

Implementing Gallup 12+ Employee Engagement Survey in a Critical Access Hospital

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Results

- Initial Survey: 119/156 people responded
- Resurvey: 80/119 people responded
- +6% in organizational improvements (questions 14, 16)
- question 4 scored low indicating that there is an organizational problem with providing recognition
- 72% of staff say that a personalized thank you is adequate to be categorized as recognition for good work
- Medical-Surgical and Obstetrics scored high indicating high staff engagement levels
- The OR scored 50% and lower on 11/17 questions, indicating low staff engagement and workplace satisfaction

	Gallup Survey Questions	Initial	Post-Intervention
1	00. How satisfied are you with your company as a place to work?	88%	86%
2	1. I know what is expected of me at work	97%	94%
3	2. I have the materials and equipment I need to do my job right	87%	78%
4	3. At work, I have the opportunity to do what I do best every day.	82%	88%
5	4. In the last seven days, I have received recognition or praise for doing good work	47%	51%
6	5. My supervisor or someone at work seems to care about me as a person	85%	93%
7	6. There is someone at work who encourages my development	76%	74%
8	7. At work my opinions seems to count	61%	68%
9	8. The mission of my company makes me feel my job is important	77%	75%
10	9. My associates or fellow employees are committed to doing good work	92%	85%
11	10. I have a best friend at work	45%	44%
12	11. In the past six months, someone has talked to me about my progress	62%	83%
13	12. This last year I have had opportunities at work to learn and grow	76%	80%
14	13. At work I am treated with respect	87%	89%
15	14. My organization cares about my overall well being	70%	76%
16	15. I have received meaningful feedback in the last week	48%	51%
17	16. My organization always delivers on promises we make to customers	55%	61%
18			

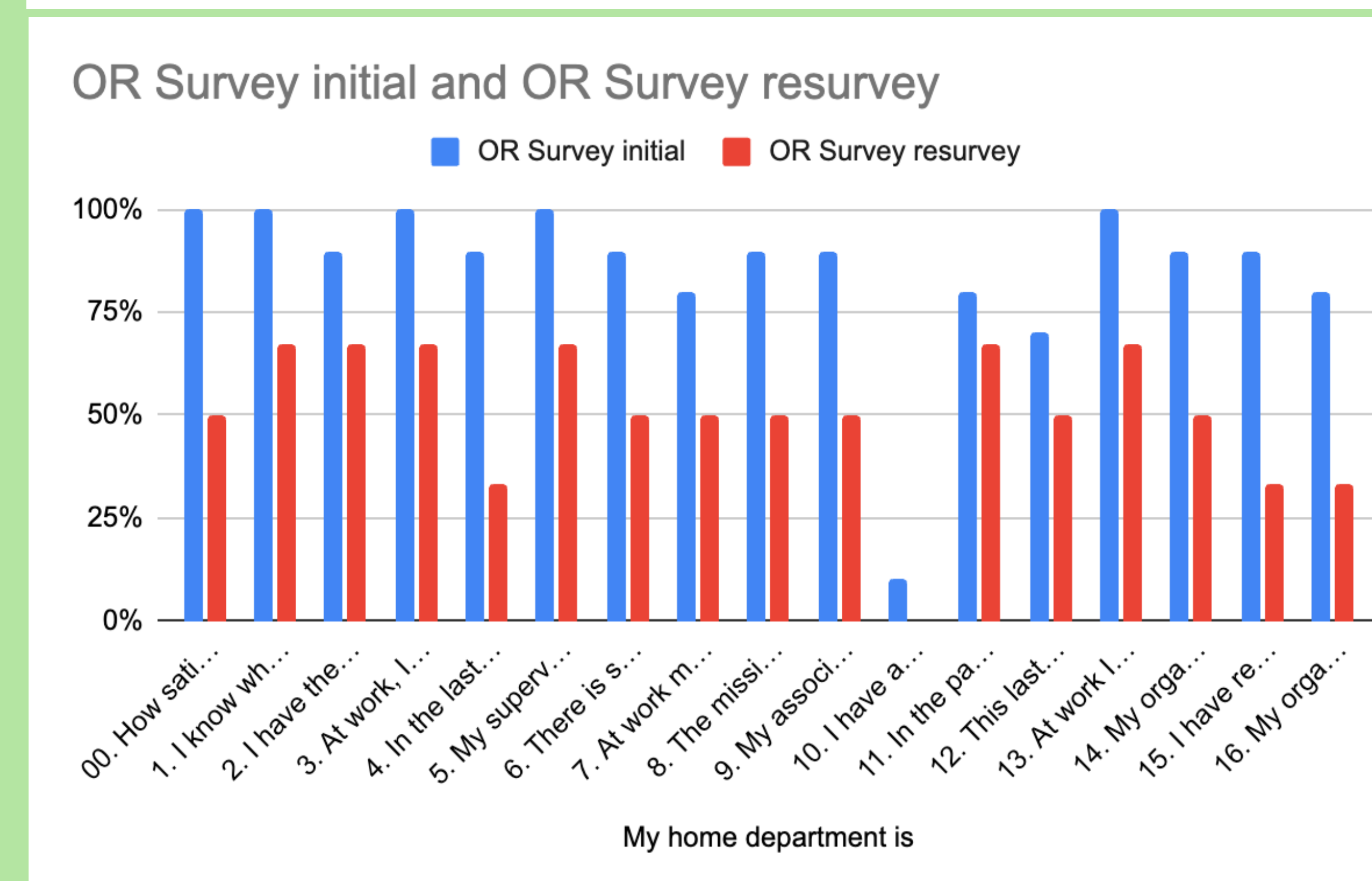
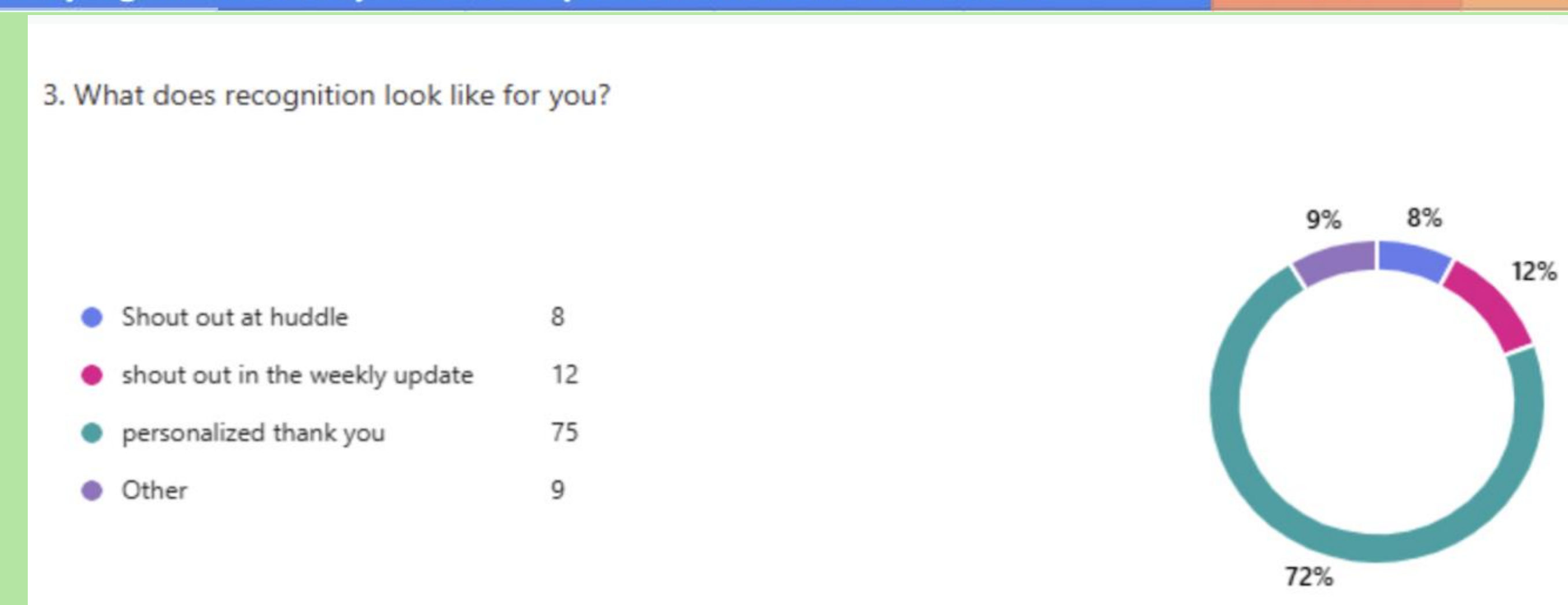
Methods

This project utilized the Model for Improvement (MFI) framework and used Plan-Do-Study-Act (PDSA) to carry-out the survey administration and intervention. The sample setting was at LRH, 25-bed critical access hospital. The baseline survey was sent to 156 on Microsoft forms on March 1 and closed March 15. Five directed education sessions were conducted from April 10 to April 25. Following this period, directed education sessions were conducted from April 10 to April 25. These sessions were three hours and a presentation focusing on moral distress, organizational support, decompression strategies, and communication was given by the Director of Nursing, Kim Force. A follow-up survey was sent out on Microsoft Forms to the 119 participants who completed he only identifying data collected was the home unit. Data was analyzed using the Likert scale, with results calculated by the number of participants responding with "agree" or "strongly agree" to a question. Descriptive statistics were created based on average scores for each question and each unit.

Discussion

Directed Education Sessions at LRH improved staff perception and understanding of organizational support. Questions pertaining to engagement at an organizational level, such as questions 14 and 16, had 6% increases after the intervention. However, consistently low scores in categories asking about recognition and feedback indicate a macro-level communication problem. Unit-level analysis demonstrated differences in engagement levels across units, with units like Medical-Surgical and Obstetrics scoring consistently high and certain units like the OR reporting lower levels of engagement in the resurvey. These differences indicate micro-level problems relating to nursing management in the specific unit. The results indicate that while the directed education sessions were helpful for certain macro-level problems, micro-level problems need targeted intervention by their management to improve and sustain high engagement scores, which decreases the risk for nursing burnout.

References can be found using this QR Code.



Introduction

The Gallup Q12+ survey is comprised of 17 questions that are used to calculate staff engagement. This survey is grounded in decades of research by Dr. Gallup and Dr. Clifton, offering a structured approach to calculate staff engagement. It categorizes the contents of the question into a hierarchy from basic needs to opportunities to inspire personal growth in staff. In the nursing profession, especially post-pandemic, assessing staff engagement is essential because nursing burnout rates are at an all-time high. Littleton Regional Hospital (LRH) is a level 3 trauma center and critical access hospital, has not conducted a workplace engagement survey since 2018. This quality improvement project aimed to implement the Gallup Q12+ survey to assess baseline work engagement and then have nursing staff attend directed education sessions to assess improvements in staff engagement scores. This project addresses both institutional and unit-level concerns during a national nursing shortage due to nursing burnout.

