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STEERING THE SHIP: NURSING DIRECTORS LIVED EXPERIENCES ON FACING THE NURSE RETENTION PUZZLES

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Abstract

The global shortage of nurses has remained to be a major concern affecting the healthcare system and the workforce stability. Nursing Directors are at the forefront of addressing the poor nurse retention while ensuring safe and effective patient care. The purpose of this study is to explore and understand the experiences of nursing directors facing nurse retention puzzles in different hospitals in General Santos City. A qualitative descriptive phenomenological approach was utilized. A purposive sample of nine nursing directors were interviewed. Using Colaizzi's (1978) rigor was established through validation, verification and validity. The experiences of nursing directors in facing the nurse retention puzzles are capsulated in the themes: Navigating the Turbulence of the Sea, Carrying the Anchor's Weight, Sailing with Bounded Water, and Hidden Reefs Beneath the Clam Water. Their means of coping were focused on Steering Towards Safe Harbors through adaptive leadership, Adjusting the Sails of the Changing Winds by strategic planning, Sailing Under One Compass by fostering collaboration, and Charting the Next Course by mentoring future nursing leaders. The insights that nursing directors wanted to share with fellow nurse directors included, Anchoring for a Safe Embark, Seeing the Horizon with Clearer Eyes, Finding the Stars that Guide the Next Voyage, and Realizing that Calm Seas Don't Make Skilled Sailors. Nursing directors should be seen as an important source of professional leadership, and their value in actioning health policies and guidelines, such as addressing the nurse retention challenges, is to be recognized.

Keywords: *Nurse Retention Puzzles, Nursing Directors, Descriptive-Phenomenology, General Santos City*

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Introduction

The nursing directors stand at the helm of the healthcare institutions. All while balancing the responsibility of organizational priorities and safeguarding the welfare among nurses and the patients. Their reality is like navigating turbulent staffing waters, where each decision about people, resources, and systems accord with challenges, leadership, and insights from experience (Abousoliman & Hamed, 2024). Among the persistent and pressing challenges they face is retaining highly competent nurses (Wu et al., 2024). Despite their continuous efforts and strategies, many nursing directors continue to grapple from the underlying factors that contribute to nurse retention (Lasater, 2024). While they believe they are implementing effective approaches, nurses continue to leave, highlighting the significance of understanding the deeper meanings, emotions and struggles that shape nurse retention realities (Falizardo & Faller, 2024; Spolan, 2021). This study explores how nursing directors interpret, respond to, and find meaning in their leadership experiences amid ongoing workforce instability.

Globally, the World Health Organization predicts a shortfall of over 4.1 million nurses by 2030 (Adhikari & Smith, 2023). Nurse turnover rates differ significantly across countries, with Australia recording the lowest at 15.1%, the USA at 27.65%, and Israel at 23% (Adajar et al., 2022). This drastic report in the USA led to 72% of nursing leaders experienced burnout and 31% intended to leave their positions (Abousoliman & Hamed, 2024). The responsibilities to repeatedly recruit, orient, and retain staff underline the central role of these nursing directors' leadership in sustaining the organizational functionality.

In the Philippines, nearly 40% have expressed intentions to seek employment abroad (Cruz, 2020). A government hospital in General Santos City reported 25 nurses have resigned in the first half of 2021 despite the significant salary increase (Estabello, 2021). On the same year, four other major hospitals were reported to be short of nurses (Rebollido, 2021). This alarming pattern of attrition not only jeopardized the safety of the patients but also places additional strains on nursing leadership at the institutional level.

While numerous studies quantified the nursing shortages, turnover and job satisfaction, few attentions have focused to the viewpoints of nursing directors. The experiences of nursing directors are portrayed as administrative background rather than a site of complex human experience and meaning making (Pattali et al., 2024). Consequently, there remains a limited understanding to how they comprehend, carry out, and manage the ongoing retention crisis at the leadership level. Like how they construct their realities, sustain themselves emotionally while leading, and influence future decisions (Spolan, 2020).

This study aims to fill this gap by using the Colaizzi's phenomenological method to uniquely uncover the meaning of their journey through their challenges, coping strategies, and learning insights (Pattali et al., 2024; Pain, 2022). By revealing these hidden layers of leadership, much like unseen hidden reefs of the sea, this study aims to inform more responsive and compassionate approaches to supporting nursing directors and their organization through persistent workforce instability. Further, this study explores and understand the lived experiences of nursing directors in General Santos City as they navigate the challenges of nurse retention, shedding light on their coping strategies, leadership practices, and insights gained from this ongoing crisis.

Literature Review

This section provides the literature supporting the problem, effects to the problem and the target variables of this research. This further discusses the evidence that the existing problem on nurse retention and longevity should be explored based on what influences it could have been identified to retain expert and experienced nurses

A. The Experiences of Nursing Directors

It is always believed that nursing directors entail both dynamic and a rewarding job career but is also challenging, all while leading the team and improving the nurse retention (Kath et al., 2013). The complexity of the role requires a wide range of skills and responsibility, some are transforming the organization from clinical expertise to non-clinical just to find the solutions of addressing the nurse retention puzzles (Frilund et al., 2023). Kath et al. (2024) cited that nursing directors belong to the top-ranked nursing position in the leadership hierarchy and responsibility is becoming more bigger in the role. With all these responsibilities and role entails, nursing directors are the direct accountable to the retention of nurses that placed them in a challenging role of maintaining this position.

Nursing Directors are viewed as a strong leader, facing challenges over time even long before that issues on nurse retention was prevalent during the pandemic. In a research study, the common challenges faced by the nursing directors are staffing shortages and retention, quality of patient care, technology, administrative burden, leadership, and support (Squellati & Zangaro, 2023). While trying to navigate these challenges, nursing directors also face challenges like balancing system and site priorities, leading the organization, and anticipating issues (Batcheller et al., 2020). Making the stress levels among nursing leaders exceeded the midpoint of the scale, with personal factors not contributing to its prediction. Therefore, role overload, organizational constraints, and role ambiguity became significant predictors of stress that led these leaders to get exhaust in retaining highly skilled and competent nurses (Kath et al., 2023).

According to Doucette (2024) the role of the nursing directors entails complex staffing issues, workforce challenges, high emotional demands, and organizational needs. However, a person who is experiencing repetitive stress could possibly affect the processing and behavior. Affecting decision-making process and good ideas, making the repetitive stress a major risk factor for psychiatric and sensory disorder (Bisharat et al., 2025). In support to the aforementioned, according to Jappinen et al., (2021) because the workload and related time-management issues are one of the major causes of

stress, it was believed that nursing directors are at risk for psychological and physical problems later on.

B. Nurse Retention

The hospital is the top contributing factor that affects many nurses in having poor retention rate, such effects like the hospital size, location and unionization (Bae, 2023). Assigning unskilled nurses to provide care in a Critical Care Unit compromises the quality healthcare provided right for the patients (Randa & Phale, 2023). Thus, maintaining high nurse retention in healthcare facilities will provide several tangible benefits, such as decreased turnover costs, increased productivity, and improved patient outcomes. Additionally, high retention rates could help reduce burn out, and improved morale among the nursing staff.

A study conducted by, Wali et. al., (2023) revealed that, nurse's job satisfaction must be improved to decrease the nurses' intention in leaving their workplace and maintain an optimum performance to a quality patient care. However, healthcare organizations still fail to retain nurses despite the multidimensional strategies of researching job satisfaction (Galanis et al., 2023). Hence, hospital administrator and nursing leaders should consider building a culture of wellbeing among nurses and implement strategies to better support good physical and mental health among nurses (Tortorice, 2020).

Nurse retention possesses a significant effect to the wellbeing, safety and recovery of the patients. The used of the term describes the ability to keep the skilled nurses, rather than losing them to competing employers (Lee, 2025). A publication introduced by the Iyer (2022) that a hospital with high turnover rates of nurses may cost additional onboarding training to the newly hired nurses while limiting the ability to develop a consistent company culture. In support to the aforementioned, according to Jappinen et al., (2021) because the workload and related time-management issues are one of the major causes of stress, it was believed that nursing directors are at risk for psychological and physical problems later on.

C. Coping and Insights

The open-door policy, which point out to a major difficulty from the employees' perceptions of the barriers exist between them and management (Sinacola, 2025). An effective decision making involves awareness and mitigation to the whole storyline of events and not make assumptions to ensure fairness and evidence-based outcomes (Berthet, 2022). Laskowski-jones (2021), affirming that meaningful appreciation among the nurses or other employees in the healthcare industry reduces high turnover rate while strengthening staff engagement. Meaningful recognition and participative decision-making made the workplace and workforce engaging that directly contributed to her decision to stay in the same institution despite the challenges that all nursing directors are facing (Wei et al., 2023).

Nurse retention is a recurring issue and a crucial performance metric for healthcare systems, according to the literature. Poor retention, lower job satisfaction, and higher turnover are frequently attributed to institutional factors, including hospital size, location, workload, staffing ratios, and organizational culture (Bae, 2023; Wali et al., 2023; Galanis et al., 2023). Patient safety and care quality are at risk when seasoned nurses are replaced by less experienced personnel, which also raises onboarding expenses and erodes team cohesiveness (Randa & Phale, 2023; Bisnar & Pigarro, 2020; Iyer, 2022; Shily, 2023). According to Tortorice (2020), Reese (2023), Smith & Johnson (2025), and others, supportive work environments that prioritize well-being, offer flexible scheduling, avoid mandatory overtime, and provide wellness and professional development programs are linked to lower rates of burnout and higher retention. Yet, several authors note that health institutions continue to have difficulty maintaining nurse retention in spite of these suggested tactics, pointing to discrepancies between implementation, policy, and lived reality (Galanis et al., 2023).

Methods

This methodology outlines the research design, participants and settings, data collection and analysis, and ethical consideration.

A. Research Design

This research utilized a descriptive form of qualitative phenomenological research that

explored the lived experiences of the nursing directors in General Santos City, Philippines. Since describing the lived experiences of the nursing directors on nurse retention puzzles a phenomenological approach was used. This approached was used to explore and understand the experiences and strategies of the nursing directors on their own management roles in addressing the phenomena.

B. Participants and Settings

Purposive sampling was employed, and nine (9) participants were selected based on characteristics, experiences, and qualities that fit the research objectives. Inclusion criteria required participants to be currently serving as nursing directors or in an equivalent highest leadership role in the nursing service department, have at least one year of experience in their current position, and provide informed consent to participate. This ensures sufficient experience to produce in-depth research findings. Exclusion criteria included nursing directors with less than one year of experience in their leadership role or those who declined participation.

Nursing directors are ideal participants for this research due to their roles in managing and retaining nursing staff, providing insights into challenges of nurse retention and turnover. Data saturation was monitored during interviews. After the 8th participant, no new codes or concepts emerged, and subsequent interviews repeated previous experiences and data. Despite rejection from the remaining nursing directors to capture the entire General Santos City, the researcher concluded at the ninth participant that the criteria met the information of power and thematic adequacy for the phenomenology of this research.

While the findings may have limited generalizability due to the focus on a small sample of nursing directors in General Santos City, the depth and richness of the narratives provide valuable insights that can inform nursing leadership practice, guide policy development, and inspire further research in the fields of nurse retention and healthcare management.

C. Data Collection and Analysis

Data collection was done through a semi-structured interviews where participants have shared their challenges of the role, support system and the coping style in managing the distressing role of being a nursing director. An open-ended type of questions was followed to allow the nursing directors to express their own thoughts freely and make the conversation spontaneously. The whole duration of interview was recorded through voice recording with prior consent to fully transcribe each statements verbatim per verbatim.

The interview was transcribed accordingly and analyzed using Colaizzi's seven-step phenomenological method. As part of the thematic analysis, initially, all verbatim were familiarized and each verbatim that remarkably reached a significance to the phenomena was translated into English with meanings formulated. Review and familiarization of the transcriptions provided key elements to properly code and extract data into emerging themes.

D. Ethical Considerations

The ethical conduct of this study was paramount, guiding all stages from conception to dissemination. Formal ethical approval was secured from the researcher’s institution. Prior to participant recruitment, letters of introduction, endorsed by the research adviser, were dispatched to all relevant healthcare institutions. This institutional review process is critical in qualitative studies to safeguard participants and ensure the appropriateness of the research design and methodology.

This research holds significant social value amplifying the voices of the nursing directors to articulate their experiences and perspectives on nurse retention issues. the study respects and integrates the local cultural and social context of General Santos City, ensuring that findings are relevant and applicable to the regional healthcare environment.

Voluntary participation was strictly maintained, with participants explicitly informed of their right to decline involvement or withdraw from the study at any point without prejudice or consequence. The participants were informed about the engagement in the discussions about their professional experiences might evoke reflection, which could be considered a benefit, as many qualitative study participants report positive experiences.

The subject is nameless to hide their identity and presentation from the institution's viewpoint, encouraging better participation and cooperation. Audio files are stored in password-protected files accessible only to the researcher and advisor. Data security protocols include encrypted digital storage, secured passwords, and storing physical copies of sensitive data in locked locations. The researcher ensured participant anonymity throughout the study, keeping the identity of nursing directors confidential.

Results and Discussion

This section presents the results of the data from the nine nursing directors in different level of private hospitals in General Santos City, Philippines. The data obtained by a thorough, audio-recorded in-depth interviews lasting 25 to 40 minutes, which were transcribed verbatim. Analysis yielded three overarching themes with three subthemes each.

A. Emergent Theme 1: Navigating the Turbulence of the Sea

This captures how nursing directors experience their role as they lead the whole team through unstable and often unpredictable staffing conditions. It was determined that challenges affected emotional distress among these leaders causing interrupted decision making and obscurity to judgement. Navigating the turbulence of these leaders are not simply "managing problems" but living with a continual mismatch between responsibility and control. They are expected to keep the ship afloat, sustain services, and care for both patients and staff, even when the institutional system itself feels unstable.

Cluster Theme 1.1: Carrying the Anchor's Weight

This theme meant how the nursing directors experience poor nurse retention representing as a heavy responsibility they bring daily. For them, the anchors are the multidimensional causes and not merely the acceptance to the position but the sum of the staffing gaps, resignation and institutional expectation they carry in. Carrying the poor nurse retention become a burden to the leaders whose only purpose is to promote welfare among nurses but instead they are being challenged. The following verbatim reflected the burden of retaining nurses:

"… like in our recruitment in Julo, Sulu, half of them went home to have a vacation back their hometown and many of them didn't return after they flew, that is some of our challenges also." (Participant 3, Transcript 40, Line 156)

"… here, the workload is always small, the nurse-to-patient ratio was reduced from the DOH 1:13 standard to 1:6… frustratingly, we experience poor nurse retention." (Participant 5, Transcript 31, Line 64-69).

These verbatims account how the nursing directors and the management attempt to provide solutions. Such as expanding recruitment to distant cities or lowering nurse-to-patient ratios, yet the expected improvement in retention did not materialize. Instead, each failed strategies add another layer of emotional and moral weight, as they feel responsible for outcomes, they cannot fully control. In a study by Smith & Johnson (2025) said that only 9% reported a strong intention to stay, reinforcing that recruitment expansions do not necessarily guarantee an offset of turnover-risk.

This burden is not only about numbers but about personal accountability. One director internalized each resignation as a reflection of her own leadership:

"… so, I have this feeling that whenever my nurses resign, I am responsible to her resignation, I was held accountable because I already knew the reason why." (Participant 5, Transcript 35, Line 159-162).

Another director has emphasized the daily and emotional toll of trying to keep the nurses feel undervalued:

"…tiring, because daily, I needed to face all forms of problems from the staff, it's difficult to let them stay because the company cannot compensate them." (Participant 1, Transcript 1, Line 4-7)

Taken together, this cluster theme revealed that poor nurse retention is not merely a failed strategies but, a personal and moral burden and a persistent sense of responsibility for outcomes they cannot fully control. The "anchor"

as represented is consistent to the literature cited by Doucette (2024) that the role of the nursing directors entails complex staffing issues, workforce challenges, high emotional demands, and organizational needs. This weight sets the stage for the subsequent clusters, which delve into how they navigate this burden, adapt, cope, and maintain the ship's course despite the turbulence.

Cluster Theme 1.2: Sailing with Bounded Waters

Sailing with bounded waters represent how the nursing directors lead the team while the institutions have decisions and policies that cannot be bended and controlled. The nursing director cannot do much to improve the nurse retention because of the restriction and hindrance bounded within the institution that required a lot of consideration.

One director described the absence of institutional direction for retention:

"… the hospital itself has no concrete plan to what actions shall be made to increase the number of regular nurses and for them stay longer too." (Participant 1, Transcript 1, Line 32-34)

The limitation that even the institution should be bounded by initiatives affected the nursing director's leadership to implement nurse retention policies. Another director described how management's perception of the hospital as a "market leader" became a justification for not improving compensation:

"… if we don't have strong basis for salary increase from other hospitals in this city, the management won't also give any increase because they believe that the hospital itself is already the market leader — where in fact, we are only a follower here in the same city." (Participant 6, Transcript 39, Line 148-150).

Collectively, this cluster theme showed that nursing directors are not merely grappling with retention in abstract terms; they are following within organizational "boundaries" that restrict their ability to provide and make decisions. This is consistent to this study that bounded waters are the effects of administrative constraints. Consequently, Zaheer et al. (2021) mentioned that the nurses and the administrators do not have equal opinions that led issues to unresolving solutions. The limited opportunity for improvements is common issues on bounded waters, the next theme also reflected that there are even hidden issues that caused the struggle.

Cluster Theme 1.3: Hidden Reefs Beneath Calm Waters

This cluster theme is defined as the unseen struggles and often the unpredictable challenges that many nursing directors confront in managing the nurse retention issues. "Hidden Reefs" metaphorically represents the danger that waits behind the calmness of the workplace. To some participants, they did not know what adjustment they will still do to let the nurses stay, they have granted them their request, still, nurses leave emphasizing something bigger problems are uncontrollable.

These were reflected in following statements:

"… for our retention rate… nurses who have finished their contract leave right away for no reason." (Participant 6, Transcript 36, Line 25-26).

"… at first, you feel secure because of the signed contract, but still, many have breached the contract for the reasons I do not know." (Participant 9, Transcript 58, Line 125-126)

"… for the workload, the nurses lesser nurse-to-patient ratio. But for them, it already feels heavy. Especially to the Gen Z nurses, they immediately resign." (Participant 5, Transcript 31, Line 64-86)

One participant has noted that some newly hired nurses appeared highly sensitive to feedback and reprimands, and that even minor conflicts sometimes led to resignations:

"… there was a time when one nurse was reprimanded, and in the end, she persuaded her friends who are nurses, and they all left as well." (Participant 4, Transcript 22, Line 109-110).

Vulnerabilities are also hidden reefs that are misled, misinterpreted and mishandled in a calming environment. An article from Dunlop & Pankowski (2025) highlighted that mental health among generation Z nurses viewed as divergent and require support such as engagement to a

purposeful conversation. Implication that creates an additional challenge in managing more nurses with less stable unit tenure.

Taken together, Hidden Reefs Beneath Calm Waters reveal that the nurse retention crisis extends beyond tangible factors like salary, workload, and staffing ratios. It is also influenced by less apparent forces, including generational shifts in expectations, unspoken emotional struggles, organizational inconsistencies, and the moral implications of leadership decisions (Laskowski-jones, 2021).

B. Emergent Theme 2: Steering Towards Safe Harbors

Steering towards safe harbors symbolizes the nursing director's drive to lead the nursing organization towards stability, contentment and sustainability despite the turbulent staffing waters. They persisted in "steering the wheel" by modifying plans, negotiating with the management, and looking for innovative ways to maintain nurses' engagement even when structural constraints limited to what they can do.

For them, being a leader was more than just holding a position; it was a constant balancing act that involved reading the "weather" of the company, spotting early indications of discontent, and stepping in before problems became serious enough to result in resignations. They are proactive navigators who continuously modify their leadership approach in response to evolving circumstances.

Cluster Theme 2.1: Adjusting the Sails of the Changing Winds

This cluster theme reflected the nursing directors adopting to the changing conditions of the winds like leadership style and communication in response to the shifting staff needs, personalities, and organizational demands. Much like sailors, adjusting their sails to the changing winds, nursing directors do not simply settle to one single approach but applies different leadership style to prevent further nurses' resignation.

One nursing director articulated this flexibility clearly:

"… it's a mix of everything. I don't stick to just one leadership style because people have different personalities. Sometimes I'm authoritative, other times I'm lenient—it depends on who I'm dealing with." (Participant 9, Transcript 57, Line 81-85)

Another nursing director has described leaning toward democratic and transformational approaches:

"… in terms of leadership, I am more on the democratic side. There are times I can be a bit authoritative, but I always listen to others' ideas. Yes. Because I am often here inside the office and I can't always do rounds. So, they are the ones who see the performance outside." (Participant 3, Transcript 17, Line 296-299).

Participants also highlighted accountability and fairness as part of this adaptive stance:

"… I listen to all their concerns… and from those concerns, we make the necessary adjustments, so the situation won't get worse." (Participant 5, Transcript 35, Line 156-157).

"… I really have to step back. Mm-hmm. Stepping back means I have to identify the root cause of the problem. So, I don't immediately jump to conclusions, because maybe in that certain problem, there's a cause that I am also a part of… So it's like looking at the bigger picture." (Participant 2, Transcript 10, Line 115-118)

Transformational and democratic practices were not merely theoretical concepts but practically was meant to understand the reasons behind nurses' departures and collaboratively develop solutions. Aligning with literature that suggest a flexible relationship can improve team performance and reduce turnover intentions (Poku, 2025; Sfantou et al., 2020). In adjusting the leadership style is making one direction

Overall, adjusting the sails to the changing winds shows that nursing directors do not simply take "hold" the leadership position, they actively reshape it. Leaders have vulnerabilities hiding in their closet waiting for someone to open it. But what makes a leader truly a leader is showing up and adjusting to the ever-changing directions of the winds. In this study, it

was found that leadership involves varying of the styles too in addressing matters on nurse retention (Conroy et al., 2023).

Cluster Theme 2.2: Sailing Under One Compass

The Sailing Under One Compass metaphorically represents the greater outcome from which the enrichment of idea came under the one direction from the institution delivered by the nursing director. Nursing directors in this study emphasized that their leadership is strengthened when institutional leadership shares their vision, supports their strategies, and provides concrete action. Instead of steering the ship alone, they prefer this collaborative approach.

Several participants described management as an active partner rather than a distant authority:

"… good thing because our management is supportive. I mean, it's not like we must figure out how to do things on our own… The initiative, the ideas, they're always coming from management." (Participant 3 Transcript 12, Line 83-84).

"…with management, of course I am the middle manager so I can relay to them what needs to be conveyed to management regarding the nurses' concerns. And then, uh, they do value my presence here; yes… and, uh, they support me." (Participant 5 Transcript 33, Line 104-105).

"… so far, they are supportive, but we also must see if it's okay, if we can still handle it. That's all we can manage right now, so it's just us who must struggle a little, that's how it is." (Participant 7 Transcript 44, Line 74-75)

These narratives illustrate that when management is perceived as supportive by providing ideas, listening to concerns conveyed by the nursing director, and approving initiatives, even resource constraints, issues become more manageable. For instance, Participant 7 recognized that the presence of institutional support despite the financial limitations considerably affects the actions of the nursing directions aligning with the capacity of the institution. This shared understanding between the nursing director, and the administration enabled them to sustain efforts to address retention, even when complete solutions were not yet feasible.

One participant spoke directly about having a "shared mindset" with management and the responsibility to align departmental goals with institutional plans:

"… you can't just say, for example, that the goal of the department or the institution is to expand. You can't simply say, 'Oh, we will expand,' and then expect your people to handle it if they're already burned out. How can you talk about expansion when your people are exhausted? So, you have to explain expansion in a way they can understand — why we need to do this, and what it means for them." (Participant 6 Transcript 39, Line 77-81)

Nursing directors are portrayed as "bridge leaders" who prioritize the well-being of nurses while also considering the institution's objectives. Less & Dhanpat (2020) found that managers' credibility and strategic alignment significantly impact employee motivation to stay. Strategic alignment, such as the mission and vision, plays a crucial role. To retain nurses, the nursing directors should lead with a unified direction.

Taken together, to sail in one compass demonstrate the nursing directors and institutional leader have aligned. Sharing a common vision, reinforcing each other's decisions, and supporting concrete retention strategies, the efforts to address nurse turnover become more coherent and sustainable. Nursing directors are secured and valued where rich ideas are seen not as expenses to the company's finance but a compass to resolve the constant issues of nurse retention.

Cluster Theme 2.3: Charting the Next Course

Charting the Next Course illustrates how nursing directors do not merely react to the current challenges of nurse retention but deliberately plans for a more stable future. This cluster highlights efforts in setting anticipatory staffing needs, developing retention initiatives, mentoring future leaders, and redesigning system weaknesses to prevent recurring issues.

Beyond recruitment and staffing ratios, some institutions invested in scholarship programs and structured retention mechanisms:

"… that's why for the scholarships, our new approach is to focus on special areas with high turnover, so that people can develop the needed skills there." (Participant 9, Transcript 58. Line 125-126).

"… yes, so we have scholarship programs and contract renewal programs—which encourages the staff to stay, along with the benefits, staff development, and travel opportunities." (Participant 3, Transcript 13, Line 90-93)

These initiatives create plans and possibilities for resolving nurse retention issues, ensuring adequate staffing and aligning with the institution's mission of investing in people as a long-term retention strategy (Adajar et al., 2022). By investing in the professional growth of nurses, the organization aligns its long-term mission with their career development. This strategic approach ensures that nurse retention is not an accidental occurrence but a deliberate outcome.

Charting the next course also necessitated reshaping leadership practice to foster continuous improvement and prioritize patient safety. One nursing director described her daily routine not as passive administration but as active, forward-looking engagement:

"… I don't usually just sit in the office. I do rounds in different nursing stations and also visit the patients. I frequently visit them, then I talk to them, whether individually or in small groups. I check on their performances to nursing procedures. I don't rely only on the supervisor's report. So that's my routine." (Participant 5, Transcript 31, Lines 44–45, 44–52, 60–63, condensed)

Overall, in charting the next course, there is a nursing director who did not merely steer through the turbulence of staffing waters but also laying down future pathways to a safer staffing, stronger professional development, and more supportive work environments.

C. Emergent Theme 3: Anchoring for a Safe Embark

Anchoring for a Safe Embark capture how nursing directors earned insights from the journey in the sea. This emphasized the nursing directors' big role in the organization, maintaining the nurses in numbers while shaping them to become excellent in the delivery of patient care. They viewed the challenges as a source of learning instead of merely a source of pain. Being able to adopt amidst adversities are the qualities of being a great leader (Chong 2024).

These invaluable lessons from the "sea" of nurse retention challenges served as crucial anchors, stabilizing their leadership and guiding them towards more deliberate, compassionate, and strategic approaches to leadership. During interviews, nursing directors shared how they redefined leadership when nurses started to "drift" during challenging times—when retention issues, conflicts, or discouragement arose. For them, the true test of leadership wasn't the absence of problems, but the ability to remain compassionate, decisive, and emotionally stable even when the organization was under strain.

As Gan and Ling (2021) argue, effective leadership in nursing is strengthened when leaders align their values with the team's shared commitment to patient care and organizational goals. However, when this alignment weakens, leaders are challenged to recalibrate their approach, communicate more clearly, and rebuild trust.

Cluster Theme 3.1: Seeing the Horizon with Clearer Eyes

This cluster theme symbolized how the nursing director's gain insights and clarity after they faced the journey on nurse retention issues and challenges on leadership. Recognizing each challenge are patterned with root causes streamlining for more realistic pathways. The ability to envision and see the horizon are cultured from the constant exposure to the challenges of retaining nurses.

The following excerpts portray how resilience applies in this process:

"… maybe if you're a new nursing director, you really have to be strong. It's unavoidable that you will face challenges along the way." (Participant 7, Transcript 49, Line 245-247)

"… it really boils down to motivation. The mindset is that there's always another day tomorrow, whatever you leave unfinished today,

you can continue tomorrow." (Participant 3, Transcript 17, Line 304-306).

"... so, that's why, over time, I've just gotten used to never stop thinking the hospital. My mind never stops; even when one problem is solved, I'm already looking for the next one." (Participant 6, Transcript 40, Line 125-130).

While Participant 6's narrative showed a leader who has internalized the continuous nature of problem-solving, once one issue is resolved, she immediately anticipates the next. Maintaining a calm demeanor and focusing on the future can effectively navigate these challenges. Navigating long-standing nurse retention issues involve leading turbulence, embracing resilience, and embodying true leadership by being optimistic (Van Bogaert, 2023).

In addition, one significant verbatim has expressed the "clearer vision" in leadership:

"... i have to be present, because leadership is not just about being there when everything is going well, but it is even more necessary when things are not okay." (Participant 5, Transcript 33, Line 150-151).

Participant 5 underscores the leader's duty to remain visible and accessible, particularly during crises. This indicates that visibility and reliability, mitigates the impact of ongoing organizational stressors and cultivates confidence among staff (Caniels & Cursue, 2024; Choi et al., 2021).

In this context, "seeing the horizon with clearer eyes" means more than just getting through the challenges of nurse retention. It shows how nursing directors understand and turn their experiences into clarity, resilience, and purposeful coping, allowing them to remain in their positions, continue leading their teams, and help create more stable and supportive environments for nurses

Cluster Theme 3.2: Finding the Stars that Guide the Next Voyage

This cluster theme highlights how nursing directors use their experiences to shape guiding principles for themselves and future nursing leaders. "Finding the stars" represents discovering the essential values, attitudes, and practices future of nursing leadership should embody. This includes fairness, open communication, realistic expectations, and embracing challenges as an integral part of the role.

A participant has emphasized that one of the key "stars" in leadership is organizational justice and adherence to institutional policies:

"... and just follow the hospital protocol, because they will back you up. Be firm and treat your employees well and give them justice." (Participant 2, Transcript 10, Line 133-135)

Participant 2 emphasized that respecting nurses' rights and ensuring fair justice is crucial for their retention. Elhehe et al. (2023) found that organizational justice positively impacts nurses' well-being and work-life balance. Additionally, de Vries et al. (2023) noted that fair treatment, policy transparency, and supportive leadership encourage nurses to stay committed.

Other participants also described personal advice they would give to aspiring or newly appointed nursing directors, emphasizing acceptance of responsibility, broad perspective, and realistic expectations:

"... embracing the job responsibilities means that no matter how difficult the work is, you shouldn't think of it as hard—because it truly is challenging." (Participant 1, Transcript 6, Line 109-110)

"... widen your perspective, stretch your patience, and maintain communication. Once you ascend to a supervisory leadership position, you always maintain the communication because that would either make you or break you as a leader." (Participant 8, Transcript 53, Line 152-153)

Another guiding principle identified was the need to ensure fairness and equal opportunities across units and departments:

"... it shouldn't be that only one unit gets to enjoy; other departments should also have equal opportunities for everyone, that's all." (Participant 4, Transcript 28, Line 306-308)

Taken together, this viewpoint highlights that leadership in nursing is not about

managing problems, but about handling them with willingness to learn, adapt and grow. As nursing leaders navigate complex organizational environment, eventually nursing leaders will learn from different situations and challenges. As articulated in popular culture, "with great power comes great responsibility" (Lee, 1962), a principle that resonates in nursing leadership, where advancing to higher position entails greater accountability, not just to the nursing staff and to the healthcare team but to the welfare of the patients and their significant others.

Cluster Theme 3.3: Calm Seas Don't Make Skilled Sailors

This cluster theme captures how nursing directors see challenges as professional growth. Further illustrates how dealing with staffing shortages, ethical issues, and organizational limits have made them more adaptable, ethically sound, and dedicated in keeping the nurses on board. These experiences didn't just wear them out; it also honed their decision-making skills and broadened their grasp of the complexities in leadership.

Participants described how flexibility and fairness became key leadership lessons learned through experience:

"… sometimes, instead of being too strict and firm, you have to learn to bend." (Participant 8, Transcript 52, Line 109)

"… I make sure they gain something good, that they learn something. As part of coping, I also ensure that we continuously teach our current staff, so they realize that it's still good to stay here." (Participant 3, Transcript 17, Line 300-302)

"Be honest to your service, the commitment, and always look into the welfare of the department, of the nurses." (Participant 9, Transcript 58, Line 198-120)

These participants have exemplified the true leadership in leading the team. Participant 8 verbalized despite being strict to the implementation of policies, he knew he could get bended and try learning or exploring the issues before reacting. Participant 9 has expressed that it is better to maintain being a good leader in crisis than proving oneself as righteous.

Overall, "calm seas" are enjoyed because of the challenges faced that made them skilled sailors. Such emulated greater confidence, sharper judgment, and more refined leadership philosophies that are developed during challenging times, not when things were easy. By making strict yet flexible decisions, committing ethically to staff well-being, learning collaboratively with peers, and reconnecting with bedside care, these leaders have turned adversities into practical wisdom. Given that there are ongoing nurse retention challenges, their stories suggest that it was because of these difficult times helped them become more skilled and grounded leaders of their team.

Implications

The findings of this study underscore that the role of the nursing directors are both the anchors and the navigators of their respective institutions. Their lived experiences revealed the effectiveness of retaining nurses must transcend over the administrative policies but with alignment to the integrity of leadership, emotional resilience and organizational support. The "navigating the turbulence of the sea" reflected the retention issues are systematic illustrating the broader concept of institutional fragility rather than the individual failure. Meanwhile the "steering towards safe harbors" demonstrated how nursing directors responded to the challenges, such as adapting their leadership style, and implementing forward-looking retention initiatives. Finally, the "anchoring for a safe embark" symbolized the reflective and transformative dimension of nursing leadership.

This study underscores that nurse retention is not merely an operational concern but collectively a leadership-driven and institutionally shared responsibilities. In addressing nurse retention puzzles, healthcare organization need to create supportive environments, have leaders who can adapt to changes, and acknowledge nursing directors as key players in maintaining a stable workforce while ensuring high-quality patient care.

This study is recommended for the hospital administrators and institutional leaders that the findings may potentially contribute through institutionalized retention programs, clear and open communication among nurses and

streamlining administrative procedures like budgeting, manpower and equipment. For the nursing directors and other nurse managers, this study may reflect that embracing transformational and adaptive leadership may aid in dealing with the nurses. Such, a mentorship and peer-support system, engagement through reflective and continuous learning practices and promoting a culture of accountability and compassion are considered as effective methods for the nurses. By those suggestions, it may possibly enable the nurses to consider those methods as options to their career path and professional development.

For the nursing educational institutions, incorporating programs and practicum experiences in nursing leadership and management may engage the students to learn the basic skills in nursing leadership. In addition, offering shadowing programs, practicum experiences and encouraging student research on nurse retention and leadership might promote an early exposure to the workforce challenges. For the government organization, developing standardized retention guidelines and policies may contribute for retention plans.

Future investigation involves expanding the geographical and institutional scope of the study to enrich more details and narratives to other areas where nursing leaders are facing the same challenges. Employing a mixed-methods or longitudinal designs may potentially be an effective approach to examine relationship of leadership behaviors and turnover trends.

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