

NEW GRADUATE EMERGENCY DEPARTMENT ORIENTATION... Are They Given The Right Tools?



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PURPOSE

Emergency Department's should ask themselves the question "Are we providing the right tools to our new graduate nurses (GNs) during orientation to decrease nurse turnover?" The complexity of care, high patient acuity, expectations of experienced staff, limited clinical supervision, and frequent stressful experiences all have been reported to influence ED nurse turnover (Patterson, B., Bayley, E.W., Burnell, K., et al. 2009). Hahnemann University Hospital, an urban, Level 1 trauma center has developed and implemented a unique custom designed program that has focused on the retention of their new graduate nurses hired since 2008.

BACKGROUND

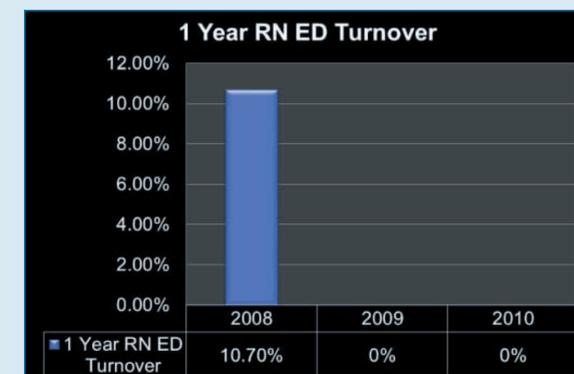
It is predicted that the current nursing shortage will continue, resulting in a shortage projection of ~340,000 registered nurses (RNs) by 2020. Therefore, it remains critically important to recruit new nurses and retain senior, experienced RNs, particularly in workplaces with high turnover rates, such as hospitals (Robert Wood Johnson Foundation, 2009).

With a 69% ED RN vacancy rate in 2008, Hahnemann University Hospital, recruited 30 new GNs to fill the available nursing positions. In prior studies there has been no data regarding new GNs perceptions of their ED orientation program or about the experience of being new to emergency nursing (Patterson, B., Bayley, E.W., Burnell, K., et al. 2009). The average RN turnover rate in acute care hospitals is over 20% and 9.77% for Magnet designated facilities (ANCC, 2011).

UNIQUE ED ORIENTATION

- 24 weeks orientation with preceptor
- 16 weeks mentoring following orientation
- Divided into 4 components
 - Weekly attendance ED physician Grand Rounds
 - Special classes geared toward potential patients/situations
 - Hands-on nursing skills and critical thinking application
 - Home Stretch
- Hospital wide RN Residency attendance
- Hospital wide unit (Cath Lab, CCU, L&D, etc) orientation
- Helicopter ride-along
- Orientation time in Pediatric Emergency Department
- Weekly Precepting by ED Educator
- Critical Care Course
- Trauma Course
- Hazmat/Decon Training
- ACLS/PALS Certifications

RESULTS



CONCLUSION

This evidence-based change in a departmental process offers a strong clinical knowledge base to the new graduate nurses regarding their orientation program. Based on the results of our previous survey and recommendations from the participating nurses in years 2008-2010 we have made some revisions to the program, for example:

- Shortened program from 24 weeks to 16 weeks
- 6 Week post-orientation mentorship
- Converted the inpatient unit based shadowing→orientation within specific units
- Home Stretch developed specific goals/timeline and increased the supervised independence
- Limit the number of preceptors to 2 RNs (1 assigned as primary)
- Weekly follow-up/goal setting between preceptor→RN→ED Educator
- Addition of weekly 12 hour shift orientation weekly with ED Educator
- Follow-ups conducted with ED Educator:
 - 3 month
 - 6 month
 - 1 year
- Critical Care mentors assigned post-orientation

This drastic change in our orientation program came on the heels of a 69% ED RN turnover rate in 2008.

This marked improvement of 0% is believed to be contributed to the revision of our orientation program. We have found through our post-orientation follow-ups that the change in the overall length of the program from 24 weeks to 16 weeks has had no negative effects on nurse confidence, competency or ability to fully manage a full ED patient assignment. In addition, any new graduate RNs who are no longer employed

at Hahnemann from 2008-YTD have stayed within their specialty of Emergency Medicine.

The adjustments to this program were accomplished without any additional costs to staff positions, overtime, or supplies. This new graduate orientation program has the potential to be replicated in any organization with similar demographics and can be specified to meet the individual new graduate nurse's needs for learning.

REFERENCES

- American Nurses Credentialing Center (ANCC). Characteristics of Magnet Organizations (2011). Retrieved from: www.nursecredentialing.org/Magnet/ProgramOverview.aspx.
- The HSM Group, Ltd. (2002). Acute Care Hospital Survey of RN Vacancy and Turnover Rates in 2000. *Journal of Nursing Administration*, 32(9), 437-439.
- Patterson, B., Bayley, E.W., Burnell, K., Rhoads, J. (2010). Orientation to Emergency Nursing: Perceptions of New Graduate Nurses. *Journal of Emergency Nursing*. 36:3. 203-211.
- Kovner, C.T., Brewer, C.S., Fairchild, S., Poornima, S., Kim, H., Djukic, M. (2007). Newly Licensed RNs' Characteristic, Work Attitudes, and Intentions to Work. *American Journal of Nursing*. 107:9. 58-70.
- Napier, M. (2009). Newly Licensed RN Characteristics and Turnover. *Robert Wood Johnson Foundation*. 37. 1-3. <http://www.rwjf.org>.
- Stanton, M.W. (2004). Hospital Nurse Staffing and Quality of Care. *Research in Action. Agency for Healthcare Research and Quality*. 14. 1-9. <http://www.ahrq.gov>.

