

Benchmarks: An Evidence-Based Approach to Determining Competence of Newly Hired Registered Nurses

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Project Aim

Use current evidence-based research to develop a tool that provides consistent, predictable, and measurable criteria to determine transitioning nurse's readiness for safe, competent and independent practice.

Background

Consensus is evident among influential professional organizations (ANA, ANCC, IOM, NCSBN, NIH, QSEN, WHO) as to essential core competencies for healthcare providers. Although there is agreement among them, assessment and measurement of competence for RN's in transition is overly complex and does little to inform transition time-frames. To date hospitals have typically applied standard orientation times varying from 4 weeks for experienced nurse hires to 18 weeks for new graduates. However there is no evidence to support these are reliable time-frame measurements of safe and competent practice. As a result preceptor/preceptee dyads to pay little attention to application of content in order to complete a validation document. Preceptors are left to determine when newly hired nurses are ready to independently practice by their sense of readiness rather than evidence of competence.

Design Strategy

Eleven benchmarks were developed as foundational criteria to determine readiness to practice through research of national healthcare organizations position statements on competency and subsequently cross walked with identified core competencies including patient-centered care, evidence-based practice, quality improvement, safety, teamwork, and information technology. A multi-state, multi-hospital beta test was conducted to implement, test, and refine benchmarks. Over 500 nurse leaders, preceptors, and newly hired nurses were provided workshops on how to use benchmarks to determine readiness to practice independently of preceptor supervision. An electronic management system provided real-time progress of benchmark achievement.

Results

- The impact was trifold.
- Hospitals were able to trend data to determine an average time needed by novice and experienced nurses in transition to provide independent and safe care for a full patient assignment. Data points included RN educational and experience levels.
 - Benchmarks provided concrete criteria for an efficient measure of competence subsequently providing a predictable and measurable road map for determining individualized orientation timeframes.
 - Benchmarks demonstrated consistency regardless of specialty area including medical/surgical, progressive care, intensive care, emergency, labor and delivery, and pediatric departments.



- SHADOW
- Assessment and Documentation
- MEDICATION MANAGEMENT
- COMMUNICATION WITH THE HEALTHCARE TEAM
- DELEGATION & COLLABORATION
- PRIORITIZATION
- MANAGES ADMISSIONS, DISCHARGES & TRANSFERS
- MANAGES CORE MEASURES AND NURSING SENSITIVE INDICATORS
- TIME MANAGEMENT
- COORDINATION OF CARE
- COMPETENT MANAGEMENT OF FULL PATIENT ASSIGNMENT