Promoting Resilience in New Perioperative Nurses

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ABSTRACT

New nursing graduates experience many challenges when transitioning from the academic environment to the practice setting. For many, the period of transition from student to employee is less than optimal, with many still experiencing reality shock, cognitive dissonance, and theory-practice gaps. The Stephens Model of Nursing Student Resilience addresses the unique issues faced by new graduate nurses to assist them in developing healthy coping strategies and to promote resilience. This model forms the basis of the RN Personal Resilience Enhancement Plan, a supplemental onboarding program created to assist new nurses in confidently facing challenges encountered during orientation and successfully moving forward as nursing professionals. This article describes the concept of resilience and explains how to link the RN Personal Resilience Enhancement Plan to the onboarding process in the perioperative setting. *AORN J 105 (March 2017) 276-284. © AORN, Inc, 2017.*
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Onboarding new graduate RNs in specialized areas of nursing, such as the perioperative environment, requires substantial time, effort, and resources. In the past, nursing recruitment was the primary focus of many employers. In more recent years, because of the increased costs related to hiring and orienting new nurses, efforts to retain new hires have become a priority. Wilson[1] explains that the difficulties of retaining newly hired perioperative nurses can be attributed to the high-stress environment, inadequate orientation, high patient acuity, and lack of support from coworkers. These issues may result in a cycle of declining morale, decreased job satisfaction, increased errors, increased attrition, and difficulty recruiting qualified nurses.[1] Workforce needs have prompted an effort to explore ways to support new nurses, including transforming the orientation process.

The transition from nursing school to the professional environment is often marked with excitement, anticipation, and unfortunately, disappointment. The chaotic nature of the health care environment is notorious for lacking the welcoming and nurturing atmosphere desired for new graduate nurses. Instead, the new graduate nurse is often left feeling unwanted, incompetent, and humiliated.[1] Many novice nurses will seek employment elsewhere or leave the profession because of workplace stress and the disappointment they feel about their chosen profession.[2,3] A recent survey of 1,653 newly licensed RNs indicated that approximately 26% left their initial place of employment within the first two years and 43% left within three years.[4] Attrition rates have improved during the past 10 years; however, the significance of such high attrition is still concerning, especially with a continued nursing shortage and many nurses entering retirement.[2]

Stephens[5] began exploring the concept of resilience to identify the characteristics and behaviors of the nurses who chose to stay at a place of employment despite perceived adversity, as opposed to exploring the reasons why some leave. This
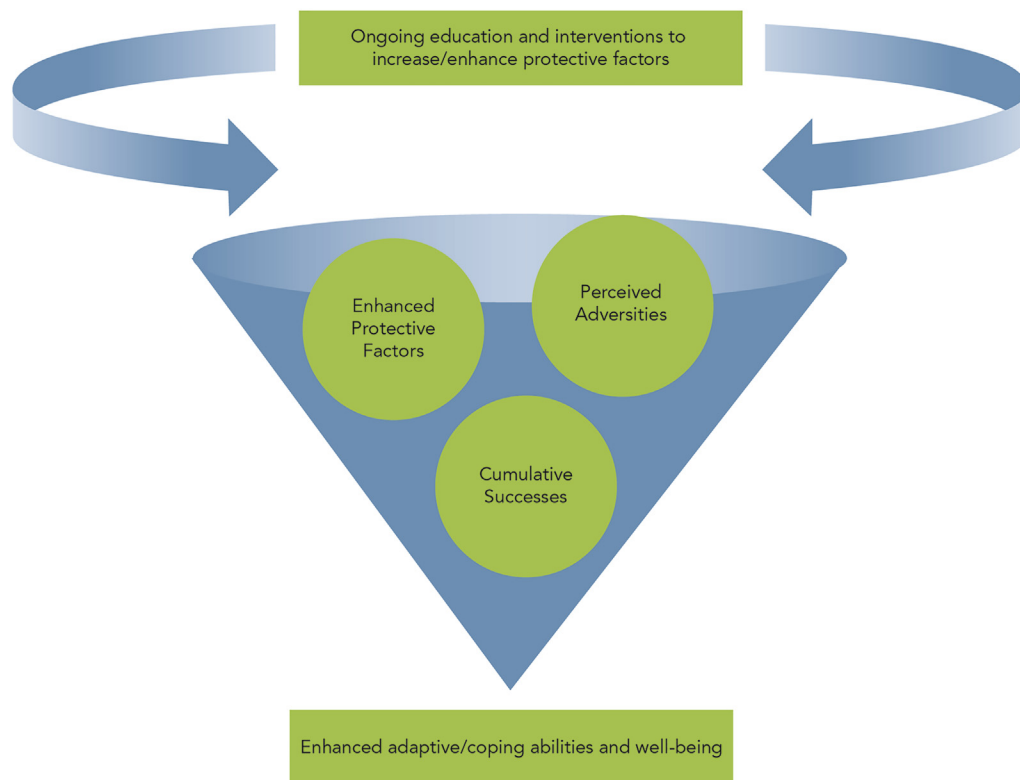
Figure 1. The Stephens Model of Nursing Student Resilience. *Adapted from Stephens TM. Nursing student resilience: a concept clarification.* Nurs Forum. *2013;48(2):125-133. © 2013 Wiley Periodicals, Inc. Adapted with permission from Wiley Periodicals, Inc, Hoboken, NJ.*

exploration was partially the result of a desire to refocus the research efforts regarding nurse retention on promoting positive behaviors that enhance the nurse's ability to cope and deal with adversity. This focus does not negate the need for continued efforts to eliminate incivility, toxicity in the work environment, and other negative contributing factors to attrition. The purpose of Stephens' exploration was to determine whether an enhanced focus on individual resilience will ultimately contribute to a healthier work environment and happier, healthier nurses.

Stephens[6] developed the Stephens Model of Nursing Student Resilience (Figure 1) to address the period of transition into the professional role that is often perceived as stressful by the new graduate nurse. The purpose of this model is to depict the major factors contributing to the development or enhancement of resilience. Based on this model, Stephens developed an onboarding program called the RN Personal Resilience Enhancement Plan (PREP), which encourages self-reflection and the creation of a strategic plan for new nurses to improve their resilience. This program can be incorporated into established onboarding practices to help new graduate nurses confidently face the challenges of transitioning into the professional environment.

RESILIENCE

Resilient individuals have been described as those who not only survive but also thrive after periods of stress or adversity.[7] In the OR, a resilient individual can be considered one who thrives despite challenges associated with working in a high-stress or sometimes hostile work environment. Many researchers now agree that individuals may learn to develop or enhance their own resilience at any time in their lifetime.[8-13] The Norris method of concept clarification[14] was used to define the resilience of new graduate nurses as

> *an individualized process of development that occurs through the use of personal protective factors to successfully navigate perceived stress and adversities. Cumulative successes lead to enhanced coping/adaptive abilities and well-being.*[6(p130)]

Although resilience is often associated with periods of disaster or traumatic events, some researchers are now exploring the concept in healthy, well-adjusted individuals, particularly in those experiencing life changes or transitions.[5,8] For these individuals, the concept of resilience is believed to help with everyday stressors and challenges, in addition to the larger traumatic events most often explored in resilience literature (eg, traumatic injuries, natural disasters, terrorism, sexual violence,