

Transitioning from School-to-Work: One Successful Model

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In the mid-1990s, the environment at High Point Regional Health System (HPRHS), like that of other healthcare organizations, was becoming increasingly complex. The healthcare team was challenged to meet the needs of a “sicker” patient, hospitalized for a shorter period of time, without compromising the quality of care delivered. Despite this increasing complexity, the orientation process for new graduate nurses remained unchanged. Orientation for a new graduate at HPRHS consisted of two weeks of general nursing orientation followed by department-specific orientation. The duration of department specific orientation varied from eight to 26 weeks, depending on the clinical specialty. Although each new graduate was assigned to a preceptor, learning opportunities and skill development were limited, as was constructive feedback. Inadequacies of the current program to successfully transition the individual from school environment to practice environment were demonstrated by the frequent need to extend the customary orientation period. This method of orientation did little to foster growth and development, especially critical thinking skills, and frustrated both the preceptor and the graduate nurse.

At the same time, another nursing shortage was looming. Enrollment in area schools was declining and fewer student nurses were graduating. This new reality forced organizations to closely examine their recruitment and retention strategies as they positioned themselves to compete for the limited nurse resources. In examining retention effectiveness, HPRHS discovered an alarming trend related to retention of new graduates. In-depth analysis revealed the turnover rate of new graduates at

24 months was 48%. This unacceptable turnover rate was attributed directly to the stress of the transition from recent graduate to competent practitioner. As a result, in the spring of 1997, following painful open and honest dialogue between staff educators and department directors, it became clear that

“Producing a competent, successful and happy nurse requires a partnership between nursing schools and healthcare organizations.”

the current orientation process was in need of a major overhaul. The consensus was that new graduates were minimally prepared to care for patients, yet organizationally we expected an almost overnight transformation from student to expert clinician. This indeed was a very unrealistic expectation. A new program was desperately needed to support the recent

graduate’s transition from student to professional nurse, while reducing the level of stress experienced by the new graduate and preceptor.

Adopting a New Orientation Model

In the spring of 1997, a committee was formed, including staff educators, department directors and the Chief Nursing Officer, to create a new orientation model. To gain further understanding of opportunities for improvement, graduate nurses employed within the previous year were included in the process to provide feedback on the strengths and weaknesses of the current orientation process. Patricia Benner’s “Novice-to-Expert” model provided the theoretical framework for development of the Graduate Nurse Orientation-Success in Specialty Program or GNOSIS (a Greek word meaning specialized knowledge).¹ The goals of the program were to implement an orientation process that would assist the new graduate in

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his/her transition from student to novice practitioner and to improve the retention of new graduates. Additionally, it was believed that improvements in the orientation process would also positively impact the work environment by reducing the stress levels of precepting nurses and nursing colleagues.

Given the critical role preceptors play in the success or failure of an individual's orientation, adequate preparation of the preceptors was deemed essential to ensure a successful transition to the GNOSIS program. To facilitate the shift in thinking, each preceptor was educated on Benner's model. Emphasis was placed on preparing the preceptors to provide new graduates with experiences designed to develop organizational skills, set priorities, and develop critical thinking and technical skills.

GNOSIS

The ten-week GNOSIS program includes both didactic and clinical experiences. Greater emphasis is placed on clinical "hands on" learning opportunities, as this is the area in which the new graduate has the least experience. Identification of personality type and learning style was felt to be an important factor in promoting optimal learning and growth experiences and, therefore, was a new addition to the orientation process. The structure of each week consists of one classroom day focused on a specific body system or care process with the remainder of the week spent in clinical areas that will enhance the knowledge gained in the classroom. Classroom activities draw from the expertise of a variety of disciplines including staff educators,

case managers, respiratory therapists, chaplains and other healthcare providers. The classes cover topics related to all clinical areas including:

- Basic patient care skills (nurse aide skills/tasks)
- Basic nursing care skills (physical assessment techniques, admission and discharge process, equipment, skills such as insertion/removal of feeding tubes, catheters)
- Basic cardiac, neurological, respiratory, renal and gastrointestinal (anatomy and physiology, assessment, commonly seen diseases, medical care, nursing care, routine orders and common medications)
- Drug administration (review of drug classes, medication administration documentation, administration techniques, use of intravenous pump)
- Wound care (wound care protocols)
- Spiritual and ethical issues
- Pain management

Clinical experiences are designed to develop and enhance skills and increase the new graduate's comfort level and confidence in the clinical setting. To ensure that new graduates have the opportunity to maximize their learning experience, they are not counted in the staffing mix. As a result, this allows new graduates an opportunity to observe and participate in experiences frequently not available to them as students such as, cardiac catheterizations, invasive diagnostic procedures and surgical cases. These opportunities assist the new graduate in understanding the dynamics of the total patient care experience and increase their exposure to the organization.

To process the events of the week, new graduates meet with the GNOSIS Program Coordinator at the end of each week and share experiences. This provides an opportunity for the

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entire group to learn from each other and gives them the opportunity to build relationships. New graduates value time spent in this activity as it facilitates closure to the experiences of the week, enabling them to move forward to the experiences of the coming week.

Department-Specific Orientation Follows GNOSIS

Once GNOSIS is completed, new graduates begin department-specific orientation. This orientation time varies based on the clinical specialty. GNOSIS has given the new graduate the basic

skill set necessary to begin this transition and the confidence needed to function in the clinical setting. He or she is now able to focus on further development of organizational skills and critical thinking as applied to their clinical specialty. Preceptors acknowledge that the new graduates are better prepared to embrace departmental orientation as a result of the time spent in the GNOSIS program. Graduates of the GNOSIS program have said, "The GNOSIS program not only helped me to develop my skills, it allowed me to see what happens in other areas of the hospital that I won't be working in," and "GNOSIS gave me the time to develop my skills and put what I learned in school together with what I was learning here."

Return on Investment

In terms of financial support, the program is included in the annual operational budget and funded to cover the orientation of 36 new graduates annually. Recognizing the organization's financial commitment for operating this program, new graduates sign a three-year work agreement. Failure to complete the work agreement results in a monetary "fine" to the nurse. The requirement of a work agreement has not proven to be a deterrent to participation in the program as new graduates have recognized the value and uniqueness of this program.

Implementation of the GNOSIS program has resulted in immediate and sustained success. To-date, 22 GNOSIS sessions

have been completed. Currently the turnover rate at 24 months is 22% with the majority of turnover being unavoidable, such as relocation or return to school. When asked to evaluate the program, both new graduates and preceptors continue to validate the program's success in preparing the new graduate to practice effectively in the clinical setting.

The program requires an additional human and financial commitment from HPRHS; however, this expense is easily offset by the reduction in turnover, improvements in the work environment, and satisfaction of new graduates and preceptors. One might argue that it is the responsibility of the nursing schools to produce a more qualified, capable clinician. Unfortunately, given the constraints placed on today's educational programs and the complexity of the healthcare environment, it is impossible for one entity to accomplish this lofty goal alone. Producing a competent, successful and happy nurse requires a partnership between nursing schools and healthcare organizations. In this time of nursing shortage, visionary thinking and risk taking will be necessary as strategies are developed to prepare, grow and develop the future nursing workforce. As Florence Nightingale said, "For us who nurse, our nursing is a thing, which, unless in it we are making progress every year, every month, every week, take my word for it, we are going back." Our future nursing colleagues and the public we serve are depending on us to make progress every year, every month, every week. **NCMJ**

REFERENCES

- 1 Benner, P. 1984. From Novice to Expert Excellence and Power in Clinical Nursing Practice. Addison-Welsey, California.