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BACKGROUND

- An elaborate healthcare system with patients having complex care needs is recognized as today's norm and nurses entering this system are expected to navigate and respond appropriately.
- Resiliency is a relevant topic for new graduate nurses because it has been named as a key factor for nurses' ability to not only endure challenges, but also flourish in the new roles. Building resilience begins within the academic setting and the workplace aims to sustain and/or improve resilience.
- Health care institutions often require new graduate nurses to complete a nurse residency program in tandem with unit-based orientation. As nurse residents, newly graduated nurses are in a prime environment to benefit from the enrichment of resilience.

EVIDENCE FOR THE PROBLEM

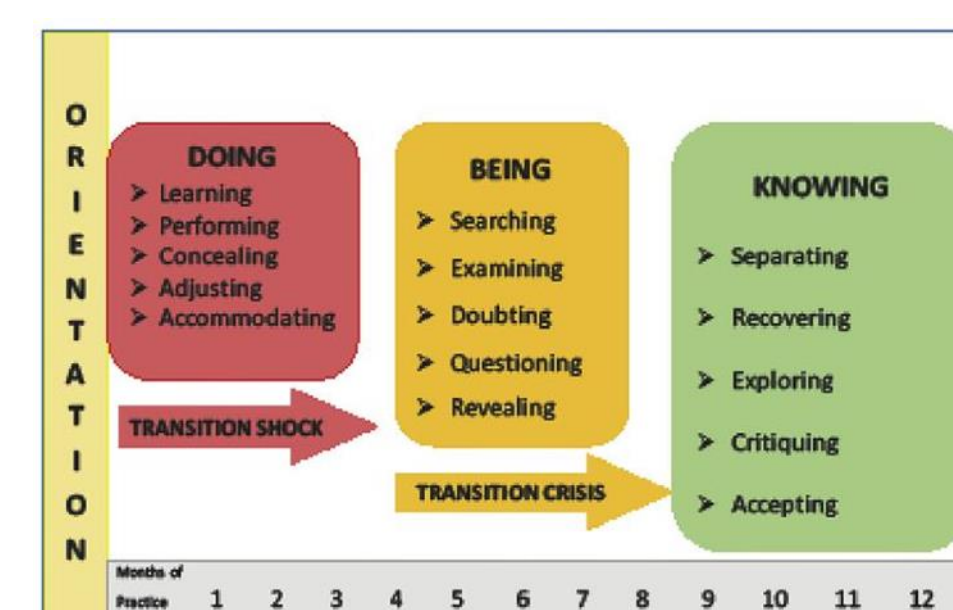
- Supporting newly licensed nurses' resilience is important because America's health care system is under unprecedented strain and there are not enough nurses to meet that need.
- Newly created nursing positions and replacing retiring nurses will contribute to the occupation's need for growth.
- Meanwhile, rigors of the health care system drive nurses to leave the profession within the first year. Nursing turnover for an institution is not only a monetary cost, but turnover negatively affects the overall workplace culture and potentially, the quality of patient care.

EVIDENCE-BASED INTERVENTION

- Nurses entering the profession need provisions to help ensure success in new roles. The rigors faced by new graduate nurses and the concept of resilience are equally complex. One critical way to help new nurses strengthen their responses to challenges and effectively manage change is by building their resiliency (Shin, Taylor, & Seo, 2012). Stress and adversity are not going to disappear, so providing models and mechanisms for nurses to enhance their resiliency is essential.
- Often, it is not enough to merely send a new nurse through a facility's standard orientation protocol. Rather, newly graduated nurses should be supported and mentored via a structured residency program. As part of that program, strategies should be included to foster resiliency not only during transition to practice, but ongoing well into one's professional journey.
- A multitude of activities should be used to resonate the topic, including simulation, reflective journaling, collaborative/creative/therapeutic learning activities, meditation, games, and role-play (McDonald, Jackson, Wilkes, & Vickers, 2012; Stephens, Smith, & Cherry, 2017).

EBP MODEL/Framework

Nurse theorists play an important part in understanding how to shape the transition of new graduate registered nurses (NGRNs). Duchscher's Stages of Transition Theory describes this transition in three stages: *doing, being, and knowing* (see figure below). Supported by Patricia Benner's Novice to Expert Theory (Benner, 1982), the Transition Theory pertains to the new nurse's first 12 months of practice (Duchscher, 2008). All encompassing, Duchscher's theory supports "...mentoring, socialisation, positive reinforcement and continuing support for NGRNs." (Chang & Daly as cited in Murray, Sundin, & Cope, 2019, p.202).



PURPOSE/PIOT

The purpose of this project was to review the impact of resiliency training on new graduate nurses in a nurse residency program (NRP), specifically, the *graduate nurse experience* and level of resiliency prior to and following resilience-building interventions.

How do (P) graduate nurses in a nurse residency program receiving (I) resiliency training as part of the residency education program (O) benefit (T) during transition into the first professional nursing role?

PROJECT PLAN PROCESS

Integrated into the Nurse Residency Education Program (REP), a modified resiliency training platform developed by TRACOM (2016) steered the monthly session topics/strategies as follows:

Project time frame: July 18, 2019 to January 2, 2020

Launch day:

What is resilience and why is it important? Review of the Adaptive Mindset for Resiliency Model

Session 1: CAB/CAR and DRAINING

Session 2: Developing Mindfulness

Session 3: Acting "As If"

Session 4: Developing Gratitude

Session 5: Giving

Session 6: Setting Ambitious Goals

As part of the training platform, each nurse resident received a corresponding Resource Guide (TRACOM, 2018) and Concepts Guide (TRACOM, 2015) to augment their personal journey.

COST-BENEFIT ANALYSIS

Cost:

Integration of the resilience training was relatively seamless. The sessions were part of small group breakout sessions lasting 25-30 minutes. The nurse residents were not required to spend any additional time at the Residency Education Program sessions.

Benefits (organizational)

- Bedside registered nurse (RN) turnover rate in 2019: **15.9%** (national) (Nursing Solutions, Inc. [NSI], 2020)
- Nurse turnover rate at Midwestern United States hospital: roughly **19%** (personal communication, July 9, 2019)
- Average cost of turnover for a bedside RN: **\$44,400** (NSI, 2020)
- National RN vacancy rate: **9.0%** (NSI, 2020)
- Midwestern United States hospital nurse vacancy rate: **6.7%**

Benefits (individual)

- Personal reasons** continue to be in top 3 motives why RNs voluntarily resign (NSI, 2020)
- Consequences of resilience (Dyer & McGuinness, 1996; Gillespie, Chaboyer, & Wallis, 2007):
 - Personal control
 - Psychological adjustment
 - Growth in the wake of disruption
 - Toughening
 - Effective coping
 - Active mastery of subsequent situations

METHODOLOGY

A mixed-method approach incorporated both qualitative and quantitative research techniques, supplying a depth and breadth of information particularly related to change and improvement (Reavy, 2016).

TRACOM's Adaptive Mindset for Resiliency Self-Perception Profile

- Online version
- Completion required between Launch Day and Session 1
- Provided each resident with an individualized interpretation of his/her results in a model of resiliency that consists of 9 elements organized into a 3-dimensional framework: Filter, Act, and Interact
- Scores gave the residents feedback regarding strong, secondary, and underdeveloped sources of resiliency
- Each resident received a private 8-page report

Measurement instruments:

Casey-Fink Readiness for Practice (RFP) Survey

- Launch Day
- Demographical information (7 items)
- Baseline perception of confidence and readiness to enter the nursing profession (7 items)
- Four-level Likert-type scale with fill-in-the-blank and short answer items

Casey-Fink Graduate Nurse Experience (GNE) Survey

- Session 6
- Post-intervention perception of confidence and readiness to enter the nursing profession (7 items, repeated from RFP survey)
- Resident feelings about responsibilities and workload; communication with patients and their families; and experiencing personal life stress (3 items)
- Four-level Likert-type scale with fill-in-the-blank and short answer items

Connor-Davidson Resilience Scale (CD-RISC-25)

- Session 1 & Session 6
- Self-rated items rated on a 5-point frequency response (0-not true at all; 1-rarely true; 2-sometimes true; 3-often true; 4-true nearly all the time).
- Total score ranging between 0 and 100; higher scores correspond with greater resilience.

End of Study Questionnaire

- Session 6
- 10-item investigator-developed
- Integrated into TRACOM's existing "How'd We Do?" Evaluation Sheet
- Resident adherence to the treatment, as well as opinions about the TRACOM resiliency training platform

EVALUATION RESULTS

- All nurse residents practiced the strategies associated with the resiliency program while working. Mean response was 36-55% of study days.
- CD-RISC-25:** Comparisons of baseline measures with post program measures showed an improvement in the mean scores for the 20 nurse residents.
- Casey-Fink RFP and GNE:** Four of the seven questions showed improvements in mean responses from the nurse residents: communication with physicians, caring for dying patient, delegation to UAP, and opportunities to practice skills/procedures. Three questions: ease in asking for help, difficulty prioritizing, and satisfaction with chosen specialty resulted in slight, unfavorable changes from baseline.

IMPLICATIONS FOR PRACTICE

- Nursing curriculum across the country teach by way of evidence-based instructional methods and high-fidelity simulation. This method of study exposes future nurses to a potpourri of clinical settings where the trade can be practiced and refined.
- Despite all this, harnessing a vast amount of competence and confidence as a professional nurse begins the moment, he/she steps into an entry-level nurse position. For most, it proves to be a long journey moving from novice to expert. Such a journey certainly does not happen during most new nurse orientation programs that last a mere 6 to 12 months. Complicating this journey are a multitude of factors including increasing patient acuity, feelings of dissonance, and lack of emotional and professional support in the workplace.
- Resiliency training can help bridge the gap between classroom and practice for newly graduated nurses and can provide the new nurse with the ability to 'bounce back' from adversity and transition to professional nursing with greater ease.
- As our country faces an unsurmountable shortage of nurses, we cannot afford to lose new nursing staff to burnout and/or job turnover intention. When nursing staff are lost to a preventable cascade of events, including lack of onboarding support, supervision, encouragement, and tools for success, the need for proactive strategies is obvious.
- As such, elevating nurse residents' resilience will enhance immediate transition to practice. Additionally, training nurses 'how' to be resilient is a quality that can be carried forward in a nursing career. The trajectory of nursing is a balance of rewards, challenges, and overarching potential to change the lives of others. Balance can happen by way of well-meaning and compassionate care that is provided by a resilient nurse.

CONCLUSIONS

- Transition into nursing and the concept of resiliency are complex and dynamic processes.
- Incorporating resilience training to complement the didactic and experiential clinical learning in the academic setting as well as during the onboarding residency program may help smooth the professional transition of newly- graduated nurses.
- Moreover, resilience-building interventions with direction from Duchscher's Stages of Transition Theory can supply just what an entry-level nurse may need to take the journey. Coming out on the other side, these nurses will then be stronger, more capable, and optimistic about their professional future.

REFERENCES



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