

# Development of a Transition to a Nurse Residency Program

Jana Goodwin, PhD, RN, Jennifer Zipp, DNP, MS, RN, Eursula David-Sherman, MSN, RN, NPD-BC  
Joan Warren, PhD, RN, NPD-BC, NEA-BC, FAAN  
Maryland Organization of Nurse Leaders Inc./ Maryland Nurse Residency Collaborative  
(MONL Inc./MNRC)

## Background

The disruption of the COVID-19 pandemic on traditional on-site clinical experiences forced nursing school faculty to find alternate theory-based teaching strategies like virtual clinical and simulation to educate students. The disruption further widened the pre-existing education-practice gap.

An environmental scan found that greater than 55% of students moved from in-person clinical to simulation or virtual simulation. Further, the scan found that students were missing the opportunity to develop mastery in the fundamental skills.

New nurses graduating during the COVID-19 pandemic are entering hospitals with less clinical experience and highly variable learning, social and emotional needs (ONL & NLN, 2020).

## Objective

To create a curricular toolkit to be used to support the learning needs of new-to-practice nurses prior to transitioning to a Nurse Residency Program (NRP).

## Development

### Phase I

A statewide MONL, Inc./MNRC taskforce of leaders from academic and hospital settings convened and 2 subgroups formed.

### Phase II

Two subgroups met over 2 months to develop a comprehensive Toolkit containing curricular content, skills assessment and program evaluation, and outcome metrics

### Phase III

The taskforce reconvened and presented TNRP toolkit to key stakeholders for input on feasibility and implementation


## Methods

### Assessment and Evaluation

- Skills assessment tool
- Participant program evaluation
- Outcome measures of success


### Curriculum Development

- Key assumptions
- Target audience
- Objectives
- Structure
- Curricular content
- Resources



Program: Transition to Nurse Resident Program (TNRP)	Updated: 01/19/2021
<b>Goal:</b> Increase new to practice nurses' competence level (not necessarily confidence) entering hospital-based NRPs equal to their pre-COVID-19 pandemic counterparts.	
The target learners consist of new to practice nurses entering Maryland hospital-based Nurse Residency Programs during the finite time of the COVID-19 pandemic. New nurses are entering with varying clinical experience, social and emotional needs due to the pandemic's impact (ONL & NLN, 2020). COVID-19 necessitated nursing schools to find alternate theory-based teaching strategies like virtual clinical and simulation to educate students in place of traditional on-site clinical experiences. The purpose of this curriculum is to develop specific skills and competencies that pre-licensure nursing students could not demonstrate and/or experience due to the reduction and/or cancelation of in-person clinical education in response to the pandemic.	
The TNRP is a time-limited onboarding program to support new to practice nurses during the COVID-19 pandemic. Learning should take place in-person, using hands-on patient experiences or high/low fidelity simulation. Content is understood to be taught in the academic setting and return demonstrated in the practice setting. The content outlined by the learning objectives is demonstrated at a novice level to reinforce hands-on experiences disrupted during the pandemic.	
<b>Context (learner group, learner characteristics, style, developmental level, learning theory):</b> Participants are adult learners with a wide range of expertise, experience, and backgrounds. They uptake information using all four of Fleming and Mill's learning styles (Visual, Aural, Read/Write, and Kinesthetic) (Bastable, 2014). Further, the learners' development level ranges from young adulthood to middle-aged adulthood at the cognitive stage of formal operations (Bastable, 2014, p. 171). Cognitive learning theory drives this learning experience. Acquisition of knowledge and new skills requires a change in the learner's cognition (Bastable, 2014). Cognitive learning theory is active, directed by the learner, and "involves perceiving the information, interpreting it based on what is already known, and then reorganizing the information into new insights or understanding" (Bastable, 2014, p. 73). These principles help the learner to process this level of information.	

Figure 1: Transition to Nurse Residency Program Curriculum-Page 1



Transition to Nurse Residency Program (TNRP) Skills Assessment			
Resident Name: _____		Preceptor Name: _____	
Program Start Date: _____		Program End Date: _____	
Fundamental Skills	Pre-Orientation Assessment (Resident Self-Assessment)	Post-Orientation Assessment (Coach/Preceptor Assessment)	Coach / Preceptor Feedback
Isolation Precautions			
• Handling Soiled Equipment			
• Don and Doff PPE			
Hand Hygiene			
Vital Signs			
Point of Care Tests			
• Glucometer			
Handling Specimens			
Sharps Safety			
Patient Hygiene			
• Make Bed (with/without patient)			
• Bath			
• Toilet			
• Foley Care			
Ambulate/Transfer Patients			
• Foley Care			
Communication Skills	Pre-Orientation Assessment (Resident Self-Assessment)	Post-Orientation Assessment (Coach/Preceptor Assessment)	Coach / Preceptor Feedback
Communicate with Patients			
• Introduce Self			
• Patient Identification/Identifiers			
• Verbal/Nonverbal Behaviors			
Patient Education			
• Initiate and Update Plan of Care			
• Set Goals with Patient			

Figure 2: Transition to Nurse Residency Program Skills Assessment-Page 1

## Results

Thirty-six area institutions were surveyed about the TNRP Toolkit and plans for implementation.

### Twenty-six hospitals responded.

- Implemented- 8 hospitals
- Planning to implement- 10 hospitals
- No plan to implement- 8 hospitals

Of the eight hospitals that did not implement, the following responses were provided:

- Financial/Personnel barriers
- No need to implement currently
- Smaller cohorts
- Some components of the toolkit already exist in institution

## Conclusions

With the nursing shortage increasing during this unprecedented time, the need for innovative strategies for retention grows. Ensuring that missed clinical experiences are recaptured on the hospital side is one way to ensure these individuals are supported and that these nurses grow to be competent professional nurses.

## References

ONL/Organization of Nurse Leaders (Massachusetts, Rhode Island, New Hampshire, Connecticut, & Vermont) & NLN/Massachusetts/Rhode Island League for Nursing. (2020). *Supporting new nurse transition into practice during the COVID-19 pandemic* [PDF file]. Retrieved from <https://onl.memberclicks.net/assets/docs/NewNurseGroupSupport/NewNurseTransitionReportCOVID-19Pandemic.pdf>

### LINK TO TOOLKIT:

[https://s3.amazonaws.com/nursing-network/production/files/100597/original/TNRP.Toolkit\\_28v6\\_29.pdf?1613706061](https://s3.amazonaws.com/nursing-network/production/files/100597/original/TNRP.Toolkit_28v6_29.pdf?1613706061)

## Acknowledgements

We want to thank the TNRP Taskforce members for their work and Althea I. Miller-Umar, BSN, RN, University of Maryland Psychiatric DNP Student, for conducting the environmental scan on the impact of COVID-19 on prelicensure nursing education.

## Contact

Jana Goodwin PhD, RN (jgoodwin@umaryland.edu)