Revised Neuroticism Extroversion Openness Personality Inventory (PeopleClues, 2012). The assessment determines best fit for each clinical area using correlations between assessment results and how someone performed on the job for each specialty based on job performance criteria specific to that clinical role. For the current study, only nurses who were hired into one of the five clinical specialty areas, including medical-surgical, intensive care unit, neonatal intensive care unit, emergency department, and labor and delivery, were included. For the analysis, the job fit score for the clinical specialty area the nurse was hired into was used as the predictor variable.

Process and Procedures

Currently at Memorial Hermann, the Relias Assessments behavioral assessment is administered during the application and hiring process by the talent acquisition (human resources) department. For the newly licensed RN residency positions (the studied population), the behavioral assessments are compiled on a report and distributed to the hiring managers and directors for review. The report contains the following domains: candidates' names, campus choice, first and second choice of desired clinical unit, the top three "best fit" clinical areas from the behavioral assessment, attitude, and job engagement scores from the behavioral assessment. The report also contains a direct electronic hyperlink for the leaders to access should they need to see the full behavioral report in more detail and the accompanied interview questions. This report acts as a guide to assist hiring leaders with determining whom they desire to bring to the campuses' "Match Day," where the nurse residents interview with multiple clinical departments in efforts to be hired to unit that they are deemed a best fit with.

The Relias Assessments behavioral assessment is administered to all clinical position applicants at Memorial Hermann, but the identified population described above has a unique process because of the volume of nurse residents that enter the organization each year. For all other clinical positions outside the nurse residency program, the behavioral assessment is required to be reviewed by the hiring leaders before the talent acquisition department schedules the applicant for an interview. During the

interview, it is recommended that the interviewing panel uses the accompanying questions from the behavioral assessment to guide the interview and highlight any low scoring behavioral attributes.

Outcomes Measures

Retention was defined as a binary variable in which a nurse was either still employed by the organization at the end of follow-up or not. Transfer was defined as a binary variable in which a nurse was either still in the original role into which they were hired at the end of follow-up, or they had transferred to a different role within Memorial Hermann. Orientation length was a continuous variable with time measured in days.

RESULTS

Because of privacy considerations and data limitations, only aggregate data of all nurse residents were able to be obtained. The demographic descriptions of all nurse residents in the Memorial Hermann nurse residency program reported that 86% were women, with an average age of 27.4 years old. The analytic sample contained 1,712 nurses who were hired by the Memorial Hermann Health System between 2015 and 2019 into one of the five clinical roles. The average job fit score was 74.5, *SD* = 19.11, with 25.4% of the sample turning over during the study period and 8.2% of the sample transferring to a different unit. One-year turnover for the group was 4.8%. Average orientation length by specialty was 162.54 days (*SD* = 34.12) for emergency department nurses, 151.70 days (*SD* = 46.52) for intensive care unit nurses, 166.55 (*SD* = 30.52) days for labor and delivery nurses, 99.07 (*SD* = 27.68) for medical surgical nurses, and 151.66 (*SD* = 72.10) for neonatal intensive care unit nurses. Fifty-eight nurses were excluded from the orientation length analysis because of missing data, but an independent-samples *t* test indicated there was not a significant difference in job fit score between those with and without orientation length data, $t(1710) = -1.584, p = .11$.

Correlation results indicated there was no significant relationship between job fit score and turnover, $r(1710) = .011, p = .66$, or transfer, $r(1710) = -.013, p = .58$; however, there was a significant correlation between job fit score and days of orientation, $r(1652) = -.08, p = .001$, in which higher job fit scores were associated with fewer days of orientation. Those above and below the mean job fit score (75) were then compared on days of orientation, and an independent-samples *t* test indicated that those with job fit scores of 75 or higher had on average 6.5 days fewer of orientation compared to those with job fit scores below 75, $t(1652) = 2.439, p = .02$. See Table 1.

DISCUSSION

The goal of the current study was to examine if nurses hired into specialty practice areas that best match their

personality would have lower turnover, fewer transfers, and shorter orientation times. Results showed a significant correlation between job fit and orientation length with higher job fit scores being associated with shorter orientation times; however, there was no correlation between job fit scores and turnover or transfer.

Newly licensed RNs often struggle to acclimate to their new roles causing tension because nurse managers need nurses ready for independent practice as soon as possible (Chernomas et al., 2009). Our results suggest that hiring nurses into roles for which they have a high job fit may reduce some of this tension, allowing them to complete orientation sooner. Nurses who had lower job fit scores for their role may have had longer orientation times because they had a more difficult time assimilating into their role.

Limitations

Although there was not a significant relationship found between turnover and job fit score, this could be due to limitations in the data. There are many reasons for turnover, some voluntary and some involuntary (Kovner et al., 2014). It was not possible to reliably determine reasons for turnover, and thus, all turnover was grouped together regardless of reason. It may be the case that job fit has a larger effect on some types of turnover than others. For example, job fit may have a larger effect on turnover because of unsatisfactory performance than turnover because of family obligations or commute time.

Directions for Future Research

Although shorter orientation times mean cost savings, future research should investigate to ensure the shorter orientation times are associated with equal or improved nurse satisfaction as well as equal or improved patient care. In addition, future research should further explore the relationship between different types of turnover and job fit. This would help clarify if perhaps job fit scores predict turnover related to poor performance or lack of job satisfaction, while not impacting turnover because of extraneous factors such as commute times, family obligations, or relocating out of the area.

TABLE 1 Average Length of Orientation in Days by Those Above and Below the Mean Job Fit Score of 75

	Average Length of Orientation in Days	<i>t</i> Score	<i>p</i>
Nurses with job fit scores of above 75	129.01	2.349	.015
Nurses with job fit scores of below 75	135.51		

Implications

This study has several implications for staff development educators or nurse professional development practitioners. When pairing an orientee and preceptor, an educator may want to ensure the two are a good fit and will have a prosperous orientation relationship. With this study, the Relias Assessments behavioral assessment helped match a nurse to a desired clinical unit of hire through behavioral attributes. The assessment also includes a personalized coaching and development plan, which helps match the new nurse with an appropriate preceptor, which could keep the orientation focused and on track. The report provides insight into personality attributes with suggestions of areas to focus attention and provides recommendations for addressing key areas. This provides the preceptors and educators the ability to proactively address key areas for an individual within the specific clinical practice areas relative to personality.

Reducing orientation time of the newly licensed RN will allow preceptors to have a break in between orienting the next cohort of nurse residents. This could then help to reduce overall preceptor fatigue, which is a barrier to effective preceptorship (Barker & Pittman, 2008). Most preceptors have a positive perception of their role; however, time pressures and feelings of perpetually being “on” can wear down even the most positive preceptor (Barker & Pittman, 2008; Muir et al., 2013). Reducing orientation time can allow preceptors time between cohorts to focus on their primary role without the additional pressures from precepting.

Another implication for nurse educators when scheduling and preparing for their nurse’s orientation is promoting a sense of independence with shorter orientation times. Upon completion of orientation, the nurse resident has a sense of autonomy that comes with independent practice while utilizing the department’s resources to aid in providing patient care. Increasing a new nurse’s self-confidence and self-efficacy are important factors in a new nurse’s success (Kim & Shin, 2020). Satisfaction with their team, which is likely related to higher job fit, is a key component of newly licensed RN self-confidence (Pfaff et al., 2014).

Lastly, shorter orientation lengths can potentially save the healthcare organization money by reducing overall orientation costs. Orientation costs can range between \$11,200 and \$50,000 per nurse, but can be even higher (Cortes, 2018; Trepanier et al., 2012). It is essential for organizations to have an effective and efficient orientation process. This process promotes a positive learning environment for the professional nurse while meeting the staffing needs of the organization. Furthermore, the ability to shorten the orientation times can save time and resources. With a reduction in orientation time, not only does the cost reduce for the unit, but it also allows for the nurse to become an independent contributor to safe and effective patient care delivery and to the interdisciplinary care team.

CONCLUSIONS

Overall, the current study showed that placing new nurses into roles that are a better fit for their personality may lead to shorter orientation times. Shortening orientation time by 6.5 days could have valuable benefits for cost savings, staff morale, and feelings of independence. Although, this study found no impact overall turnover or transfer, future research should investigate to determine job fit impacts turnover differently depending on the type of turnover. Nurse educators should consider using a tool that includes job fit to ensure they are hiring new nurses into a role for which they are best suited.

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