

Innovation in Action: How to Design a New Graduate Float Pool

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Background

- ❖ The institution was unable to successfully establish and maintain a float pool of seasoned nurses.
- ❖ The Medical Center is anticipating a need for 300+ skilled nurses in upcoming years due to expansion plans.
- Newly gradated nurses in the area have been experiencing difficulty in securing RN positions in some cases, for up to a year.
- Hiring newly graduated nurses into a float pool using the existing Nurse Residency program with additional support for multiple clinical environments.
- ❖ The goal was to create a float pool of nurses appropriately trained within clinical zones so they can serve as an internal resources for clinical units experiencing growth or nurse attrition.

Objectives of the Project

- ❖ To improve staffing resources through the implementation of a NEW Graduate Nurse Float Pool (NGNFP)
- Provide new grads a means of employment in a competitive market predominately hiring experienced nurses

Methods/Approach

- Implemented in 2013, nurses apply and interview with nurse managers and the Residency Coordinator
- Nurses are oriented to the units they will be working on within the Medical/Surgical Zone
- ❖ New grads spend four weeks on a Medical/Surgical unit and one week on each of the remaining units in the Zone for a total of 12 weeks of orientation – similar to unit hired RNs
- The nurses also participate in a year long RN Residency program alongside nurses that were hired straight to units
- ❖ The first cohort hired in August 2013 consisted of six new nurses – the "Super Six"!

Description

Preparations for New Graduate Float Pool

- Nurses are employees of Clinical Resource Department
- Orientation performed by unit staff nurses
- ❖ Participation in Casey-Fink Survey for comparative analysis to unit based nurses in RN Residency
- Partnership with unit management and APNs was pivotal to their success

Where Are They Now?

What are the original "Super Six" Doing today?

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Christina	 Nurse Clinical II on 7 South Medical/Surgical unit after spending 9 months in Float Pool Charge Nurse, Clinical Coach and Unit Council member "I was able to see each unit and pick where I felt I could succeed"
Elizabeth	 Working on the Oncology unit as Nurse Clinician II after 19 months in the Float Pool Chemotherapy Certified Involved in Nursing Research Council and as a data collector on research project "One of the great things about the float pool was meeting people from every floor"
Gloria	 Remains in the Float Pool Member of the Shared Practice Council as Chair for Float Pool and trained for peer interviews "I really like the different experience and learning opportunities I receive from each floor."
Jeanette	 Stayed in the Float Pool for almost 1 year Currently working the in Critical Decision Unit
Katy	 Currently a Nurse Clinician II on Labor and Delivery after spending 6 months in the NGFP Education Committee Member and Super User for Products Pursuing FNP "I enjoyed getting to know so many different people that work at the hospital. It is still fun to see them in passing!"
Katrina	 Nursing on a medical/surgical floor she previously floated to for 18 months Active in Unit Council activities both in house and in the community "What I liked about the float pool was the constant change and

Figure 1: Where the original six members of the Newly Graduates Nurse Float Pool are today, what activities they are involved in and what they likes about floating.

something great!"

challenge of learning fast...I always felt like I accomplished

Tracking, Competencies and Support

- Rounding by House Supervisor on all New Grads on a regular basis
- Monthly Staff meetings in the Clinical Resource Department
- Skills Binders containing checklists to track both clinical and interpersonal aptitude by new graduate float nurses as nurse orients on several units
- ❖ Information and Huddle Boards in Nursing Resource Office to keep nurses up to date on unit, hospital, and also float specific topics



Figure 1. Information board for Float Nurses in the Clinical Resource Unit



Figure 2: Daily Huddle Board organizing information into system and hospital wide Key Result Areas and Behaviors of Excellence

PCA Pump (set up, tubing change, medication change)	Admit (ER, Surgical, Direct Admit from Home or
	outside facility)
	outside facility)
Epidural	Discharge (Home, 6S/Psych, SAR/NH)
Femoral Block	Rapid Response
Wound Care (pressure ulcers, wet to dry, fasciotomy)	Code Blue (transfer to ICU, Post-Mortem Care)
Wound Vac	Hard Collars/Soft Collars
Drains	Immobilizers
Blood	Central Line (insertion, blood draw, dressing change)
Feeding Tubes (Insertion, Maintenance, Feeding Pump)	Foley (Insertion, Maintenance, D/C)
CPM	Polar Care
Chest Tubes	Traction (Bucks and Skeletal)
Post Op Autotransfusion	

Figure 3: Example of unit specific skills list

Discussion

- ❖ Two years later, of the six NGNFP nurses, all have been retained at the medical center
- One remains in the float pool while five others have transferred out. Two recently transferred after a year and a half floating
- ❖ There are currently 76 nurses in the NGNFP with ongoing hiring processes in place. In total, there have been 84 hires to the NGFP with 97.6% retained within the organization.
- ❖ As a result of the NGNFP, on-boarding and orientation to the units has been enhanced by developing unit specific orientation binders, mentoring by previous NGNFP nurses and streamlined reporting processes.
- Support staff for the Float Pool has also increased with the addition of two Assistant Clinical Managers
- Two additional zones, Telemetry and ICU, have been added to the NGNFP
- ❖ NGFPNs have developed their own Unit Council and also participate in the Professional Clinical Practice Council

Implications for Nursing Practice

- ❖ The NGNFP has the potential to change how nurses are hired and is a win-win for the organization and the nurse
- ❖ To further evaluate the NGNFP nurse's satisfaction, stress, organization/prioritization, communication and support, the Casey-Fink survey is being implemented
- ❖ Further investigation of the impact of a NGNFP on organizations can contribute significantly to nursing research as only one peer-reviewed published article on this specific topic was found in current literature.

References:

Boswell, C., Gatson, Z., Baker, D., Vaughn, G., Lyons, B., Chapman, P., and Cannon, S. (2008). Application of evidence-based practice through a float project. Nursing Forum, 43(3), 126-132. Crimlisk, J., McNulty, M., & Francione, D. (2002). New graduate rns in a float pool: an inner city experience. JONA,32(4), 211-217.

Gemberling, T., Tretter-Long, N., Reiner, L., Potylycki, MJ & Davidson, C. (2011). Clinical support for the off-shift nurse and the graduate nurse: The clinical rock stars. MedSurg Nursing, (20)6, 323-

Smith, L., Andrusyszyn, M., & Laschinger, H. (2010). Effects of workplace incivility and empowerment on newly-graduated nurses' organizational commitment. Journal of Nursing Management, 18, 1004-1015.