



An Academic Practice Partnership in South FL: Satisfaction of Nurses who participated

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Introduction

- The need for quality nursing workforce and future healthcare needs (IOM, 2010).
- Nurse satisfaction is crucial in nursing education and linked to retention and lower turnover.
- · Retention of nurses is crucial to future of nursing
- Satisfaction of educational programs, essential in nursing education program outcomes (Longo, 2009; Hsiu-Chin Chen-Sheng Lo, 2015).
- Turnover of nurses is costly to hospitals ranging from \$10,000 to \$88,000 per person hired.
 (Pitman, Herrera, Bass, &Thompson 2013).

Background

- Barry University and Baptist Health South Florida Inc, (BHSF) academic partnership.
- Formed to educate nurses to meet local nursing demands by reducing turnover rates and improving retention of nurses (BHSF, 2010).

Purpose

The purpose of this scholarly project was to evaluate the satisfaction level of nurses who attended the Barry University and Baptist Health South Florida Inc, academic-practice partnership program (The Scholars Program.



Methods

Setting: The Baptist Health South Florida Healthcare System (Non-for-Profit Organization) in South Florida.

- Thorough literature review on nursing education partnerships and nurses satisfaction.
- Design: A cross-sectional descriptive non-experimental design with a convenient sample of 32 nurses who attended BHSF Inc,/Barry University (Scholars Program) from 2009-2014
- o IRB Approval: BHSF and University of Alabama

Theoretical framework

- The Benner (1984) model of novice to expert and Vance & Olsen, (1998) framework of mentoring relationship provided a framework for this study.
- The mentoring model provided the framework for the Scholars Program with its support system.
- Students are nurtured through supportive relationships (Vance & Olsen, 1998; Benner, 1984)).

Instruments

- The Critical Care Nurse Internship Questionnaire (CCNIP) with a Likert Scale of 6-point-ranges from (6=completely satisfied to 1=completely dissatisfied) (See Table 2) (Eigist, 2009)
- A brief demographic tool with 5 items was used (See Table 1)
- Survey was delivered electronically through Survey monkey. Descriptive data was generated and analyzed.

Results

Table 1: Demographic (Characteristics
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Variable		N	%
Age			
	18-24	5	16
	25-34	23	72
	35-44	4	13
Gender	Female	28	88
	Male	4	13
Years of Nsg Experience	5 or less	32	100
CNA Experience	Yes	1	3
•	No	31	97
Non-Nursing Bachelors Deg	gree Yes	4	13
-	No	27	84

Results

Satisfaction by Demographic Subgroups

When examining relationships between the demographic variables:

- Strong association between age and gender (Cramer's V==0.72, p<.001)
- Internal consistency reliability of the CCNIP was high (Cronbach's alpha=.957).
- But no significant association was found between age and CNA experience (Cramer's V=0.11, p=.817) or between age and having a non-nursing bachelor's degree (Cramer's V=0.25, p=.395).

Therefore, Table 3 below provides descriptive statistics of satisfaction scores by age and gender.

Table 3 Satisfaction with Scholars Program

Demographic	N	Mean Satisfaction	SD	
Age				
18-24	5	88.2	3.02	
25-34	23	76.52	11.80	
35-44	4	79.25	9.74	
Gender				
Females	28	78.36	11.56	
Males	4	81	10.30	

Table 2. Item Level Statistics for Satisfaction with Scholars Program (using CCNIP) on Likert Scale (N=32 on all items)

Item	Mean	SD	Min	Max
Overall satisfaction with the Scholars Program	5.47	0.80	4	6
Orientation to the role of SNP	5.47	0.84	4	6
Didactic work	5.38	0.79	4	6
Relationship to mentoring faculty in the Scholars Progra	am 5.16	1.27	2	6
Relationship to mentoring faculty in the Scholars Progra	am 5.53	0.67	4	6
Relationship to other preceptors in the SNP role	5.38	0.87	4	6
Observation time in the SNP role in ancillary department	nt 5.38	0.87	4	6
Total time as SNP in the Scholars Program	5.41	0.87	3	6
Support from Mentors	5.39	1.15	2	6
Support from Preceptors	5.34	0.79	4	6
Support from Managers	4.84	1.05	2	6
Support from Faculty and Educators	5.16	1.30	1	6
Support from other SNPs in the Scholars Program	5.28	1.20	1	6
Support from experienced staff	5.28	0.92	4	6
Support from Physicians	4.32	0.75	3	6
Support from family and friends	5.72	0.68	3	6
(Eigist, J. E (2009).				

CCNIP scores were ranged from mid-upper range (49-90), higher levels of satisfaction; average score was M=78.69 (SD=11.29)

- Participants reported high level of satisfaction.
- Support of family and friends yielded highest followed those components associated with SNP roles.
- The lowest satisfaction was relationship with physicians.

Practice Implications

- Nursing education partnership with supportive structures results in increase nurse satisfaction.
- Supportive components such as the use preceptors, mentors, extensive programs such as SNP roles etc., impact program positively
- Increase satisfaction with SNP role
- Education-practice partnership leads to positive outcomes for students/nurses.
- Collaborative practices with physicians in nursing education

Conclusions

- Confirm the need for nursing education partnerships with supportive structures.
- Acculturation of nursing education with the affiliated practice partnership environment promotes sustaining relationships.
- The Scholar Nurse Partner (SNP) role unique to the Scholars Program, essential component of any nursing education partnership model.
- Formal mentoring program and increasing physicians participation in Scholars Program will further impact results, positively.

References

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