

Factors that motivate nurses to provide quality patient care in a rural hospital in Vhembe district, Limpopo Province, South Africa

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Abstract

Health services in rural areas are known to be under-resourced in several ways and working conditions are often described as unfavourable. Nurses working under such conditions are likely to be demotivated; however, it seems that not all nurses feel demotivated because of the number of nurses who remain and serve in those areas. This article describes factors that motivate nurses to render quality patient care in a rural hospital in Vhembe district of Limpopo Province in South Africa. A qualitative, exploratory, descriptive research design guided by an Appreciative Inquiry approach was used. Individual semi-structured interviews with 20 participants were conducted and analysis was conducted according to Tesch's open-coding technique. The results indicated both intrinsic and extrinsic factors as motivators, which relate to the events in participants' personal and social life as well as those in the work environment. Passion for the job was identified as the key driver from the intrinsic space while open communication from the employer was raised by the majority of participants as an external driver. This study revealed that although nurses in a rural hospital have challenges that can negatively impact on their motivational levels, their internal drive to care overcomes any negative factors.

Keywords: Motivation, nurses, quality patient care, rural hospital.

How to cite this article:

Luhailima, T.R., Mulaudzi, F.M. & Phetlhu, D.R. (2014). Factors that motivate nurses to provide quality patient care in a rural hospital in Vhembe district, Limpopo Province, South Africa. *African Journal for Physical, Health Education, Recreation and Dance*, October (Supplement 1:2), 473-484.

Introduction

The deterioration in the standards of provision of nursing care in public hospitals remains a huge challenge in South Africa (SA) as a result of shortages of trained professional nurses, lack of resources to function effectively, inadequate treatment modalities, poor infrastructure and non-recognition of good performance by managers and supervisors among others (Fongq, 2009; South African Human Research Council, 2009). The challenges are compounded by a considerable shortage of nurse specialists, which forces those who are employed to care for more patients and often without the required skills. Such a situation results in increased risks for poor nursing care (Brannigan, 2009). Nonetheless, nurses in these challenging environments are still expected to perform effectively

and render quality care to their patients. The consequences are often manifested by nurses' state of demoralisation and demotivation created by a lack of safety and security, a lack of self-worth, and a lack of confidence in one's own capabilities (Zondagh, 2004; Vhuromu & Davhana-Maselesele, 2009).

The challenges are most frequent in rural areas because of high staff shortages experienced in these areas. Skilled health care professionals prefer to work in urban areas where better work opportunities and infrastructure exist, as well as schools for their children and spouses (Hwara, 2009). The SA government introduced rural allowance in 2003 to attract and motivate professionals to work in rural areas. However, it is still difficult to reach the targets envisaged, as nurses still find themselves faced with unfavourable work environments which prevail in rural hospitals. Despite all the challenges there are nurses who are still motivated to continue rendering quality patient care with limited resources.

The presence of different forms of motivators is important in such environments for sustaining the nurses' motivation index. According to Daft (2000), motivation is generally defined as "the arousal, direction and persistence of behaviour". The degree of motivation relies on the extent to which a person is inspired, and how determined a person is to achieve his or her goal (Ryan & Deci, 2000). Herzberg (1968) highlighted factors such as the work itself, achievement, responsibility, promotion, growth, recognition and, most importantly, the person's desire to perform better as motivators of effective performance. According to Ryan and Deci (2000), there are two types of motivation: intrinsic and extrinsic. Hunter (2008) and Beswick (2009) present intrinsic motivation as actions or activities performed out of free will. In the nursing environment, free will lies behind nurses' choice to perform their work zealously under unfavourable conditions that might not give rewards. Intrinsic motivation originates from genuine interest in the job and differs from extrinsic motivation in that psychological gratification, in itself, is the reward (Beswick, 2009).

Extrinsic motivation refers to motivation prompted by outside or external factors. In a work environment, extrinsic motivation is applicable when the employer uses motivators, such as awards for work well done and/or higher salaries to encourage employees (Robbins, Judge, Odendaal & Roodt, 2009). In SA, extrinsic solutions such as rural allowance, danger allowances in psychiatric units and Occupational Specific Dispensations (OSDs) have been implemented as measures to motivate nurses. However, few successes have been reported. Although rewards for outstanding service and constructive feedback by managers as valuable extrinsic motivators have been noted, Bradley & Christensen (2007) the value of self motivated nurses towards rendering high quality patient care has been acknowledged in motivation studies (Jooste & Kilpert, 2002).

Both intrinsic and extrinsic motivations are essential in the work environment (Ryan & Deci, 2000; Beswick, 2009). The individual has control over intrinsic factors in the environment while extrinsic factors are controlled by the employers and supervisors. As human beings differ from one another, so do nurses. They react differently and are motivated by different factors. Accordingly, the motivating factors for an individual nurse are linked to a nurse's individual needs, aspirations and values (often found in the work itself), achievement, responsibility and recognition (Herzberg, 2003).

In a study by Robbins, et al. (2009) it was reported that setting of challenging goals for high-self-esteem employees stimulates their confidence and that alone will motivate them to accomplish the task efficiently. Self-motivated employees are not afraid of change and are flexible. They are not distracted or disoriented by changes and challenges. They adapt to different conditions and persevere even though obstacles and setbacks exist. They are not afraid to take risks. These characteristics are those of nurses in rural areas who still stay in their challenging work environment in their quest to deliver quality patient care.

Although the literature describes the challenges experienced in rural areas, and as a phenomenon on other parts of the world, there is limited literature available in this study's context. Vhembe district in Limpopo Province of South Africa is a setting that is resource challenged, yet has nurses who follow their quest to render quality care. The researchers opted to use the Herzberg two factor theory of motivation (Herzberg 1968: 50-64) as a framework to phrase the research questions and analysis of the findings to describe the factors that motivate nurses to continue to render quality patient care in a rural hospital. Based on the results from their initial study, Herzberg in the late 1960s as well as Rowan in early 2000 concluded that the two separate elements contributing to employees' behaviour at work are *intrinsic* and *extrinsic* factors (Herzberg 1968: 50-64; Rowan, 2007: 43-56). These two elements together influence motivation in the workplace.

The aim of this study was to explore and describe the perceptions of nurses as to what motivated them to render quality patient care in a rural hospital by using an AI approach.

Methodology

Research design

A qualitative explorative, descriptive and contextual study design was used. This design enabled the researchers to understand the perceptions of nurses with regard to factors that motivate them to render quality patient care in a rural hospital. The study was conducted at a regional hospital situated in the Vhembe district of Limpopo province in South Africa. The 538-bed hospital is categorised as regional hospital, which represents a level lower than a tertiary hospital but a level higher than district hospitals. It is a 'level two' hospital to which all the district hospitals in the Vhembe district refer their patients for further treatment. The hospital also serves as a 'level one' hospital because there is no district hospital in that area. Patients from this hospital are referred to tertiary hospitals for further treatment. About 20,918 patients are admitted annually. The total number of nurses was 609, of whom 280 were Registered Professional Nurses (RPNs), 157 Registered Staff Nurses (RSNs) and 172 Registered Assistant Nurses (RANs) (Hospital Personnel Statistics: 2013: n. p).

Population sample and sampling procedure

Non-probability sample was used for participants' selection from a population comprising all categories of nurse working in the Vhembe district rural regional hospital (Mouton, 2004; Burns & Grove, 2009). The criteria for inclusion were: registered professional nurses who are working in the wards/units and directly providing patient care; assistant and operational managers who are directly supervising rendering of patient care. A total number of 20 nurses participated in the study.

Data collection

Individual semi-structured interviews were conducted with 20 nurses comprised two questions: 1. *What are the perceptions of nurses regarding the extrinsic factors that motivate them to render quality patient care in a rural hospital?* 2. *What are the perceptions of nurses regarding the intrinsic factors that motivate them to render quality patient care in a rural hospital?* (Denzin & Lincoln, 2000; Brink, 2006; Polit & Beck, 2008). The discovery stage of the Appreciative Inquiry (AI) approach was used to phrase questions intended to initiate positive transformative discussions with participants. Probing statements also phrased from a positive approach were used to enrich the discussions. The researchers stopped data collection after twenty interviews because no new information related to the patterns formed in the discussion were forthcoming, which indicated data saturation (Polit & Beck, 2012).

Ethical considerations

In order to ensure a high standard of research, ethical standards and measures are set out to direct the research (Polit & Beck, 2008). The research proposal was reviewed by the Research Ethics Committee of the Faculty of Health Science of the University of Pretoria as well as by the Limpopo Province Department of Health and the hospital at which the research was conducted. This was done to make certain that the rights and welfare of the nurses involved were protected, that appropriate methods were used to secure informed consent and that the potential benefits and risks of the investigation were observed (Polit & Beck, 2008).

The researcher conducted this study with honesty and integrity and made sure that all ethical considerations were implemented appropriately. During the data-collection processes she ensured that all the participants were treated with respect and dignity. She further adhered to the prescribed ethical principles of research in that none of the gathered data or no participant's name was disclosed. Therefore, confidentiality and anonymity were guaranteed (Polit & Beck, 2008). The researchers considered the protection of the participants in this study by ensuring that ethical principles were applied through the process of conducting interviews. The researchers explained that the information participants gave throughout the interviews and the findings was not going to be used against them but that it would be published in a way that would maintain confidentiality and anonymity throughout.

Data analysis

Data was analysed by open coding, based on Tesch (cited in Creswell, 2009). The six steps of Creswell (2009) were used during the thematic analysis. Coding ensured that a small number of themes or categories were generated and was in line with Herzberg's two factor theory, which underpinned this study. Data analyses were carried out by the researchers and an independent coder who assisted with data analysis. The researchers compared the independent coder's data analysis with the researcher's version to enhance correctness.

Trustworthiness

To ensure the trustworthiness of the findings the following criteria were used: credibility, transferability, dependability, conformability and authenticity. A rich description of research design, procedures, study context and findings are given (Polit & Beck, 2008; Holloway & Wheeler, 2010). An audit trail was kept for all the processes that were followed. A pilot study was conducted to ensure that the questions were phrased correctly. Data were collected over a period of five months and all the interviews were recorded by a digital voice recorder.

Results

Findings revealed that financial incentives such as salary and non-financial incentives and other benefits play a vital role with regard to motivation. Findings revealed that nurses were motivated by internal (intrinsic) and external (extrinsic) factors to render quality patient care in their rural hospital. Participants indicated that they were motivated intrinsically when rendering quality patient care each day notwithstanding the challenges they faced in their rural hospital.

Recognition for good work implies to receive the acknowledgement that nurses deserve for a job well done. Participants identified that they welcomed being recognised for their efforts and accomplishments through encouragement of work well done. Participants identified recognition as a link between the financial rewards and non-financial rewards and stated that it motivates them when appropriately dispersed. Participants further indicated that rewards could only motivate them if they are worthwhile the time when and why it is given.

Participants stated that recognition should be done effectively without losing sight of motivation. Again the participants expressed that each nurse be given what he/she deserves without favouritism. Participants also expressed that recognition must not be a norm as it could lose its value and becomes useless as far as motivation is concerned. The participants indicated that recognition for good work from the supervisors/managers and patients motivate them. For the participants recognition covered both non-financial and financial incentives.

Performance linked with non-financial incentives

Performance linked with non-financial incentives was felt as an essential motivator that made participants render quality patient care knowing that they were going to get non-financial rewards. The following statement illustrates:

“People are motivated by different rewards done in different forms. Rewards motivate me, such as awarding of certificates, celebrations, ceremonies like throwing a party just to make fun, receiving a trophy, which is motivating in the work situation. Everybody could also do best in order to receive such awards.”

One of the participants spoke of rewards given in the form of support from the management as a personal motivator:

“Eeh... other factors that motivate me is to be rewarded in terms of the support from the management or our government that is going to meet my needs including sufficient resources, supportive peers and management structures, manageable workload, and effective occupational services to assist in case we

have work related health challenges. I have mentioned that as an example nevertheless there are so many factors that if are done appropriately in our rural hospital that could motivate us a lot.”

The quotations seem to imply that the value of rewards varies from person to person and also the types of rewards are important depending on an individual's likes or dislikes.

Performance rewards linked with financial incentives

Performance rewards linked with financial incentives include salaries, performance bonuses, rural allowances and overtime money. Participants revealed that they get excited when they receive the awards; these rewards motivate them to render quality patient care beyond the call of duty.

Another participant expressed that an 'excellence performance' reward is supposed to be given when it is due. This participant stated that the reward must be given when it is still meaningful and not after a long period because, by then, it would not have value:

“I also feel motivated by reward, this need to be checked so that we can be rewarded when the reward is due, being appreciated for the service well done. Sometime there are promises that take time to be rewarded for like the Performance Management System. If the process is done correctly that also motivates me. It makes one to perform feeling motivated.”

The quotation reveals the opinion that reward might appear meaningful to nurses probably if it is given within a reasonable time span.

One of the participants spoke of rewards given in money as a personal motivator: *“Eeh... other factors that motivate me is to be rewarded in terms of money that is going to meet my needs including those of my children and my whole family members.”*

Other participants expressed that Performance Management System (PMS) motivates them to perform hard to so that they can receive bonuses. If they do not receive a bonus they admire others who did and that admiration forced them to perform to their level best and continue to be motivated so that they can also receive cash bonuses. Another participant spoke about PMS needing to be given to those who deserve it because if it is given to those who did not perform to their level best it tends to lose its value:

“The other factor that motivates me is appraisal by the management when I have done the best, like by monetary or by non monetary. I can be appraised by being given a reward if I did better than the rest. It could be thorough PMS giving the

best performing nurses, it motivates me to do the best, and if I did not get excellent score this year I am going to perform very hard so that I could also be appraised.”The quotation above reflected that nurses might be happy when given rewards that are linked to their performance.

Salary was stated as one of the factors that motivate nurses, especially when received according to qualifications, long service, special rural allowances associated with factors such as scarcity of particular skills and fringe benefits such as holidays with pay and performance bonuses in their rural hospital. Nurses also indicated that money enables them to meet their basic needs like food, clothing and shelter: *“The other factor that motivates me is the salary, with which I can purchase whatever things I want. For example, I can buy food because if you are not working sometimes you indulge in theft, but if you know that at the end of the month you are going to get paid you cannot steal. We depend on employer for our survival and salary, that is the other thing that motivates me to work hard because we know if we do not do as it is needed we may lose our jobs, and being unemployed means no salary and no food in the family.”*

Furthermore the majority of participants expressed the importance of earning salary but still valuing their job.

“What I can say is that I am motivated by the salary that I earn every month as I can meet my needs, I think it is because of the salary that I receive from this institution that makes me to be motivated everyday when I come to work. But above the salary I love my job.”

Despite the fact that other participants had indicated that they were getting enough money for the work they are doing, one participant indicated that the salary was not commensurate with “his” or “her” performance:

“The salary is not good, when I consider myself as a nurse specialist and having graduated with a degree. I don’t understand it when I am compared with someone who only has a diploma, I feel that it should be considered that a person has gone an extra mile and has worked more academically. This situation does not encourage learning/education here in the department.”

The findings revealed that participants needed their efforts to be recognised in different forms, such as words of appreciation and rewards.

Discussion

The findings revealed that there are different types of recognition that could be used to impact positively on nurses’ motivation in rural areas. These types are

both financial and non-financial factors. The findings also revealed that participants want to be recognised for work well done in different ways, depending on individual likes and dislikes. It was further revealed that nurses want to be praised at the time that the praise is due. In addition it was revealed that just to praise even if there is no tangible reward means much to some of the participants.

The majority of the participants described the need to be recognised in terms of acts that are supposed to be carried out externally by their patients and their managers. Participants articulated that they need to be appreciated for hard work. In addition some participants referred to long-service awards and an opportunity to further their studies as being other factors that would motivate them.

Acknowledging, rewarding and celebrating success were reported by the participants as factors that could motivate them and lead to positive change. Historically, motivation theorists have assumed that intrinsic rewards such as interesting work were independent from extrinsic rewards such as high pay. According to Ryan and Deci (2000), people's motivation comes from various sources. They further indicated that motivations vary in level of orientation; motivations differ according to culture and background. He further indicated that orientation of motivation is related to the underlying attitudes and goals that give direction and the reason why people are motivated (Ryan & Deci, 2000).

In a study conducted by Porter, Rantz and Scott et al. (1996), it was found that recognition, the work itself, and responsibility were repeatedly and positively mentioned by employees. Again the relationship was also cited as something very crucial as discussed by employees.

The art of motivating is embedded in the recognition of human needs (Robbins et al. (2009). It is difficult to motivate nurses but it is advisable to make sure that the managers create environments that are conducive to employees being able to perform tasks effectively and efficiently (Liebler & McConnell, 2004). A study by Beswick (2009) revealed that employees need to be recognised for their performance at least with a thankful word to motivate and support them during their work. This would allow them to be motivated to render quality patient care in rural hospitals. Demotivated nurses have a negative attitude in rendering quality patient care. If a nurse cannot find anything that motivates him/her to do the work, as a result of lack of interest in working or working under stress, more mistakes might be made, more patient complaints levied and more law suits to face.

In reality the success of any organisation depends on the ability of managers to provide a motivating environment for its employees (Germain & Cummings, 2010). The biggest challenge that managers are faced with is how best the

employees may be motivated to render quality patient care (Germain & Cummings, 2010). The manager has to know the behaviour of nurses and what might motivate them. Cognitive evaluation theory argues that extrinsic rewards affect the intrinsic rewards. In other words when nurses are rewarded for good work, the intrinsic interest in the task itself declines (Robbins et al., 2009). Furthermore the cognitive theorists argue that extrinsic rewards will only decrease the internal satisfaction that the individual receives from doing the job. Extrinsic rewards that are verbal or tangible can have different effects on individuals' intrinsic motivation. In most cases verbal rewards increase intrinsic motivation whereas tangible rewards decrease it. For example, when people are promised a tangible reward they tend to focus on the reward and not the task. However, according to Robbins et al. (2009), verbal rewards seem to keep people focused on the job and encourage them to perform the job better.

Social psychologists Franco, Bennett and Kanfer (2002) have suggested that motivation is internal to the work and directs behaviour in a productive and persistent manner. Although, according to Franco et al. (2002), motivation cannot be created externally. Working conditions can force employees to find their own inspirations; hence, significant critical reflection and authentic self-discourse are required by workers so that they are able to identify their own motivation.

By understanding nurses' needs managers can understand what factors are to be used to motivate them. Urden and Monarch (2002) view rendering of quality patient care as the first priority in the hospital and nurse managers were seen as being responsible for developing an environment that is supportive for motivated nurses to render quality patient care in rural hospitals. Jishi (2009) states that the nature of nurses work is tough and stressful because of the shortage of human resources, that lead to work overload and ill health such as backache, painful legs and fatigue which lead to high absenteeism, higher turnover rate and burnout syndrome.

Conclusions

This article described the contributing factors to the motivation of nurses to provide quality patient care in a rural hospital in Vhembe district in Limpopo Province. The results of this research assisted in describing factors that are of importance when applied appropriately to ensure that nurses are always motivated to render quality patient care effectively. The participants revealed that the intrinsic factors that most motivated them were the need to achieve professional growth, the need to take responsibility and the need to teach others in their rural hospital. Regarding the extrinsic factors the participants indicated that they would like the managers to facilitate their motivation by recognising their good work, giving positive feedback, reassessing salaries and other

benefits, improving work conditions, ensuring that good interpersonal relations are maintained, making sure there is adequate technical supervision, promoting effective communication and offering rewards for good performance.

The findings from this study regarding intrinsic and extrinsic factors would assist the managers to facilitate motivation of nurses in rendering quality patient care.

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