Empathy Levels of New Graduate Nurses in a Nurse Residency Program

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1. Background

Recent research shows that nursing students are emerging from nursing school with lower levels of empathy than when they entered nursing school (Ward, Cody, Schaal, and Hojat, 2012). Higher levels of empathy are associated with higher quality patient care (Jahanshahi et al., 2017; Pereira, Figueiredo-Braga, and Carvalho, 2016) and lower levels of burnout and stress among nurses (Bourgault et al., 2015; Duarte & Pinto-Gouveia, 2017; Ferri, Guerra, Marcheselli, Cunico, & Di Lorenzo, 2015). Since empathy can be a protective barrier against burnout and stress, fostering empathy among new nurses is crucial for retention rates. The Institute of Medicine released a “Future of Nursing” report, recommending that hospitals develop nurse residency programs to retain new nurses. However, the effectiveness of these programs in maintaining empathy among new graduate nurses is unknown.

2. Problem Statement

A concerning study was completed in 2012: student nurses are emerging from nursing school with lower levels of empathy than when they entered nursing school. We propose to examine the levels of nurse empathy at 1, 4, 8, and 10 months in a nurse residency program.

Research question: Do the levels of empathy in new nurse graduates increase as they advance through a yearlong nurse residency program?

3. Methods

This study had a quantitative, non-experimental, and cross-sectional design. The sample was comprised of four cohorts of new nurse graduates that were at the one month, four months, eight months, and ten months mark in a yearlong nurse residency program. Each cohort was surveyed once from June through July 2018. The nurse graduates were all actively enrolled in a nurse residency program and were in their first position as a new nurse graduate. The nurse residency program supported new nurse graduates with monthly didactic sessions while the nurses concurrently worked in their home units, ranging from acute care floors in the hospital to ambulatory settings. The setting was a 627 bed level I trauma center and academic hospital in Northern California. The outcome measure was a survey, the Jefferson Scale of Empathy (JSE), developed by Ward et al. (2009). The JSE is a self-report measure comprised of 20 questions, each with a seven-point Likert scale. The maximum score is 140, while the minimum score is 20. A higher score indicates a more empathetic orientation.

4. Preliminary Results

While final data collection and inferential and descriptive statistics are pending, preliminary results suggest that the newest cohort of new nurse graduates have the highest levels of empathy. The next cohort, with three months more experience, have lower levels of empathy. The cohort surveyed with the most experience thus far, eight months, had the lowest levels of empathy.

5. Conclusions
Initial data analysis suggests that the longer the new nurse residents are in the new graduate residency program, the lower their levels of empathy. Final data collection is pending, to be completed mid-July 2018. Descriptive and inferential statistics will be performed in late summer of 2018.

6. Implications for nursing

Retaining new nurses can be a challenge due to a multitude of factors. Nurse residency programs are evidence based and support new nurses as they transition into the new nurse role. If the initial trends of this study continue, with new nurse graduates having lower levels of empathy the longer they are in a nurse residency program, it may be time to look at how nurse residency programs can focus on fostering empathy.

Title:
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References:


Abstract Summary:
Over half of new nurses leave the nursing profession within two years. Empathy may be important in the retention of new nurses in the profession. The purpose of this study was to examine empathy in new nurse graduates during a yearlong nurse residency program.

Content Outline:

Introduction

1. A concerning study was completed in 2012: student nurses are emerging from nursing school with lower levels of empathy than when they entered nursing school (Ward, Cody, Schaal, & Hojat).
   1. Definitions: Empathy versus Sympathy
      1. Empathy is defined as having two components, cognitive and affective (Hojat, 2007). Cognitively, empathy entails the ability to understand someone’s perspective. Also, emotionally, empathy entails the ability to feel another’s emotions.
      2. Hojat (2007) states that empathy differs from sympathy because empathy focuses more on the cognitive component, whereas sympathy has more of a focus on the emotional component.
   2. Empathy is critical to study in new graduate nurses, as the literature demonstrates that they are emerging from nursing school with lower levels of empathy. Nurse residency programs are a critical focus area to study new graduate nurses in, since nurse residency programs were developed to increase retention rates of new nurse graduates, expand new nurse competencies, and improve patient outcomes. Empathy is a vital area to study due to an impending nursing shortage, empathy’s effect on nurse retention rates, and empathy’s effect on patient care.

Main Supporting Point One: A nursing shortage is predicted due to several factors.

1. 57% of new nurses leave the profession altogether within two years of starting their first position (Twibell & St. Pierre, 2012).
   1. It costs $82,000 to train a new nurse, on average (Twibell & St. Pierre, 2012).
   2. Job satisfaction is lowest among nurses at six months and one year after starting a new job as a nurse graduate (Good et al., 2009).
   3. The IOM Future of Nursing Report recommends developing nurse residency programs to retain new nurses.
      1. No studies have examined new nurse graduates’ levels of empathy.
   4. The baby boomer generation of nurses are beginning to retire.
   5. There are demographic changes in the patient population as the baby boomer generation ages. The result will be an increased demand for healthcare provided by nurses.
   6. There is a shortage of nursing faculty and clinical sites to train new nurses.
Main Supporting Point Two: Empathy is beneficial to nurse retention

1. Empathy is associated with lower levels of burnout and stress among nurses (Bourgault et al., 2015; Duarte & Pinto-Gouveia, 2017; Ferri, Guerra, Marcheselli, Cunico, & Di Lorenzo, 2015).

Main Supporting Point Three: Empathy is beneficial to patient care

1. Higher levels of empathy are associated with higher quality patient care
   1. Empathy is associated with decreased patient anxiety, decreased surgical recovery time, and faster wound healing (Pereira, Figueiredo-Braga, & Carvalho, 2016).
   2. Clinician empathy was associated with better patient communication and increased medication compliance (Flickinger et al., 2016).
   3. Nurses with higher levels of empathy towards their patients had superior clinical skills (Jahanshahi et al., 2017).
   4. Patients’ families who perceived the nurse as having higher levels of empathy felt that their family member was better cared for (Moghaddasian, Dizaji, & Mahmoudi, 2013).

Conclusion

1. Empathy is a critical component of nursing care, contributing to better patient outcomes and better nurse retention. As a nursing shortage approaches, it is essential to examine the levels of empathy in new nurse graduates as they enter the nursing profession.

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