

Evidence Into Practice: Leading New Graduate Nurses to Evidence-Based Practice Through a Nurse Residency Program

Janet Hosking, MSN, RN-BC, Katie Knox, MSN, RN-BC, Jeana Forman, MSN, RNC, Lou Ann Montgomery, PhD, RN-BC, Jill Gaffney Valde, PhD, RN, Laura Cullen, DNP, RN, FAAN

NURSE RESIDENCY PROGRAMS (NRPs) provide an opportunity to engage new graduate nurses in evidence-based practice (EBP). New graduates bring fresh knowledge, ideas, and energy to the practice environment and need to be embraced in a culture of EBP. This article will discuss lessons learned in providing support to new graduate nurses completing an EBP project as part of a NRP.

Background

New graduate nurses experience gaps between their desire to make a difference for patients and confidence, which affects their ability to transition

Janet Hosking, MSN, RN-BC, Nursing Practice Leader, Department of Nursing Services and Patient Care, University of Iowa Hospitals and Clinics, Iowa City, IA; Katie Knox, MSN, RN-BC, Lecturer, University of Iowa College of Nursing, Iowa City, IA; Jeana Forman, MSN, RNC, Nursing Practice Leader, Department of Nursing Services and Patient Care, University of Iowa Hospitals and Clinics, Iowa City, IA; Lou Ann Montgomery, PhD, RN-BC, Director, Department of Nursing Services and Patient Care, University of Iowa Hospitals and Clinics, Iowa City, IA; Jill Gaffney Valde, PhD, RN, Associate Professor, Clinical, University of Iowa College of Nursing, Iowa City, IA; and Laura Cullen, DNP, RN, FAAN, is an Evidence-Based Practice Scientist, Office of Nursing Research, Evidence-Based Practice and Quality, Department of Nursing Services and Patient Care, University of Iowa Hospitals and Clinics, Iowa City, IA.

Conflict of interest: None to report.

Address correspondence to Laura Cullen, Office of Nursing Research, Evidence-Based Practice and Quality, Department of Nursing Services and Patient Care Services, University of Iowa Hospitals and Clinics, 200 Hawkins Drive, Iowa City, IA 52242; e-mail address: laura-cullen@uiowa.edu.

© 2016 by American Society of PeriAnesthesia Nurses 1089-9472/\$36.00

http://dx.doi.org/10.1016/j.jopan.2016.02.006

into the role of a nurse. Many factors contribute to these gaps: high patient acuity, complex patient needs, and expectations for quality care. New graduate nurses express concerns about their ability to provide safe patient care and meet the performance expectations of their employer.

NRPs evolved to support new graduate nurses experiencing challenges with transitioning to nursing practice. The Institute of Medicine (2010) report,³ recommends that nurses should have the benefit of a residency program at the start of their career and during any career transitions. The National Council of State Boards of Nursing also recommends the support of well-structured, individualized transition to practice or NRPs. Such programs in acute-care hospitals have demonstrated improved outcomes and increased retention of new graduate nurses.⁴

Review of the Literature

In addition to promoting new graduate nurse retention, selected nurse residency and transition to practice programs have focused on EBP and completion of an EBP project. 1,2,5,6 The Commission on Collegiate Nursing Education (CCNE) and the American Nurses Credentialing Center (ANCC) established accreditation standards for nurse residency or practice transition programs that include EBP as a program requirement.

EBP content and project development within NRPs have influenced nursing practice and enhanced the culture of the hospitals in which residents provide care. The completion of EBP projects was identified as one of five instrumental structures or processes with

potential for promoting transformational change within an organization.⁵ Dyess and Sherman² describe evaluative outcomes of a novice nurse leadership program as demonstrating that new graduates gained leadership and translational research skills through completion of an EBP project. Mick⁶ reported on a study of new graduate nurses' feedback regarding completion of an EBP curriculum and EBP project. The study results indicated that new graduate nurses valued the knowledge gained, the application of EBP, and expectation that EBP is an essential component of practice.

The benefits of including EBP in a nurse residency curriculum are described in the literature. Several challenges remain in supporting nurses with this important component of practice. Some of these challenges and opportunities when providing support for EBP in a NRP will be reviewed in relation to the experience of implementing a NRP at an academic medical center in the Midwest.

Program Overview

The University of Iowa Hospitals and Clinics (UIHC) NRP, a CCNE-accredited program, is a collaborative effort with the University of Iowa College of Nursing. The program participates with the Vizient and American Association of Colleges of Nursing (AACN) NRP (formally known as the University HealthSystem Consortium [UHC] and AACN NRP). As part of the 1-year evidence-based program, new graduate nurses experience education and transitional support revolving around the concepts of leadership, patient outcomes, and the professional role of the nurse. 1 New graduate nurses receive education on EBP and complete an EBP project. The framework for EBP didactic content and project development was modeled after the Evidence-Based Practice Staff Nurse Internship program.⁹ The framework for the resident's project development uses the Iowa Model Revised: Evidence-Based Practice to Promote Excellence in Health Care. 10

Lessons Learned

Initially, program content on EBP was delivered in the early months of the NRP to allow sufficient time to plan and implement a project within the 12-month program. Resident feedback from focus group discussions indicated residents' preference to focus on orientating to their unit routines and skill development in the early months of the program rather than completing an EBP project. This feedback from our residents is consistent with findings from Ferguson and Day¹¹ who reported new graduates may be too overwhelmed during the initial months of practice to engage in EBP. They identified that after the initial transition period of 3 to 6 months and with organizational support, new graduate nurses may be ready to participate in EBP.

In response to resident feedback, the timing of the EBP curriculum and project introduction moved from the third to fifth month of the program. Program curriculum in the first months of the program focuses on skills related to role transition and adapting to the clinical environment. Then, content from the shared governance committees and a focus on quality improvement and safety initiatives provides a foundation for the EBP content and project information detailed in Table 1.

As part of ongoing program evaluation and in an effort to seek feedback from the residents, program evaluation surveys were distributed to query for their reaction to the EBP content. Nurse

Table 1. Original Evidence-Based Practice (EBP) Content for Nurse Residency Program

Project introduction: EBP session 1 (program month 5)

- Define EBP
- Introduce the Iowa Model of Evidence-Based Practice to Promote Quality Care¹²
- Critique article published by University of Iowa Hospitals and Clinics (UIHC) staff nurses using the Iowa model for project development
- Review project requirements

Search of the literature: EBP session 2 (program month 7 to 8)

Review electronic databases available for literature search

Project work time: EBP session 3 (program month 10 to 12)

 Provide session time for nurse residents to work on project components—literature search, critique, and poster development

Download English Version:

https://daneshyari.com/en/article/2665932

Download Persian Version:

https://daneshyari.com/article/2665932

<u>Daneshyari.com</u>