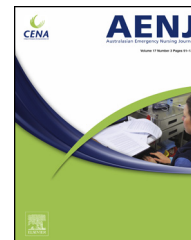




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RESEARCH PAPER

The effect of Transition to Specialty Practice Programs on Australian emergency nurses' professional development, recruitment and retention



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KEYWORDS

Emergency nursing;
Transition program;
Recruitment;
Retention;
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Summary

Background: To date, emergency nursing Transition to Specialty Practice Program (TSPP) evaluations have been single-site observational studies. The aim of this paper was to examine the professional development, recruitment and retention outcomes of Australian emergency nursing TSPPs.

Methods: An explanatory sequential design was used. Data were collected via online surveys and interviews of emergency Nurse Unit Managers and Nurse Educators. Survey data from EDs with TSPPs and EDs without TSPPs were compared. Qualitative data were analysed using content analysis.

Results: Data were collected from 118 EDs, and 13 interviews. TSPPs were offered in 72.1% of EDs. EDs with TSPPs had higher proportions of nurses with postgraduate qualifications (*Mdn* 28.3% vs. 22.1%, $p=0.45$) and Clinical Specialists (*Mdn* 16.4% vs. 6.3%, $p=0.04$). The median

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proportion of currently rostered nurses with TSPP completion was 34.2% in EDs with TSPPs introduced in 2000–2005 indicating ED high levels of retention.

Conclusion: Emergency nursing TSPPs have had a positive effect on nursing professional development, recruitment and retention. To ensure consistency in outcomes and optimise reliability of emergency nursing skills and knowledge, a national emergency nursing TSPP framework is needed.

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What is known

- Transition to Specialty Practice Programs (TSPPs) have been introduced in emergency departments (EDs) and other specialty areas to ensure the provision of safe and effective patient care, and improve recruitment, preparation and retention of emergency nurses.

What this paper adds?

- Data from 118 EDs demonstrated that TSPPs have positive outcomes in terms of professional development, recruitment, and retention of emergency nurses; however, variations in the characteristics of TSPPs resulted in variability in outcomes.

Introduction

Transition to Specialty Practice Programs (TSPPs) offer a “formal program of education and clinical support designed to facilitate the transition” of nurses to a specialty unit.¹ Typically, TSPPs target novice nurses who are only one or two years post registration, or experienced nurses wishing to make a career change and move into an area of specialty. TSPPs have been developed and introduced in an ad hoc manner in emergency departments (EDs) and other specialty areas nationally and internationally since the late 1990s,² to ensure the provision of safe and effective patient care,³ and improve recruitment, preparation and retention of emergency nurses.² There are many reports of TSPPs running throughout Australian and international EDs,^{4–15} including state-wide programs operating in two Australian states.^{16,17} In Australia, participants are paid employees, and do not pay to complete the TSPP.

TSPPs combine incentives such as extended orientation, theoretical preparation, supernumerary time, preceptorship, and clinical support,² to provide a structured, supported transition for novice nurses entering a nursing specialty.¹ Orientation shifts and supernumerary time enable participants time to observe and participate in ED practice without being expected to independently manage a patient load. By comparison, during clinical support, the TSPP participant is allocated a patient load with an experienced emergency nurse working alongside them in a supernumerary capacity to provide guidance and support.

These forms of support, labelled ‘clinical preparation’, facilitate participant professional development. Throughout the TSPP, when participants are not receiving clinical preparation days, or attending study days, they will work in the ED and manage a patient load.

TSPPs have been reported to have a positive effect on professional development outcomes, including improvement in pre and post-tests,^{11,40} self-efficacy assessments^{6,14,18–20,40} and preparedness to practice,^{5,11} and improved documentation of care.⁷ Most authors also reported positive recruitment outcomes, ranging from four¹² to 72⁵ program participants. Nursing retention was measured over an 18–30 month period, and ranged from 78 per cent¹¹ to 96.1 per cent.⁵ A limitation of many emergency nursing TSPP evaluations was conduct of the study at a single site,^{6–10,12,13,15,19,40} with several authors relying on small samples of less than twenty participants, limiting generalisation of results.^{6,8,12,13,19} There may also be variability in outcomes as a consequence of varied characteristics within TSPPs, including duration, mode of delivery, and level of support provided. However, the results from a number of studies suggest that emergency nursing TSPPs may benefit individuals and organisations. The aim of this paper was to examine the professional development, recruitment and retention outcomes of emergency nursing TSPPs throughout Australia.

Method

An explanatory sequential design was used to examine the structure, characteristics, and outcomes of emergency nursing TSPPs in Australia. The Australian Institute of Health and Welfare (AIHW) identified 183 public hospitals in Australia with EDs.²¹ Thirty-two EDs were excluded from the study sample, as they either treated a specific patient population ($n = 13$), or treated less than 5000 patients in the 2010–2011 year ($n = 19$),²² and were therefore not considered representative of a typical Australian ED. This left 151 EDs in the sample. Typically, EDs in Australia treat a mixed patient population (adults and children), and in 2011–2012, each ED in Australia treated a median of 34,645 patients.²³

Ethics approval was obtained from Deakin University and 12 health services around Australia. Research governance approval was obtained from 140 hospitals around Australia, and the EDs at those hospitals were included in the sample. Data were collected by online surveys and interviews of ED Nurse Unit Managers and Nurse Educators. Two surveys were used. The first survey was completed by ED Nurse Unit Managers, and collected data about the ED and staffing profile

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