

Leadership, Management Practices, and Volunteer Retention

Edward J. Breslin, DM

Vice President, Volunteer Guild, Sacred Heart Hospital on the Emerald Coast
631 Rosewood Way, Niceville, FL 32578
Tel. 850-897-6545 * E-mail: edbreslin22@gmail.com

Abstract

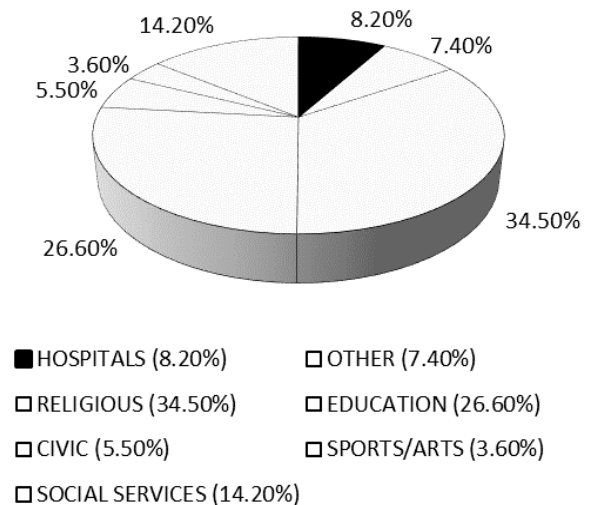
This qualitative research reported here delved into 12 hospital volunteers' perceptions of their lived experiences and their view of how those experiences affected their tendency to continue to come back to work year in and year out. The objective of the study was to arrive at an improved understanding of why the retention rate was much better at the Northwest Florida hospital than it was for volunteers at nonprofits nationally. The researcher used interviews and analyzed data according to a modified van Kaam method. The researchers also identify recommendations for management policies and leadership practices relative to the retention proclivity of volunteers.

Key Words: retention, volunteers, leadership, satisfaction, engagement

Introduction

This research concerned the lived experiences of volunteers relative to the disparity between retention rates of volunteers at a Northwest Florida Hospital and the national volunteer retention average. Dissatisfaction results in the failure of more than 36% of new volunteers to return the second year (CNCS, 2013). Department of Labor (2013) reported Americans volunteer 7.85 billion hours per year of their time to various types of organizations. As represented in Figure 1 American volunteer hours are divided among various types of organizations. Hospitals, at 8.20% of the total, benefit by 643,700,000 hours.

Figure 1. Distribution of annual volunteer labor hours among organizations (Department of Labor, 2013).



The hospital utilizes 260 volunteers in 18 different areas. Volunteers are tasked to stock supplies for nurses in patients' rooms, administer palliative social care to families, act as Communion servers, assist in the Post Anesthesia Care Unit, staff the various welcome and information desks, and drive the courtesy car in the parking area. Tasks are well-defined by means of specific job descriptions. This research examined the lived experiences of volunteers at the hospital relative to retention proclivity, management policies, and leadership practices.

Compared to the national average of 64% retention rate for nonprofit organizations (CNCS, 2013), the hospital has a retention rate of 95%, according to volunteer resource manager (VRM). The reason for this 31% difference in retention rate between the national average of nonprofits and the hospital may be attributable to management practices and the employment of a full-time transformational VRM. This qualitative study of 12 volunteers out of the total of approximately 260 volunteers at the hospital used interviews to acquire data that provided an understanding of lived experiences of volunteers relative to retention proclivity. The intent of the research was to gain better understanding of factors that lead volunteers to return year after year at a greater rate than the national average for volunteers.

A principal research question guided the interview process and analysis procedures: What are the reasons that volunteers repeatedly return to work at the hospital year in and year out? Two interview questions supported the principal question to add clarity for the participants:

(a) What policies of the organization influence the retention of volunteers?

(b) What leadership practices at the VRM level and at the volunteer level influence the retention of volunteers?

Each of the interview questions was accompanied by several ancillary, trigger questions to further prompt responses to the open-ended interview questions.

Background

CNCS (2013) listed nine practices conducive to good management of volunteers. These practices include regular supervision and communication with volunteers, liability protection or insurance coverage for volunteers, regular collection of information on volunteers and volunteer hours, and screening procedures to match volunteers to tasks. CNCS (2013) also included written policies and job descriptions for volunteer involvement, recognition activities such as award ceremonies for volunteers, annual measurement of impact of volunteers, training and professional development opportunities for volunteers, and training for paid staff including the VRM. CNCS (2013) explained that not every organization should adopt all the recommended practices, but organizations should tailor the practices to the needs of the nonprofit.

Lakshmi (2010) said engagement measures the involvement of a person with the job and the organization. To engage volunteers Lakshmi (2010) said managers should communicate their expectations to the volunteer and provide feedback, provide meaningful work that suits the talents of the volunteer and that provides satisfaction, and build confidence in the volunteer. Recognition is very important to prevent excessive turnover of personnel (Iqbal, 2010). Iqbal (2010) found that poor communication in the form of isolation from management and management looking down on the workers as second-class citizens resulted in 123% annual job turnover rate.

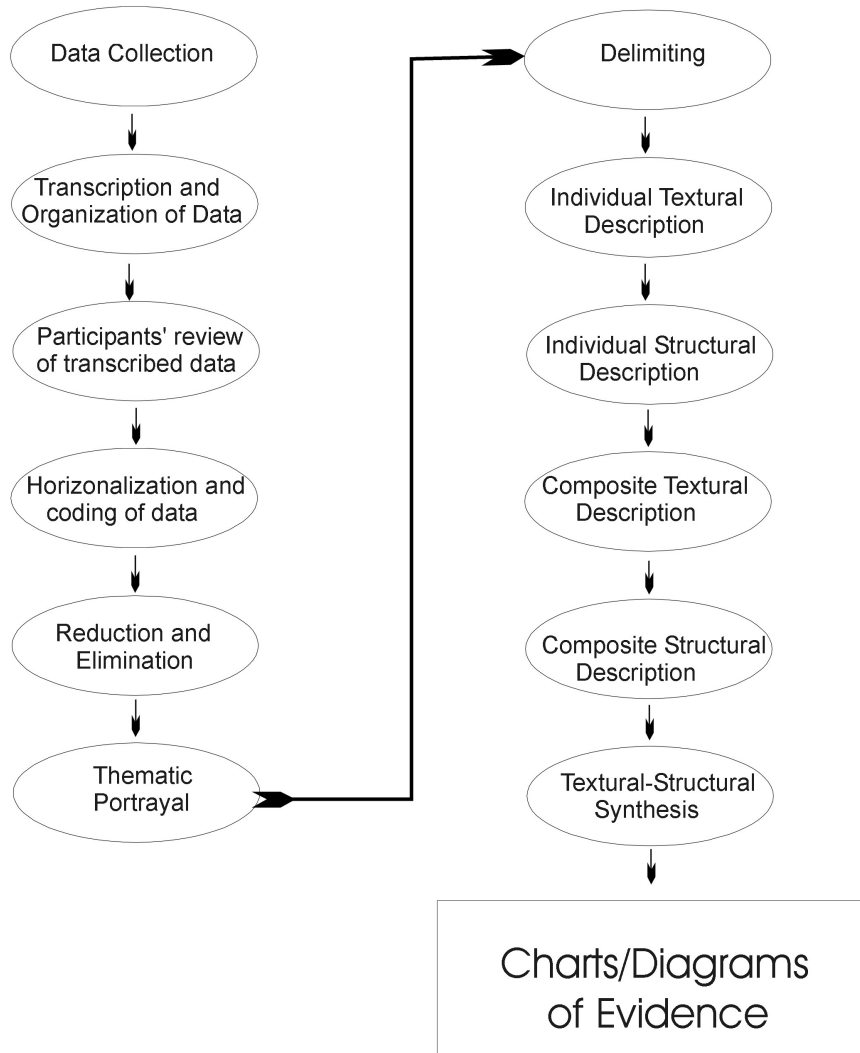
Theoretical Framework

Bass & Bass (2008) explained that a transformational leader motivates followers by changing the emphasis of followers' concerns from those of security and belonging to those of achievement and self-actualization. Bass and Bass (2008) posited transformational leadership raises the maturity of followers and boosts their concern for other people. Transformational leadership and its resultant activities can enhance job satisfaction and retention (Bass & Bass, 2008).

Method

To identify themes and categories pertinent to the study, the researcher used the Moustakas, (1994) modified van Kaam technique of analysis of data that follows the collection of data and consists of nine distinctive steps: horizontalization, reduction and elimination, thematic portrayal, delimiting, creating individual textural descriptions, creating individual structural descriptions, creating composite textural descriptions, creating composite structural descriptions, and writing a textural-structural synthesis (See Figure 2).

Figure 2. Data analysis process according to the Moustakas (1994) method.



Instrumentation

Two instruments designed for this study facilitated the gathering of data (Weeks, Swerissen, & Belfrage, 2007). The first instrument was a volunteer demographic survey composed of seven questions. Included in the demographic survey were questions pertaining to gender, age, ethnicity, marital status, education level, previous experience at volunteering in other organizations, and volunteer hours worked per week. The demographic study was used to query data establishing potential relationships. The second instrument was a set of 11 management policy-related and 16 leadership practices-related trigger questions designed to keep interviews on track.

Data Collection and Analysis

The research involved an extended interview data collection technique. This was an informal process (Moustakas, 1994) that was similar to a conversation in which the researcher became an instrument of data

collection. The process included data collection by digital recorder, electronic transcription, participant review of the transcripts, and coding of the data. The researcher used Nvivo10 software to classify, sort, and arrange data for in-depth analysis (QSR International, 2012).

Findings

Demographic Data

The researcher gathered demographic data under pseudonyms using a survey that was filled out by each participant. Table 1 shows the participants' demographic data. The data were used to ensure that participants were representative of the central tendency of the population of 260 volunteers at the hospital. The researcher also used demographic data to make comparisons between responses of participants in different demographic categories.

Table 1
Demographic Data of Participants in the Study

Pseudonym	Age	Gender	Education	Ethnicity	Hour per Week	Marital Status	Previous Experience
Grace	60-70	F	12 yrs	Caucasian	4	S	2 yrs
Angela	60-70	F	14 yrs	Caucasian	12	M	2 yrs
Crystal	60-70	F	14 yrs	Caucasian	4	S	2 yrs
Gerry	60-70	F	14 yrs	Caucasian	8	M	2 yrs
Alice	40-50	F	16 yrs	Caucasian	4	M	2 yrs
Misty	70+	F	16 yrs	Caucasian	4	M	5 yrs
Ruth	60-70	F	16 yrs	Caucasian	4	M	2 yrs
Hannah	50-60	F	18 yrs	Caucasian	4	M	2 yrs
Mark	70+	M	16 yrs	Caucasian	8	M	8 yrs
Mike	70+	M	18 yrs	Caucasian	4	S	2 yrs
Robert	60-70	M	18 yrs	Caucasian	4	M	2 yrs
Joseph	70+	M	18 yrs	Caucasian	4	M	2 yrs

Results of Thematic Analysis

Coding data to nodes, node analysis, and keyword frequency analysis led the researcher to identify themes in the current study. Six themes, in the perception of participants, led to positive influence on their individual and collective retention

proclivity. The themes were altruism, leadership, recognition, relationships, responsibility, and cultural variation. Table 2 shows the frequency of occurrence of major themes by study participant pseudonym.

Table 2
Frequency of Occurrence of Major Themes by Study Participant Pseudonym

Pseudonym	Major Themes					
	Altruism	Leadership	Recognition	Relationships	Responsibility	Cultural Variation
Alice	*	*	*	*	*	*
Angela	*	*	*	*	*	*
Crystal	*	*	*	*	*	*
Gerry	*	*	*	*	*	*
Grace	*	*	*	*	*	*
Hannah	*	*	*	*	*	*
Joseph	*	*	*		*	
Mark	*	*	*		*	*
Mike	*	*	*	*	*	*
Misty	*	*	*	*	*	*
Robert	*	*	*	*	*	*
Ruth	*	*	*	*	*	

Legend: * = Major theme found at participant node represented by a pseudonym.

Altruism Theme. All 12 of the participants perceived that their retention proclivity was driven extensively by altruistic motivation. Some expressed personal motivation, such as feelings, for this altruism. Other expressed religious conviction. All expressed a desire to help others, to be concerned about the welfare of other human beings as contributing strongly to their retention proclivity.

Leadership Theme. All 12 of participants recognized leadership factors that directly and positively affected their retention proclivity. Among these factors were values shared with the leader, keeping things open and above board, community support, having written policies and procedures, and learning new things. Also included were matching volunteers to tasks,

initial and recurring task training, support of the leader in providing communication, allowing the volunteer to work alone, treating the volunteer as a person, caring about what the volunteer thinks, ethics, and good relationship with the leader.

The VRM provided support in times of crisis, knew volunteer motivation, and encouraged an atmosphere of caring. Management up to the CEO openly recognizes that volunteers save time and money that the hospital can use to give greater care to more people. The participants generally felt it was important for retention proclivity that the VRM be able to unite the volunteers behind the vision and the mission of the hospital.

Recognition Theme. All 12 of participants perceived that recognition, especially by staff workers in their various departments, had a positive effect on their retention proclivity. The recognition expressed by upper management on a daily basis as well as at the annual dinner also had a positive impact. Likewise, the effect of peer recognition in the community positively affected retention proclivity.

Relationship Theme. Ten of twelve participants reported that relationships at the hospital positively affected their retention proclivity. These relationships included those with patients, hospital staff, the VRM, and other volunteers. A few volunteers actively sought out relationships as a motive for volunteering.

Responsibility Theme. All 12 of participants identified the responsibility theme in their interviews. Factors that influenced responsibility and ownership of the tasks involved in volunteering include feelings of competence on the job facilitated by initial and recurring training, written procedures, new procedures for new equipment, and proper updates. Also emphasized were matching tasks to people, dedication to the mission of the hospital, liability insurance for volunteers, and a duty to human kind. Some volunteers continued in the same or like function after they retired from regular work, thus enabling the hospital to take advantage of their professional expertise.

Cultural Variation Theme. Ten out of twelve participants commented on some element of cultural variation. An element of cultural variation was identified when it demonstrated an effect on retention proclivity attributable to differences in relations with the staff from one area or department to another. The participants were divided on whether staff training would improve conditions.

Discussion and Recommendations

Eleven management policy factors and sixteen leadership factors impacting retention proclivity were named as attributes in the NVivo10 classification data sheet. Within the major themes, the participants identified their perception of factors that affected their retention proclivity. The participants explained in-depth their feelings within the themes. The themes carried implications for leadership and management.

Implications of Altruism Major Theme Findings.

Twelve out of twelve participants perceived that their retention proclivity was driven extensively by altruistic motivation. Hospital volunteers consistently reported that they wanted very little in return for their service, often not more than a simple, 'thank you.' The implication of this finding as it pertains to retention proclivity is that more emphasis should be placed on properly addressing the need for recognizing the contribution of volunteers as opposed to providing other comforts and perks.

Implications of Leadership Major Theme Findings.

Each of the participants recognized leadership factors that directly and positively affected their retention proclivity. These factors included values shared with the leader who reportedly demonstrated all four characteristics of transformational leadership: intellectual stimulation, individualized consideration, individualized influence (attributed), and individualized influence behavior.

Organizational culture, satisfaction, and motivation enhanced the chances for personnel retention and included keeping things open and ethically above board, community support, having written policies and procedures, and learning new things. Also included were matching volunteers to tasks, initial and recurring task training, support of the leader in providing

communication, allowing the volunteer to work alone, treating the volunteer as a person, caring about what the volunteer thinks, ethics, good relationship with the leader, leader support in times of crisis, knowing volunteer motivation, and encouraging an atmosphere of caring.

As explained by Gill, Mathur, Sharma and Bhutani (2011), the epitome of transformational leadership is the degree to which leaders encourage followers to buy into the decision making process using their own judgment, and the degree to which leaders show appreciation for good work. In this way the hospital VRM reportedly was able to unite the volunteers behind the mission and vision of the hospital. The implication of this finding is that, even if an organization cannot afford to hire a full-time professional VRM, the organization should ensure they put someone in place who is knowledgeable about the task of leading the organization's volunteers.

Implications of Recognition Major Theme Findings. The participants unanimously perceived that recognition, especially by staff workers in their various departments, had a positive effect on their retention proclivity. The recognition expressed by upper management on a daily basis as well as at the annual dinner also had a positive impact. Because this theme occurred unanimously in the participants' data it would be wise to take it under advisement when attempting to mediate retention proclivity. Also, because it aligns with the concerns of cultural variation, it appears to positively indicate training for paid staff on how to interface with volunteers, especially in high-stress work areas like the ER.

Implications of Relationships Major Theme Findings. Ten of twelve participants reported that relationships at the hospital positively affected their retention proclivity. Because the desire to form

relationships is as a personal motivational factor, it would seem reasonable to screen for such a factor and to place the volunteer in a task (Ellis, 2010) in which that personal motivator could be fulfilled.

Implications of Responsibility Major Theme Findings. Each of the 12 of participants identified the responsibility theme in their interviews. Some volunteers continued in the same or like function after they retired from regular work. This enabled the hospital to take advantage of their professional expertise. Some volunteers placed an emphasis on ethical behavior on the part of staff as a condition of retention proclivity. Not all organizations have the luxury of picking and choosing between persons who volunteer. However, when the opportunity does present itself screening should be performed not only to fit the person to the job (Ellis, 2010), but to acquire those volunteers with desirable characteristic for retention proclivity.

Implications of Cultural Variation Major Theme Findings. Ten out of twelve participants commented on some element of cultural variation as defined herein. Essentially, they all perceived that some places are easier to work than others but not all felt stressed. This appears to validate the finding of Sharma and Devi (2011) that unless perceived as stressful by workers, workplace conditions and work do not necessarily lead to personal stress. One finding of Sharma and Devi (2011) was that extroverted persons tend to feel less stress in the work environment. The obvious implication of this information is that, should a VRM have knowledge of a high stress environment (as opposed to other places to put a volunteer who is susceptible to work stress) volunteers should be screened for factors that could lead to stress.

Answer to Research Question. The analysis of the data, findings, and implications did not appear to definitively

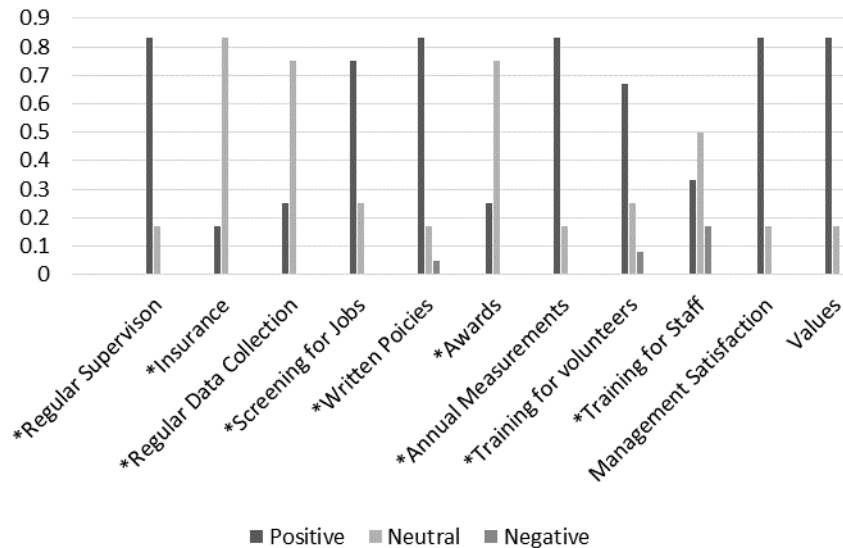
answer the research question: What are the reasons that volunteers repeatedly return to work at the hospital year in and year out? However, useful themes and suggestions did emerge and the objective of further understanding was satisfied. The study yielded recommendations for management and leadership practices.

Limitations on Generalizability of the Study. The study yielded recommendations for management and leadership practices as well as recommendations for further research based on the reporting of the perceptions of the participants' reflexivity to their contextual situation. However, because of the limited number and similarity of the demographics of the participants in this study proper generalization of the findings is very

limited. Therefore, any derived specific recommendations are restricted to the hospital in Northwest Florida unless further investigation is conducted to assess their applicability.

Recommended Management Policies and Leadership Practices. In addition to those recommended by CNCS (2013), a review of the literature revealed 18 policies and practices recommended in various studies for the improvement of retention proclivity. These additional items are divided into recommended management factors (2) and leadership factors (16). The perceptions of participants (N=12) by percentages for each of the 11 CNCS identified and 2 other management factors as they influence retention proclivity are displayed at Figure 3.

Figure 3. The perceptions of participants for each management policy factor.



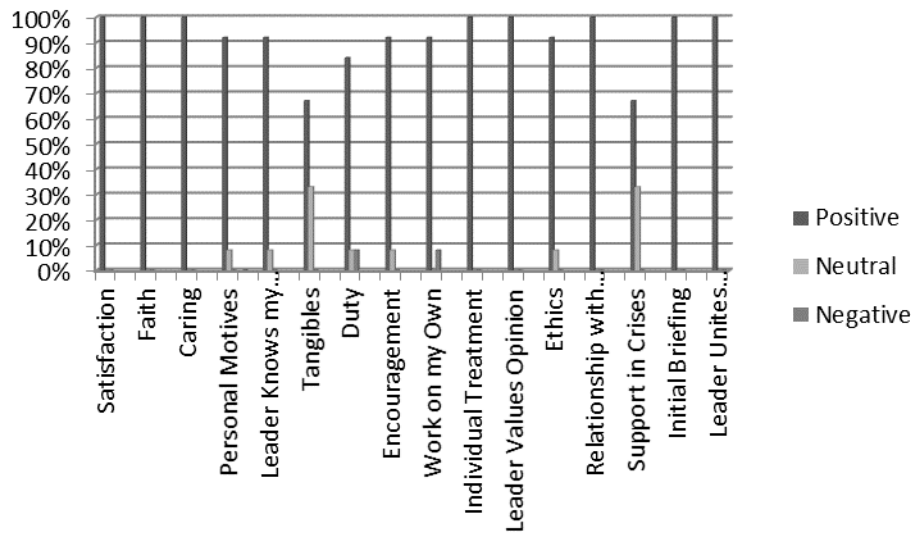
* Indicates policy recommended by CNCS (2013)

The insurance factor and the regular data collection factor show low interest in the perception of participants because, as identified by CNCS (2013), these are primarily for the benefit of the organization. The awards factor scored low because the participants were expressly altruistic and

only incidentally interested in awards. The staff training factor elicited mixed responses.

The perceptions of participants (N=12) by percentages for each of the 16 leadership factors as it influences retention proclivity are displayed at Figure 4.

Figure 4. The perceptions of participants for each leadership factor.



The very high emphasis on these leadership factors as affecting retention proclivity in the perception of the participants in this study warrants a close examination by any organization using volunteers. That is not to say that this study recommends that adoption of any policy or practice by an organization without careful consideration of possible outcomes.

Of particular note is that leadership practices in the hospital in this study are attuned to the various aspects of transformational leadership. It should be noted that the leadership of the hospital (VRM) does not take a preventative approach (putting out fires) to precluding reasons why volunteers leave. Essential for the nurturing of retention proclivity is the proactive approach to leadership in which the recommended management policies and leadership practices are collectively treated as a systemically normal way of doing business.

Spink (2011) postulated that volunteer engagement creates a feeling of positivity and community involvement and may form the basis of a new paradigm in volunteerism. Management can provide a

vision of this new paradigm by selecting a transformational VRM.

Management should support the transformational VRM with empowerment to selectively implement the management policies and leadership practices defined herein (See Figures 3 and 4), depending on the organizational characteristics such as size and structure. Volunteers should be seen less as a group of unskilled workers doing menial tasks and more as engaged members of the organization on a par with staff. The staff and the volunteers can change fundamentally from being on two separate teams, each with its own mission, to one team with the same vision and mission.

A primary responsibility of the VRM is to unite the volunteers behind the mission and vision of the organization. This is key to their acceptance as team members by paid staff. Tosey, Visser, and Saunders (2011) cautioned that this road to success is not easily traveled and should not be taken lightly. Management support up to the CEO was implemental in the process.

Recommendations for further study. Considering the high dollar values of volunteer labor (8 billion man-hours annually), sponsors of social sciences research can consider projects to study organizations and their volunteer retention rates before and after implementation of policies and practices contained herein for the development of empirical data.

Ownership in the organization, adopting the organization, and nurturing it can be studied as a possible motivator for retention proclivity. Studies investigating the interface and relationships between full-time staff and volunteers could be useful.

Some research could be done on volunteering while still young. Volunteering changes people for the better and the benefits to the young are largely unknown. Some studies suggest that young people only volunteer for school credit. Quantitative studies might be undertaken to discover if longevity is enhanced by volunteering and the relationships created through volunteering.

References

- Bass, B. M., & Bass, R. (2008). *The Bass handbook of leadership: Theory, research, & managerial application*. New York, NY: The Free Press.
- CNCS (Corporation for National & Community Service). (2013). *Volunteering in America 2011: National, state and city information*. Retrieved from <http://www.nationalservice.gov/about/volunteering/index.asp>
- Department of Labor. (2013). *Industries at a glance: Hospitals*. Retrieved from <http://www.dol.gov/>
- Ellis, S. J. (2010). *From the top down: The executive role in successful volunteer involvement*. Philadelphia, PA: Energize.
- Gill, A., Mathur, N., Sharma, S., & Bhutani, S. (2011). The effects of empowerment and transformational leadership on employee intentions to quit: A study of restaurant workers in India. *International Journal of Management* 28(1), 217-394. Retrieved from <http://www.internationaljournalofmanagement.co.uk/>
- Iqbal, A. (2010). Employee turnover: Causes, consequences and retention strategies in Saudi organizations. *The Business Review, Cambridge*, 16(2), 275-281. Retrieved from <http://www.jaabc.com/brc.html>
- Lakshmi, M. (2010). Employee engagement for talent retention with reference to the academicians. *Review of Business Research*, 10(3), 137-142. Retrieved from <http://www.highbeam.com/publications/review-of-business-research-p408798>
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- QSR International. (2012). *What is qualitative research?* Cambridge, MA. Retrieved from <http://www.qsrinternational.com/what-is-qualitative-research.aspx>
- Sharma, J., & Devi, A. (2011). Individual differences and stress at workplace. *Asia Pacific Journal of Management*, 7(3), 198-207. doi: 10.1177/097324701100700318
- Spink, E. R. (2011). Volunteer engagement: Defining the future of the profession. *E-Volunteerism (11)* 2. Retrieved from <https://www.e-volunteerism.com/>

Tosey, P., Visser, M., & Saunders, M.
(2011). The origins and
conceptualizations of 'triple-loop'
learning: A critical review.
Management Learning, 43(3), 291-
307. doi:
10.1177/1350507611426239

Weeks, A., Swerissen, H., & Belfrage, J.
(2007). Issues, challenges, and
solutions in translating study
instruments. *Evaluation Review*,
31(2), 153-165. doi:
10.1177/0193841X06294184

About the Author:

Edward J. Breslin, DM is a retired Air Force veteran, logistics manager, and business owner. He is an alumnus of Embry-Riddle Aeronautical University. He holds an MS in Management for Troy State University and a doctorate in management from University of Phoenix.