

Strengthening Healthy Work Environments For Nursing Faculty through an Evidence-based Academic Nurse Residency Program

Elizabeth A. Gazza PhD, RN, FACCE, LCCE, ANEF

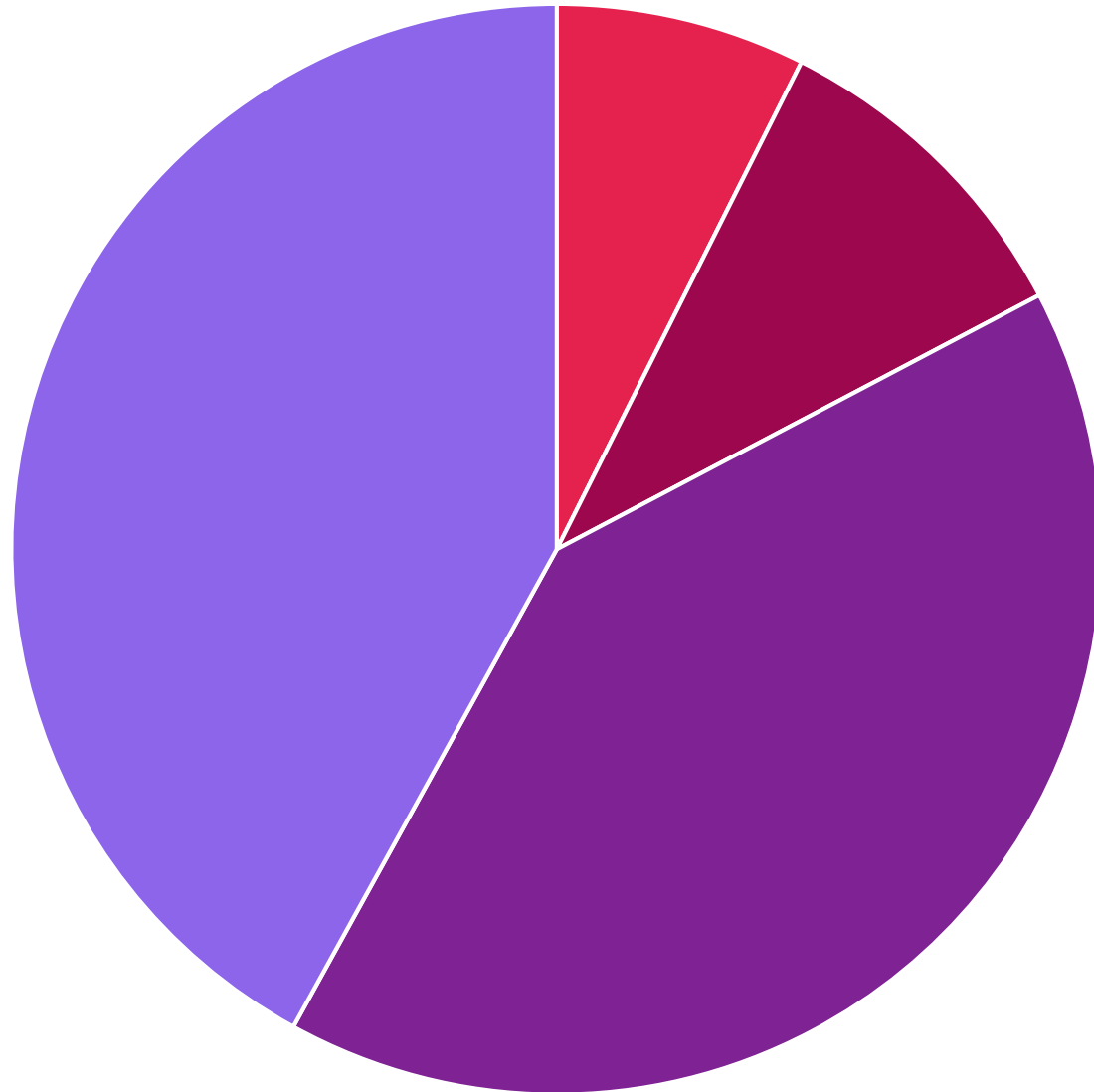
MSN Nurse Educator Program Coordinator and Associate Professor
University of North Carolina Wilmington (UNCW) School of Nursing

Melissa G. Mehrlich RN, MHA, MSN

Clinical Performance, Carolinas Physician Alliance
in Collaboration with Carolinas HealthcareSystem



Academic Nurse Educators (ANEs)



- Full
- Associate
- Assistant
- Lecturer

What is available for new ANEs?

- Courses & Programs
- Orientation
 - University
 - College
 - School of Nursing
 - Program(s)
 - Delivery Method(s)
 - Practice Site(s)
- Faculty Development
- Teaching Circles
- Scholarship Mentor
- Writing Circles & Groups
- Centers for Teaching Excellence

What are the gaps?

Clear educational pathway

Specific knowledge and skills

- Pedagogical training
- Curriculum development
- Learning assessment
- Student management

(Summers, 2017)

Meta-Profession (Theall & Arreola, 2006)

- Base Profession
- Meta-Profession



Nurse Educator Transition Model

(Schoening, 2013)

- Anticipatory/Expectation Phase
- Disorientation Phase
- Information-Seeking Phase
- Identify Formation Phase

Filling the Gap

- Recruit, retain, and transition new graduate nurses to clinical practice (Edwards, Hawker, Carrier, & Rees, 2015; Lin, Viscardi, & McHugh, 2014).
- Positively influence the health of clinical work environments
 - Increase nurse satisfaction and decision-making
 - Promote professional growth and leadership skill development (Al-Dossary, Kitsantas, & Maddow, 2014)
- Promote high levels of professional accomplishment and commitment to nursing (Rosenfeld & Glassman, 2016)



NURSE RESIDENCY PROGRAMS!



ACADEMIC NURSE RESIDENCY PROGRAM

Review of the Literature

Key Words

- Nursing faculty shortage
- Transitioning to nurse educator
- Nurse Residency
- Faculty development
- Mentoring
- Transition programs
- Residencies
- Components of residencies
- Educator transition
- Social Media Strategies

Databases

- PubMed
- ProQuest Central
- CINAHL
- Ovid
- Elsevier

42 articles included
4 discarded

Benefits of Residencies

- Improve skills, encourage professional growth, confidence and leadership, and ease transition while improving retention, satisfaction and reducing turnover (Al-Dossary, Kitsantas & Maddox, 2014; Medas, Grimm, Radziewicz, Rhodes, VanHorn, & McNett, 2015)
- Improve clinical decision making, increase level of commitment and promote job satisfaction (Blevins, 2016)
- Encourage development of academic identity (Duffy, 2013)
- Provide support and socialization (Kram & Wilson, 2016)
- Benner's novice to expert framework (Brown & Sorrell, 2017)

Return on Investment

THE COST OF TURNOVER

- Higher orientation/training costs
 - Decreased productivity
 - Greater labor costs (overtime, relief staffing)
 - Decreased efficiency
 - Lower quality
- (Hansen, 2014)

BY THE NUMBERS

- \$88,000 (Greene, Warren, & Perkins, 2016).
- \$300,000 (Little, Ditmer, & Bashaw, 2013).
- 125% of a nurse's salary (Hansen, 2014)
- 1.1 million additional nurses (US Bureau of Labor Statistics, 2018)

Residency Content

Mallory & Franquiere, 2017

- Knowledge
- Skills
- Attitude

Garrison, Dearman, Graves, 2017

- Competence development
- Interprofessional practice
- Evidence-based practice
- Socialization and mentorship
- Feedback

More, 2017

QSEN: 6 Core Competencies

- Pt centered care
- Teamwork & Collaboration
- Evidence Based practice
- Quality improvement
- Safety
- Informatics

Little, Ditmer, Bashaw, 2013

Watson's theory of human caring

- Relationship based
- Leadership
- Teamwork
- Professional Practice
- Care delivery
- Resources
- Outcomes


Academic Nurse Residency Program

- Utilize a standardized timeframe
- Early access
- Focus on the role
- Use an evidence-base
- Include formal and diverse learning experiences
- Engage with peers, preceptors, and mentors
- Incorporate reflection
- Document progress
- Continuous improvement



Virtual Delivery Platform

- Minimize repetition across institutions
- Reach national and international faculty
- Foster instruction, engagement, and reflection
- Facilitate networking
- Utilize technology
- Integrate social media



What are your thoughts about
the Academic Nurse
Residency Program?

gazzae@uncw.edu

mgmehrich@gmail.com

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