Meeting Recommendation #3 Creating a Statewide Residency Model That Minds the Education and Practice Gap

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Professional nursing practice arenas continue to experience a gap in practice readiness of newly licensed nurses as well as nurses emerging into a new role. Although the literature widely supports transition to professional practice programs, they are often cost prohibited or not fully operationalized to provide a seamless transition that supports knowledge, skill, and attitude acquisition.¹ Both newly licensed nurses and experienced nurses transitioning to new practice arenas experience fragmented onboarding processes and little structure for successful transition and practice readiness.



This leads to poor job satisfaction, increased stress, decreased confidence, and low retention.² To provide both demographics of nurses a seamless transition to practice, regulatory, academic, and practice settings must develop transitional programs that begin long before graduation and prepare the emerging workforce with intentional competency-based outcomes. This article discusses the adaptation of the National Council State Boards of Nursing's (NCSBN) Transition to Practice (TTP) model to align academic-practice settings with nursing workforce preparedness prior to graduation, program completion, certification, or licensure.³

The Transition to Professional Practice (TTPP) Nurse Residency Model (NRM) represents a statewide collaboration to design, implement, and evaluate transition of the professional nurse across academic preparedness and diverse practice settings. This supports a best-practice approach for successful transition of new or experienced nurses new to practice arenas.

Evaluation of the TTPP NRM includes length of orientation, job satisfaction, patient satisfaction, patient care outcomes, practice readiness, and retention. A significant difference in these variables will provide evidence to support sustainability and scalability of transitional programs that ensure safe quality patient care and minds the education and practice gap.

CREATING A STATEWIDE RESIDENCY MODEL THAT MINDS THE EDUCATION AND PRACTICE GAP

The Institute of Medicine's Assessing Progress on the Institute of Medicine's Report: The Future of Nursing continues to advocate

for TTP residency programs for new professionals or professionals emerging into a new role. However, design, implementation, and evaluations vary, and recent suggestions include more emphasis on Advanced Practice Registered Nurse and outpatient care settings.⁴ In order to support the recommendation to implement TTPP programs for all nurses and across all practice settings, the Arizona Action Coalition Education Practice Collaborative (EPC) adopted a conceptual framework to design, implement, and evaluate a statewide TTPP program. The TTPP NRM emerged from the work of the Massachusetts Nurse of Future (NOF) Core Competencies and the NCSBN TTP Model.^{3,5}

The Arizona Action Coalition EPC membership consists of academic and practice thought leaders who have the influence to affect change within their organizations. Thus, adoption and integration of the NOF Core Competencies into academic curriculum design and development was implemented statewide. With a defined set of core competencies, the EPC began the task of looking at each knowledge, skill, and attitude (KSA) that professional nurses could demonstrate at all degree levels and all practice settings. For each of the 10 NOF Core Competencies (Patient Centered Care, Teamwork and Collaboration, Evidence-based Practice, Leadership, Professionalism, System Based Practice, Communication, Informatics and Technology, Quality and Safety), small work groups did a gap analysis to identify the weight of content in practice and academic educational programs, provided revisions, recommendations, additions, or deletions to the KSAs of each competency, and recommended effective teaching strategies that could be utilized by practice and academic educators. The underpinning of the conceptual model is about preparing a professional nursing workforce for the state of Arizona.

The most significant adaptation to the NCSBN TTP Model is the development of an intentional relationship, one which begins prior to academic program completion or licensure, to provide a seamless transition. According to the Nursing Executive Center, 90% of nursing school leaders agree that "overall, new graduate nurses are fully prepared to provide safe and effective care in the hospital setting" while only 10% of hospital nurse executives agree that "overall, new graduate nurses are fully prepared to provide safe and effective care in the hospital setting."6 Armed with the 2007 Nursing Executive Center's survey related to the overall new graduate nurses practice readiness, the EPC leadership held strong conviction that we would "mind the gap" and our professional nursing workforce would be practice ready upon issuing an independent license or certification to practice. The TTPP NRM adopted the Massachusetts NOF Core Competencies and cross walked these to the 36 competencies identified in the Nurse Executive Center study.

A paradigm shift occurred, and we began to conceptualize intentional experiential learning to increase practice preparedness prior to licensure or certification versus obtaining licensure then having intentional experiential learning opportunities (onboarding or post-licensure residency). It is well recognized that meaningful partnerships between academia and practice are critical for a sustainable workforce pipeline.⁷ However, ownership of successful transition has historically been siloed into academia or practice. The TTPP NRM represents an elevated partnership providing opportunities to demonstrate and build on acquired KSAs across and within academic-practice settings. Participants are strategically placed in practice arenas that will support them pre-, intra-, and postacademic preparation or licensure, thus improving practice readiness. The TTPP NRM can be used by academic-practice partners to develop a sustainable workforce pipeline, improve critical relationships, encourage organizational attachment, improve job satisfaction, and promote positive social change and safe quality care through greater retention and organizational commitment.

Safety and quality are the driving forces in promoting positive patient care outcomes and improving systems of patient care delivery. Key stakeholders in care delivery include the practice settings to provide safe quality health care, academic settings to prepare the future workforce to deliver safe quality care, and regulation to "protect and promote the welfare of the public by ensuring that each person holding a nursing license or certificate is competent to practice safely."⁸ The TTPP NRM supports a practice-academic partnership that provides an opportunity for education, practice, and regulatory organizations to work collaboratively to develop TTPP programs that supports emerging professionals pre-, intra-, and postlicensure or certification with a set of core competencies, as well as strategically aligning emerging professionals with future workforce needs.

TTPP NRM PHASE I

The TTPP NRM is designed with adaptability and flexibility to meet organizational and academic cultures, as well as operational needs. During the academic programs summative clinical experience, the academic and practice settings identify intentional learning opportunities that align with socialization to the profession and role preparedness. During this critical time, the participant is supported by both academia and practice for guidance, structure, support, and remediation. For example, in the final semester of a pre-licensure or advanced program, students typically complete a preceptorship or capstone experience with a qualified preceptor. The TTPP NRM proposes an intentional alignment of this experience with workforce needs and to meet academic and organizational objectives. Students may attend some of the organizational onboarding requirements to socialize them to the mission, vision, and values of the organization; introduce them to expectations of how they will demonstrate the KSA of the NOF Core Competencies; develop relationships with professional colleagues; and determine a "best fit" for a future professional position within the organization. The collaboration between practice and education empowers the participant to begin the transition process prior to graduation, licensure, or certification.

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