Walden University

ScholarWorks

Walden Dissertations and Doctoral Studies

Walden Dissertations and Doctoral Studies Collection

2019

Development of a Nurse Residency Program in Perinatal Nursing

Elizabeth W. Roberts
Walden University

Follow this and additional works at: https://scholarworks.waldenu.edu/dissertations

Part of the Nursing Commons

Walden University

College of Health Sciences

This is to certify that the doctoral study by

Elizabeth Roberts

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee
Dr. Mary Catherine Garner, Committee Chairperson, Nursing Faculty
Dr. Mirella Brooks, Committee Member, Nursing Faculty
Dr. Eric Anderson, University Reviewer, Nursing Faculty

The Office of the Provost

Walden University
2019

Abstract

Development of a Nurse Residency Program in Perinatal Nursing

by

Elizabeth Roberts

MS, University of Phoenix, 2012

BS, University of Phoenix, 2010

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2019

Abstract

Staffing turnover created a challenge for the women's services department of a hospital in the southern United States, potentially compromising care for women and infants during childbirth. The gap in practice was the lack of a structured nurse orientation/residency program for nurses new to perinatal nursing, which requires specific competencies not learned at the prelicensure level of education. The guiding practice-focused question was whether a multidisciplinary team could develop a formal evidence-based perinatal nurse residency program that would meet the needs of on-boarding and support for the new nursing hires at this facility. A team of experienced nurses, which included two nurses from labor and delivery, high risk antepartum, mother baby, and assistant nurse manager developed a comprehensive program, which included defined competencies, didactic materials, detailed simulations, and evaluation tools. A multidisciplinary team of six nurses, and the assistant nurse manager achieved consensus on the quality and comprehensive nature of the program plan using the Appraisal of Guidelines for Research and Evaluation Instrument II assessment tool. The implications of this project to bring about positive social change include the potential for improved nursing care for patients during childbirth as a result of increased nurse knowledge and mentoring support. Improved retention might also contribute to stable teamwork and peer support. This project has the potential to improve both physical and psychological outcomes for women and infants in the perinatal period.

Development of a Nurse Residency Program in Perinatal Nursing

by

Elizabeth Roberts

MS, University of Phoenix, 2012

BS, University of Phoenix, 2010

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2019

Dedication

I am dedicating this project to my wonderful family members who have all stood by me while obtaining my degree. Y'all have been my support and inspiration for this journey.

Acknowledgments

I am using this opportunity to thank my husband, children, and family for helping me make this academic journey. I would also like to thank Dr. Garner for helping me develop the skills needed to develop my project. I would also like to thank everyone who allowed me the opportunity to obtain the clinical hours that I needed. Always believe in yourself and never give up. Remember that every day there is a learning opportunity.

Table of Contents

List of Tables

iii

Section 1: Nature of the Project

Introduction

The specialty nursing practice of perinatal nursing requires clinical skills and decision-making that are not adequately covered in prelicensure nursing programs. Most states require only 90 clinical hours in maternal and child nursing. Even experienced nurses transitioning to perinatal nursing must master a range of new competencies, from fetal monitoring to neonatal resuscitation. The hospital facility where I completed this project was experiencing high turnover with new hires and seasoned staff in their women's health division. The Future of Nursing: Leading Change, Advancing Health (2010) recommended that nurses should have the opportunity to be offered a nurse residency program upon starting a job as a new graduate nurse or during any career transitions. A nurse residency program provides a formal and informal set of learning opportunities for all new hires (Bleich, 2012). The focus should consist of institutional and departmental practices aimed at helping all nurses learn the institution's policies, procedures, and standards of care and introducing them to the key persons and structures, which are needed to follow institutional and departmental routines (Bleich, 2012).

The purpose of this quality improvement project was to utilize an expert team to design a perinatal nurse residency program based on recommended professional guidelines and the best evidence-based literature. This residency program has the potential to improve staff on-boarding, increase nurse retention, and improve the clinical care given to women during pregnancy, childbirth, and the early postpartum period.

Problem Statement

The women's services department at the project site consists of triage, high-risk antepartum, labor and delivery, postpartum, and care of the well newborn units. Staffing was a major concern as new employees hired within the women's services department were resigning before completion of their orientation, which led to seasoned employees resigning due to the staffing shortage. The remaining employees were being required to staff beyond the required 36 hours a week. Mandated on-call shifts for a 6-week schedule consist of an extra one to three 12-hour shifts, further contributing to burn-out and high absence rates.

The gap in practice was that this hospital's obstetrical services department did not have a nurse residency program to support new graduates or new hires in the development of expertise in the complexities of perinatal nursing. Obstetrical care requires that the nurse understand and implement protocols for specific admitting diagnosis such as pre-term labor, premature ruptured membranes, diabetes, and pre-eclampsia. The nurse must possess expertise in electronic fetal monitoring and assisting in routine and emergency deliveries The nurse is responsible for delivering care to both mother and baby, so the nurse must be able to care for a newborn immediately after birth and to provide support for new mothers in infant care and breastfeeding (Association of Women's Health, Obstetric and Neonatal Nurses [AWHONN], 2018). The nurse should also be prepared for care of the family during miscarriage, stillbirth, or neonatal complications.

A new perinatal nurse residency program that follows the generic hospital orientation can provide nurses new to perinatal nursing the essential knowledge, skills, and abilities needed for a successful transition to the professional practice (Burr & Maldonado, 2014). The women's services department requires all professional nurses to have the ability to work with autonomy, which means that professional nurses must be able to have the authority to make decisions and the freedom to act in accordance with their own professional knowledge base. The professional nurse must also have the ability to analyze every situation and to solve complex situations using critical thinking skills. A nurse residency program specific to perinatal nursing has the potential to improve support for novice nurses as they progress in competency.

Leadership and nurse managers at the project site were beginning to see the same inadequacies in educational support that the new hires perceived while going through the current orientation process. The need for this project was determined through meetings and discussions with the leadership team, the nursing staff, nurse educator, physicians, and the director of the women's services department. The development and implementation of a nurse residency program can have a high cost, but staffing turnover can be more costly to the facility. Research has shown that the process of hiring a new nurse can costs a medical facility up to more than $40,000 dollars, and replacing another staff nurse can cost up to $88,000 dollars (Van Camp & Chappy, 2017). This can translate to a potential financial loss of more than $120,000 for any new graduate nurse who completes orientation and then leaves the medical facility within a year (Van Camp & Chappy, 2017). The cost can be even greater when hiring in new staff on a specialized

nursing unit such as the women's services department.(Van Camp & Chappy, 2017). The cost effectiveness of a specialized nurse residency program can be measured by the cost of turnover and overtime pay (Van Camp & Chappy, 2017). If successful, this program could be replicated at other hospital facilities across the region and the nation.

Purpose

The gap in practice was the lack of a structured perinatal nurse residency program at a local hospital. The purpose of this staff education project was to lead an interprofessional team in the development of a residency program in perinatal nursing. The residency program would allow the newly hired nurse to train in all areas of the women's department such as preterm care, labor and delivery, and mother-baby care. Education in all areas provides the new nurse with a better understanding of the care needed for the patient.

The guiding practice-focused question was whether a multidisciplinary team could develop a formal perinatal nurse residency program to meet the needs of on-boarding and support for the new nursing hires in this facility. The residency program could include didactic education, classes with simulation activities, and the pairing of the nurse with a preceptor on the unit. If for any reason remediation were needed, adjustments would be made to the new hire's schedule. The ultimate goal was to help improve recruitment and retention of new hires.

Nurse residency programs have been shown to improve nursing retention, patient safety, and quality in nursing care (Wackler, 2015). The nurse residency program developed for this project will offer new learning opportunities that focus on institutional

and departmental practices instead of prolonging the nursing orientation process. According to research, the longest-running residency program is that of the University Hospital Consortium and the American Association of Colleges of Nursing (AACN) (Bleich, 2012). Other residency programs have been developed in multiple settings, and many nursing membership organizations have plans to structure content and cases for specialty residency programs (Bleich, 2012).

Providing new employees with an exceptional orientation and mentorship programs may also decrease staff turnover (Bleich, 2012). Nurse residency programs are supported by the Institute of Medicine (IOM; 2016) to aid in the graduate nurse transition into practice and in the delivery of safer and more efficient quality patient care. Not having a nurse residency program in place for new hires may result in nurses feeling overwhelmed and reporting information overload, leading to confusion and frustration. Evidence has shown that hospitals are seeing more patients with complex chronic medical conditions during pregnancy (Hofler & Thomas, 2018). Both experienced and new graduates can sometimes feel challenged starting a new job. The challenges include lack of experience, unfamiliar working environment, fear of fitting in with staff, and independently caring for their own group of patients (Parsh & Taylor, 2013). Research has shown that although many hospitals and medical services have offered internships, externships, and classes for their new nurse hires throughout the years, a more formalized approach is needed, particularly in specialty nursing areas (Parsh & Taylor, 2013). The hospital industry is seeing experienced nurses leaving the workforce due to retirement, increased staffing to patient ratios, declining resources, and lack of mentors or preceptors

(Hofler & Thomas, 2018). Research has shown that organizations must also account for generational diversity; as compared to their predecessors, millennials expect more structured support when accepting a new position (Hofler & Thomas, 2018). If these needs are not met, organizations can anticipate higher turnover rates (Hofler & Thomas, 2018).

This initiative follows the IOM (2016) recommendation number three for implementing nurse residency programs: "The state board of nursing, accrediting bodies, the federal government, and health care organizations should take actions to support nurses completion of a transition-to-practice program (nurse residency) after they have completed a prelicensure or advanced practice areas" (p. 4). The positive outcomes from developing and implementing the nurse residency program could include increased nurse satisfaction, decreased staffing turnover, retaining much needed experienced staff, reduction of stress for the new hire, high quality patient care, and increased patient and family satisfaction with the care that they received.

Nature of the Doctoral Project

For this education project, I gathered and summarized evidence that supports the development of a perinatal nurse residency program for the women's services department. Sources of evidence included evidenced-based literature from the EBSCO, ProQuest, PubMed, and CINAHL databases. The search included the years of 2012 through 2018. The evidenced-based research included peer-reviewed journal articles, research articles, case studies, guidelines and articles. Guidelines from AWHONN, ACOG, and the American Nurse Credentialing Center were consulted.

An expert team was composed of experienced perinatal nurses, neonatal nurses, a lactation consultant, a member of the management team, nurse educator for the department, and perinatal physician. A step-by-step process was developed by the committee members and myself, and an algorithm was created to assist the staff with the nurse residency program. The algorithm served as a layout for the preceptors to use as a guide for what the new hire will need to focus on for the day. The committee had the opportunity to review the step-by-step process and the algorithm and suggest any modifications. Consensus was reached and documented using the AGREE II evaluation tool.

Research has shown that development and implementation of a nurse residency program appears to have more positive outcomes than negative outcomes (Burr & Maldonado, 2014). The new hires will benefit from a wealth of educational experiences, support from peers and the leadership and management team, and guidance throughout the new hire's professional career.(Burr & Maldonado, 2014).Evidence has shown that any new hire that has had the opportunity to be a part of a nurse residency program, especially on a specialized area of healthcare such as the women's services department, are more prepared to handle more complicated challenges that he or she will face in the registered nurse role.(Burr & Maldonado, 2014).The nurse residency program will aid in fostering skill development including ongoing educational opportunities that will provide the framework needed for expanding the curriculum to bridge the gap between nursing school, professional practice, and past experiences that will enhance the most efficient patient care (Burr & Maldonado, 2014).

There are limited didactic and clinical opportunities for maternal child nursing during prelicensure education programs. Most nursing programs must limit how many clinical days a student attends in a maternal child rotation. The norm in this area's nursing school rotation usually consists of 2 days, with an estimated 24 hours of clinical time. With the decreased number of clinical hours available in the community, the students lack exposure to the various patient populations and clinical situations. This limits the student's knowledge of the obstetrical area. A nurse residency program will provide the new graduate nurses with opportunities to develop critical thinking skills, enhanced delegation skills, priority skill setting for patient care, conflict resolution skills, which also aid in building and developing confidence. The new graduate nurse will be provided with a mentoring relationship.

Significance

Research has shown that the maternal mortality rate in the United States (28 deaths per 100,000 live births) is well over the rate in modern society today (World Health Organization, 2012). The development and ultimate implementation of a residency program in perinatal nursing has the potential to improve the nurse's development of specific competencies needed in this specialty area. Improvement must be seen in the women's services department with staffing issues in order to provide efficient, high-quality, safe, and patient-centered care. Development and implementation of a nurse residency program for the women's services department is intended to improve the competency of nurses. Both new graduate nurses and experienced nurses hired into the women's services department would be provided the opportunity to develop critical

thinking skills as well as his or her nursing skills that will be used throughout their whole nursing career. The positive social impact would be to improve the nursing care that is provided to women and infants before, during, and immediately after childbirth. The social implications for the community and surrounding area will focus on quality improvement and improved maternal and newborn health outcomes. If successful, this model could be replicated in other women's health settings both in the United States and internationally.

Summary

Medical facilities are being required to become more creative in the hiring process and in retaining new hires, with both new graduate nurses and seasoned nurses seeking new job placement. The women's services department of this hospital sought assistance in the development and implementation of a nurse residency program in perinatal nursing. The nurse residency program will be able to offer all new hires the knowledge and skills required for transitioning to the role of a professional nurse. The intent is that new hires will have more confidence and greater willingness to commit to long-term employment. The summary of available evidence on nurse residency program supports the development of a nurse residency program for the women's services department. The information collected and summarized during the literature review will aid in the development of a specialized nurse residency program to guide what is needed to meet the requirements for providing new hires with a structured orientation process.

The following section will address the concepts, models, and theories that will be used to guide this project, the relevance to nursing practice, local background and context and the role of the Doctor of Nursing Practice (DNP).

Section 2: Background and Context

Introduction

Staffing turnover has become a serious situation for this hospital's women's services department. The gap in practice identified was the lack of a structured nurse orientation/residency program for nurses new to perinatal nursing, a specialty which requires specific competencies not learned at the prelicensure level of education. Nurse residency programs have been shown to improve nursing retention, patient safety, and quality in nursing care (Wackler, 2015). The guiding practice-focused question was whether a multidisciplinary team could develop a formal evidence-based perinatal nurse residency program to meet the needs of on-boarding and support for the new nursing hires in this facility.

This doctoral education project is one part of an ongoing plan amongst the leaders and the management team for developing a broad plan of action to retain both new hires and present employees. All new hires should be given the best structured orientation and educational opportunity for their new job role (IOM, 2016). A nurse residency program can enhance the confidence of new hires as a bedside leader (Wackler, 2015). This section will review the theoretical framework, relevance to nursing practice, the local background, and the role of the DNP student and the project team.

Concepts, Models, and Theories

This project was developed based on the nursing developmental theory of Dr. Patricia Benner that expert nurses develop skills and understanding of patient care over time through a sound educational base as well as a multitude of experiences (Nursing

Theory, 2016). Benner's nursing theory consists of five levels of nursing experience: novice, advanced beginner, competent, proficient, and expert (Nursing Theory, 2016). These different levels of skills show changes in the three aspects of skilled performance: movement from relying on abstract principles to using past experiences to guide actions, change in the learner's perception of situations as whole parts rather than separate pieces, and passage from a detached observer to an involved performer, engaged in the situation rather than simply outside of it, which provides lifelong learning for the professional nurse (Nursing Theory, 2016). The development and implementation of a nurse residency program is designed to provide the education that is needed to assess the individual nurse's level of development and to ensure baseline competency for care as an advanced beginner. Nurses at this level are then provided support to move them towards competency in their specialized role. Dr. Benner's theory is not focused on how to be a nurse, rather on how nurses acquire nursing knowledge to be proficient within the scope of practice (Nursing Theory, 2016). Some of the challenges that nurses face include role transition, high performance expectations in an increasingly high-acuity environment, and an increased level of accountability as it relates to nursing quality indicators, building confidence by linking critical thinking with critical actions, and basing safe, efficient patient care on evidenced-based decision making.

The Commission on Collegiate Nursing Education (CCNE) accreditation standards for an entry-to-practice nurse residency program suggested a review of its mission, goals, and expected outcomes, and an assessment of the performance of the program in achieving these through the most effective utilization of available resources,

programs, and administration (AACN, 2015). CCNE suggested a nurse residency program for 1 year and providing education and competency development that the new hires will need to provide more efficient high-quality patient centered care. The nurse residency program should foster the process of professional role socialization, which involves the acquisition of knowledge, skills, attitudes, values, norms, and roles associated with the practice of the nursing profession (AACN, 2015).

Research has shown that, with recognition of a preparation practice gap and the high costs associated with new hires turnover rate, many health care organizations across the United States have implemented nurse residency programs to bridge the gap and reduce turnover costs (Van Camp & Chappy, 2017). Methods for achieving a robust residency experience include peer-debriefing, simulation, case review involving management of ethical dilemmas, human and fiscal resource management and optimization exercises, and modeling self-reflective practices (Bleich, 2012). A nurse residency program can aid in retention of nurses through increased knowledge in unit-based competencies which ensure safe and more efficient patient care.

Nurse residency programs are not a new idea for retaining new hires for medical facilities and specialized areas within the facility. Research has shown they have been tried over the years, but are usually abandoned as soon as hospitals have the luxury of hiring only experienced nurses (Dracup & Morris, 2018). Recognizing that this nursing shortage is unique and that the solution lies in preparing thousands (even millions) of new nurses, the University Health System Consortium joined with the AACN 4 years ago to formalize a new residency program with a curriculum shared by many hospitals (Dracup

& Morris, 2018). It includes a year-long residency program in the participating clinical settings that takes the novice learner from new graduate to become a more competent provider while delivering patient care (Dracup & Morris, 2018).

History has shown that a vast divide exists between the classroom and real-world practice and transitional programs provide a smooth changeover (Javelona & Kurtzman, 2018). With a traditional orientation program for new hires, a checklist is provided to the preceptor of skills that need to be met while in orientation. The checklist does not aid in providing education, decision-making, or practice of these skills. The CCNE approach for developing a nurse residency program consists of learning sessions and activities that are structured to support residents based on their respective levels of education (CCNE, 2015). Nurse residency programs support professional role transition, integration, and socialization to enable resident to do the following:

1. Transition from entry-level advanced-beginner nurse to competent professional nurse, who provides safe, quality care.

2. Develop effective decision-making skills related to clinical judgment and performance.

3. Develop strategies to incorporate research-based and other evidence into practice.

4. Develop clinical leadership skills at the point of patient care.

5. Practice collaboratively as members of the interprofessional healthcare team.

6. Formulate an individual career plan that promotes a life-long commitment to professional nursing.

A comprehensive nurse residency program will require a financial and human resource investment so that cost effectiveness can rapidly be achieved through a reduction in turnover because nurses are more confident and engaged in their organization (Wackler, 2015). The reduction in turnover will show as a financial gain being achieved through decreased contract labor expense and overtime accumulation (Wackler, 2015).

Implementing a nurse residency program for the women's services might be the solution to the need for mentorship and smooth transition into professional nursing practice. Hospital leaders have the responsibility to create programs that will contribute to the development of strong, competent nurses who will be able to provide outstanding patient care (Welding, 2012). Both the new graduate nurse and the nurse with experience seeking job placement will accept a position with the facility quicker if there is a nurse residency program being offered to them, rather than just a regular orientation for new employees (Wackler, 2015).

Relevance to Nursing Practice

Today's nursing students have limited experiences within a specialty area. To counteract these limitations, simulation has been used in the curriculum to present a real-life scenario. However, this simulation does not provide the training needed to become even novice nurses in the perinatal area. Professional nurses are the front lines in ensuring that care is delivered safely, effectively, and compassionately (NCBI, 2016).

Decision-making in health care has changed drastically throughout the years, with the expectation of nurses making choices based on the best available evidence and

research. Research has shown that nursing interventions should be practical, methodical decisions based on evidenced-based practice studies (Chrisman, Jordan, Davis, &Williams, 2014). With the utilization of evidenced-based practice approach to nursing practice helps to provide the highest quality and most cost-efficient patient care possible (Chrisman, Jordan, Davis, &Williams, 2014).

Local Background and Context

The setting for this project was the women's department of a large hospital in the Southern United States. At this facility, there were 2199 deliveries in 2017 and 2400 in 2018. The labor and delivery units consist of 14 beds, with six triage beds, and six beds for preoperative care and recovery. There is also a mother-baby unit with 26 beds. The antepartum and gynecology unit has 12 beds. Support staff for the department consists of a transitional care nurse and lactation nurse specialists. The retention rate for the entire nursing department is 87%, and the turnover rate is 13%. The 12-month turnover rate for women's services was 51%. According to the national average for 2017, the specialty area for obstetrics took two and a half months to fill open positions within a department (Nursing Solutions Inc., 2018). The average cost of hiring and on-boarding a specialty nurse is estimated at $55,000-70,000 (Nursing Solutions Inc., 2018).

Issues with short staffing, long hours, and the ability to deliver high-quality, safe, patient-centered care is requiring direct care nurses to increase productivity while improving patient satisfaction and ensure that quality of care is delivered to all patients. A nurse residency program enables new employees to develop their critical thinking skills, as well as learn and follow the women's services department policies and

procedures. This type of orientation will help the new hires feel better prepared to care for the various patients and have more confidence in their decision making when the orientation has been completed. This improved sense of competency and confidence should then increase the retention of staff. This hospital was seeking an efficient nurse residency program that would aid in producing more competent nurses and to improve retention of nurses to help address the regional nursing shortage.

Role of the DNP Student

The DNP degree transforms professional nurses into nurse leaders for both clinical and system roles. As a DNP student, I led the development of this nurse residency program using evidence-based practice guidelines. I have experienced a lack of adequate orientation during my own personal nursing career. I wish that I could have had the opportunity to participate in a nurse residency program after I graduated with my Associates Degree in Nursing in 1991. The provision of educational classes and an extensive clinical orientation process can provide many benefits for the new hire. I am thankful for having had the opportunity to be a part of a change process.

Role of the Project Team

Team members were selected based on their expertise, knowledge base, interest in the project, and their ability to advance the project within the practicum facility. Finding the most qualified people for a quality improvement committee is critical for the successful development of a quality project. Having the ability to gain more in-depth understanding of the various roles that are involved in quality improvement initiatives, and the challenges that organizations face can provide important insights into how

organizations can optimize resources to improve patient care quality. Working together as a team helped the development of a perinatal nurse residency program.

Summary

Research has shown that both graduate nurses and experienced nurses should have the opportunity to receive enhanced orientation for a role within the women's services department (Wisconsin's Health, 2017). The nurse residency program will be able to offer all new hires the knowledge and skills required for transitioning to the role of a professional nurse. Research has shown that allocating the appropriate resources, creating partnerships, evaluating efforts, and having a sustainability plan contribute to effective residency programs (Wisconsin's Health, 2017). The rate of staffing turnover should start to decrease, as should the number of vacant job positions. In Section 3, I will describe the practice-focused question, the sources of evidenced used, and the analysis and synthesis of the evidence.

Section 3: Collection and Analysis of Evidence

Introduction

Staffing turnover has been an increasingly serious situation for the women's services department at the project site. The gap in practice was that there was no structured nurse orientation/residency program for nurses new to perinatal nursing, which requires very specific competencies not learned at the prelicensure level of education. Nurse residency programs have been shown to improve nursing retention, patient safety, and quality in nursing care (Wackler, 2015). The guiding practice-focused question was whether a multidisciplinary team could develop a formal perinatal nurse residency program to meet the needs of on-boarding and support for the new nursing hires in this facility.

The purpose of this education project was to improve the problem of nursing staff retention for the women's services department through the development of a formal perinatal nurse residency program. Providing new employees with an exceptional orientation and mentorship program decreases staff turnover (Bleich, 2012). Nurse residency programs are supported by the IOM (2016) to aid in the graduate nurse's transition into practice and in the delivery of safer and more efficient quality patient care.

Sources of Evidence

The search of the literature included the EBSCO, ProQuest, PubMed, and CINAL databases. Key words used in the search included *nurse orientation, skills, preceptor, staffing shortage, turnover, errors, safety,* and *education*. Perinatal-specific terms included *lactation, pre-term labor,* and *electronic fetal monitoring*. The references were

limited to the most recent 5 years, full-text, peer-reviewed, and English only. I also

reviewed recommendations from professional organizations such as AWHONN and

American College of Obstetricians and Gynecologists (ACOG). The curriculum used for

the classes did include some of the professional lactation nurse training in core

competencies that include breast-feeding, common interventions and evidence-based

care, comfort measures for childbirth, and communicating with medical care providers

and clients utilizing emotional intelligence gained through attending classes

(International Breastfeeding Institute, 2018).

Procedural Steps

The first step was to recruit seasoned nurses to review and assess the literature

and to make recommendations on the development of the residency program. Nurses who

have practiced in perinatal nursing for less than 2 years were asked to provide input

regarding their perspective on subjects/experiences that need to be included in the

program. Once the team developed an overall draft of both the content and recommended

format for the specialty orientation program, I developed the program more fully and

presented it to the expert committee for their review and comment. The final draft for a

new residency program in perinatal nursing will be presented for review by the Nurse

Practice Council.

Analysis and Synthesis

I used the Cochrane Systematic Review Methodology for a systematic review,

which is an overview of primary studies guided by a statement of objectives, materials

and methods, and is conducted according to explicit, transparent, and reproducible

methods (Yannascoli, 2013). The systematic review consisted of both qualitative and quantitative summaries. Identifying a well-defined research question and outlining strict inclusion and exclusion criteria minimizes researcher bias, and the review process can be streamlined efficiently (Yannascoli, 2013). The Cochrane Systematic Review Methodology includes developing review questions, developing the strict inclusion and exclusion criteria, selecting studies, analyzing data, presenting results, conducting a literature review, and dissemination process (Yannascoli, 2013).

Ethical Procedures

The hospital Institutional Review Board (IRB) considered this project to be a practice improvement project that does not impact patients directly. Nurses who were asked to give their input were advised of the purpose of the project and that participation was voluntary. Approval was obtained from both the Hospital Nursing Research Council of the hospital and the Walden Institutional Review Board the IRB approval number is 05-21-19-0631913.

Future Evaluation Plan

Evaluation is an integral component of quality improvement and there is much to be learned from the evaluation of small-scale quality improvement initiatives in healthcare today (Harvey, & Wensing, 2018). This type of evaluation is useful for several different reasons including monitoring the impact of local projects, identifying and dealing with issues as they arise within a project, comparing local projects to draw lessons, and collecting more detailed information as part of a bigger evaluation project for healthcare projects (Harvey, & Wensing, 2018). Formative data will be used

throughout the implementation phase to make any necessary changes with the program as it is being implemented. After completion of the nurse residency program, the new hires will be interviewed, and a comparison will be done from all evaluations to see if the initiation of the nurse residency program was successful. Longer term retention rates will be monitored.

Summary

Patient safety was a major concern for the women's services department regarding staffing issues. The nurse residency program should provide all new hires with a smooth transition, improve nurse retention, and support recruitment of new competent professional nurses. Without the proper training and skills needed, the new hires may not be efficient in providing care to the patients due to lack of education. This residency program has the potential to improve staff on-boarding, increase nurse retention, and improve the clinical care given to women during pregnancy, childbirth, and the early postpartum period.

The nurse residency program will be able to offer all new hires the knowledge and skills required for transitioning to the role of a professional nurse. The nurse residency program will be beneficial for the women's services department by being helping nurses be able to fulfill their new role as a staff nurse. Obstetrical care requires that the nurse understand and implement protocols for specific admitting diagnoses such as preterm labor, premature ruptured membranes, diabetes, and pre-eclampsia. The nurse must possess expertise in electronic fetal monitoring and assisting in routine and emergency deliveries. The new nurse will be responsible for delivering care to both mother and baby,

so the nurse must be able to care for a newborn immediately after birth and to provide support for new mothers in infant care and breastfeeding (AWHONN, 2018). The nurse should also be prepared for care of the family during miscarriage, stillbirth, or infant complications.

This section of the development for a nurse residency program for the women's services department addressed how the program will be developed. Section 4 of the project addresses how the program was developed. I also discuss the findings and implications and the recommendations, along with the strengths and limitations of the project.

Section 4: Findings and Recommendations

Introduction

The specialty nursing practice of perinatal nursing requires clinical skills and decision-making that is not adequately covered in prelicensure nursing programs.(Welding, 2012) Most states require only 90 clinical hours in maternal and child nursing.(Welding, 2012) Even experienced nurses transitioning to perinatal nursing must master a range of new skills from fetal monitoring to neonatal resuscitation. The purpose of this DNP project was to develop an evidenced-based nursing residency program to provide a specialty orientation program. In addition to the didactic and simulation educational experiences, newly hired nurses will be required to spend time with a designated preceptor who will provide support for the development of competencies and skill sets. This was a developmental plan for staff education. A plan for implementation and evaluation was recommended by the committee members. This section will include the findings and implications, recommended topics, goals, strengths and limitations, recommendations, and summary findings.

Findings and Implications

The purpose of this education project was to establish an evidenced-based curriculum along with an implementation and evaluation plan necessary to pilot a nurse residency program in the women's services department, and to lead an interprofessional team in the development of a residency program in perinatal nursing. This section describes the development process for this project. The search of the literature included EBSCO, ProQuest, PubMed, and CINAL databases. Key words that were used included

orientation, skills, preceptor, staffing shortage, turnover, errors, safety, and *education*. Guidelines from AWHONN, ACOG, and the American Nurse Credentialing Center were also consulted.

The initial development team included seasoned nurses who reviewed and assessed the literature regarding a perinatal nurse residency program. Team meetings were held every Wednesday of the month for 6 months. Topics discussed during these team meetings resulted in decisions on structure of the programs and materials to be used or developed for the nurse residency program. Other discussions entailed drafts of the program goals, objectives, activities, competency check-offs, mentor guidelines, and check-in process guides for attendees. Consensus decision-making was used as a guide during the meetings. This is a way of reaching an agreement between all members of the team developing a solution for the specific problem (Harvey, & Wensing, 2018). (Harvey, & Wensing, 2018). This method consists of taking members through the steps of the discussion/conclusion process in which all can present and be heard by the group. Nurses who have practiced in perinatal nursing for less than 2 years were also asked to provide input regarding their perspective on subjects/experiences that need to be included in the program. The reviews of all drafts were provided to the nurse managers for their input. The unit's financial officer was consulted regarding the development of a cost/effectiveness analysis.

Recommended Topics

The didactic instructions and materials developed included class outlines on charting, policy and procedures, care of antepartum patients, care of postpartum patients,

and care of gynecological patients, lactation support, and management of general medical conditions in pregnant patients. Handouts were also developed along with a notebook binder with an outline of each section and posttests for each section. The simulation experience guide consisted of scenarios of various high-risk complications, postpartum care, postpartum emergencies, and a feedback form to be provided to each individual orientee. Electronic fetal monitoring classes will be mandatory and will follow the AWHONN guidelines for care. The orientee will be placed with a mentor for the course of the year-long residency program. The orientee will be assigned two mentors, which will aid in easier and more flexible scheduling for both the orientee and the two mentors.

The orientee will also have the opportunity to develop weekly goals with their mentor. At the end of each shift there will be an evaluation completed by the mentor. New goals will be added for the next shift. The nurse residency program will aid in the development of the clinical decision-making skills and will also help to develop critical thinking skills.

Recommended Competencies

There are some differences in approach with new hires and experienced nurses. Experienced nurses hired into the perinatal specialty area will need to demonstrate specific competencies. In addition to the traditional perinatal nurse competencies, the required competencies for experienced nurses will include such as critical thinking, technical proficiency, communication, professionalism, clinical knowledge, and responsibility. The novice nurses, who come into the profession without any experience, will need to be directed by the expert nurse since they are in the process of developing

critical thinking skills. The expert nurse can sense or see a change in a patient's condition and is able to act on the situation immediately (AWOHNN, 2018). The expert nurse can be flexible and proficient and can provide solutions immediately. Some of the basic competencies that will be included in the nurse residency program are the nursing management of the following conditions: preeclampsia, help syndrome, premature rupture of membranes, placenta previa, placenta abruption, and gestational diabetes. Additional competencies were based upon professional organization recommendations (AWHONN, 2018).

Recommended Methods

The recommended educational methods include didactic instruction, simulation, and observation by a preceptor. The didactic topics will be centered around the various patient diagnoses. The simulation classes will also be diagnosis centered. The preceptor will accompany the new hire while providing patient care or performing procedures. Feedback will be given in private outside of the patient's room. The preceptor will intervene when needed while the new hire is performing patient care or patient task. The preceptor will also seek out opportunities when needed for the new hire to help develop their critical thinking skills. It is hoped that the preceptor will become a mentor to the new hire at the conclusion of the nurse residency program.

Recommended Evaluation Tools

The evaluation tools for all new hires were developed by the committee members according to each patient diagnosis, and a list of basic nursing skills associated with the diagnosis will also be included on the evaluation form. If there is any area that the new

hire needs to improve upon, it will be noted on the evaluation by the preceptor. Any areas that need improvement will have remediation developed by the preceptor and the nurse educator. Extra time will be added to the new hire's schedule to accommodate this. The preceptor, the new hire, and the educator will meet and discuss the evaluation. Goals will be developed for the areas that need improvement. The preceptor will seek opportunities with patient care to aid in the development of the skills needed.

Recommended Mentoring Opportunities

Mentoring educational opportunities will also be provided for all preceptors. The preceptors for the nurse residency program will be assigned various classes that they will need to attend. The classes will aid in the development of their preceptor skills. Any time a preceptor feels that they are having trouble providing education to the new hire, the preceptor will be able to reach out to the nurse educator for guidance.

Review

Once the team developed an overall draft of both the content and recommended format for the specialty orientation program, I developed the program more fully and presented it to the expert committee for their review and comment. The expert committee consisted of experienced perinatal nurses, neonatal nurses, a lactation consultant, a member of the management team, nurse educator for the department, and perinatal physician. The method used for evaluation of the residency program was the AGREE II tool, a seven-point grading system (Brouwers, 2012). The system ranged from strongly disagree to strongly agree. After the committee members completed the AGREE II survey, the survey responses were calculated by the committee (Brouwers, 2012). Table 1

is a summary of results. This final draft for a new residency program in perinatal nursing will be presented for review by the Nurse Practice Council.

Table 1

Scores of the Project Committee on AGREE II

Domain	Score (%)	Aggregate score
Overall objective	7 2 5 5 5 4 4	96%
Health question covered	8 6 7 4 7 4 5	93%
Population meant to apply	6 7 6 6 6 7 8	95%
Guideline development group	7 2 5 5 5 4 4	96%
Views and preferences	7 8 6 7 4 5 4	93%
Guidelines are clearly defined	5 6 7 6 5 3 6	96%
Systematic methods	4 4 6 5 5 6 5	97%
Criteria for evidence	4 6 3 4 5 7 6	95%
Strengths and limitations	5 3 6 5 6 7 6	96%
Key recommendations	5 5 6 5 4 4 6	97%

Summary of Findings

The gap in practice was the lack of an adequate orientation process for specialty nursing hires at a hospital in the southern United States, which led to staffing issues and increasing demand to offer extra pay to cover the staffing shortage. The goal of the project was to develop a detailed evidenced-based perinatal nurse residency program for the women's services department. Included with this program was a curriculum layout and a calendar for each new hire detailing the entire orientation. The practice problem was presented to the expert team. The result of this process was the development of a

well-structured program and the commitment for hospital support to provide the necessary resources.

The main goal of the nurse residency program is to provide the knowledge and mentorship needed to provide specific care to the patient population for various conditions. It is hoped that the implementation of this program will lead to improved staff morale, decrease the number of vacant positions, decrease the amount of mandated overtime, and stabilize the financial status of the units.

Recommendations

Nurse residency programs are important in the orientation process for all new hires, which include both new graduates and experienced nurses. The specialty nurse residency programs help to prepare all new hires and aid in their success in their new roles. The staff was very pleased with the development of the nurse residency program and the education that will be provided to all new hires. The assessment of competency of the hires will be an ongoing process so that the necessary changes can be made. The ultimate question is whether implementation of this perinatal nurse residency program will decrease the turnover rate and increase retention rate. The evaluation plan suggests a goal of decreasing the turnover rate by 5 % in the first year of the program. The data will be collected and tracked by the nurse educator for the women's services department and will be reported to the director of the department. The data will be presented and discussed at the monthly management meetings. The data will be reviewed at 6 and 12 months. The financial implications for the program will be assessed by the management team and the finance department.

The expert committee recommended this program for adoption by the hospital. Approval of the program will involve sending all parts of the program to the stakeholders and presenting this information in formal meetings. Approval of the management team and the Nursing Practice Council will be needed. Implementation of the program will be done in steps so that all staff members will have a better understanding of the program and their role.

Strength and Limitations of the Project

One of the major strengths of this project is that the nurse residency program in perinatal nursing was based on current evidenced-based literature and the input of an experienced interprofessional team. The limitation is that this program was developed for one hospital in the South, which may preclude its use in other facilities. The ultimate goals of nurse satisfaction and retention are yet to be tested.

Summary

The purpose of this education project was to utilize an expert team to design a perinatal nurse residency program based upon recommended professional guidelines and best evidence-based literature. This residency program has the potential to improve staff on-boarding, increase nurse retention, and improve the clinical care given to women during pregnancy, childbirth, and the early postpartum period.

Section 5: Dissemination Plan

The facility and departmental support for this staff education project was instrumental for the development of this project and vital to the continued support of this work. The target audience for dissemination of this project consists of all nursing staff for the women's services department, management team, and nurse educator at the project site. The implementation and evaluation of this program will also support the facility in their journey to become Magnet® certified in the future. Plans for further dissemination include presentation at the AWHONN regional conference. Once the 1-year evaluation phase is complete, this program may be presented at the American Nurses Credentialing Center ANCC Magnet Conference and published in the AWHONN journal.

Analysis of Self

This doctoral project has allowed me to grow as a professional nurse and as a professional leader. I have had the opportunity to communicate better within a team atmosphere and to work with the staff through both oral and written communication. I have learned to evaluate literature systematically to support evidenced-based practice. I have also learned that change is necessary in the health care environment, because without change we cannot make the necessary implementations to be successful and continue to improve the delivery of safe and efficient patient care. This project has helped me to become a better scholar, nursing professional, and leader.

This development of a nurse residency program has not been an easy journey. I had to edit and make many necessary changes within the program. My long-term

professional goal was to obtain my Doctor of Nursing degree. I am grateful for all my learning experiences.

Summary

The development of a nurse residency program is an important component to decrease staff burnout, reduce staffing shortages, and aid in decreasing overtime pay. I led a team that developed a program that will address this hospital's gap in perinatal practice. This program will need to be evaluated, and necessary changes will be made if needed. The completion of this project has helped me to develop professional standards that I will use as a DNP.

References

Association of Women's Health, Obstetric and Neonatal Nurses. (2018). *Promoting the*

    Health of Women and Newborns. Retrieved from https://www.awhonn.org/

Bleich, M. (2012). In Praise of Nursing Residency Programs. *American Nurse Today*, *7*.

    Retrieved from https://www.americannursetoday.com

Brouwers, M. (2012). APPRAISAL OF GUIDELINES FOR RESEARCH &

    EVALUATION II: AGREE II Instrument. Retrieved from

    https://www.agreetrust.org/wp-content/uploads/2013/10/AGREE-II-Users-

    Manual-and-23-item-Instrument_2009_UPDATE_2013.pdf

Burr, S. & Maldonado, G. (2014). Implementation of a nurse residency program in a

    women and newborn's specialty hospital: A magical transformation. *Journal of*

    Obstetric Gynecologic & Neonatal Nursing, *43,* (1-4).

    doi:10.1111/1552-6909.12359

Christman, J., Jordan, R., Davis, C., & Williams, W. (2014). Exploring evidence-based

    practice research. *Nursing Made Incredibly Easy, 12*(4), 8-12. Retrieved from

    https://journals.lww.com/nursingmadeincrediblyeasy

Dracup, K., & Morris, P. (2018). Nurse residency programs: Preparing for the next shift.

    American Journal of Critical Care, 16, 328-330. Retrieved from

    http://ajcc.aacnjournals.org/content/16/4/328.full

Harvey, G,& Wensing, H. (2018). Quality improvement research: Methods for evaluation

    of small scale quality improvement projects. *Qual Saf Health Care,*

    12(3), 210-215. Retrieved from

References

http://www.qshc.comqualitysafety.bmj.com/content/12/3/210

Hofler, L. & Thomas, K. (2018). Transition of new graduate nurses to the workforce:

Challenges and solutions in the changing health care environment. *Medical*

Journal, 77, (33-136. doi:10.18043/ncm.77.2.133

Institute of Medicine. The Future of Nursing. NCBI. (2016). Retrieved from

https://www.ncbi.nlm.nih.gov/books/NBK209881/

Institute of Medicine. The Future of Nursing: Leading Change, Advancing Health Key

Messages and Report Recommendations. (2016). National Center for

Biotechnology Information. Retrieved from

https://www.ncbi.nlm.nih.gov/books/NBK350156/

International Breastfeeding Institute. (2018).Breastfeeding Institute. Retrieved from

https://internationalbreastfeedinginstitute.com/what-is-a-certified-breastfeeding-

counselor/scope-of-practice/

Javelona, G., & Kurtzman, Y. (2018). Improving patient care while decreasing costs: The

benefits, barriers, and student perspectives on nurse residency programs. *RN*

Journal 96, (1-14). Retrieved from http://rn-journal.com/journal-of-nursing

National Council of State Boards of Nursing. (2018). Transition to Practice. Retrieved

from https://www.ncsbn.org/transition-to-practice.htm

Nursing Solutions, Inc. (2018). 2018 National Health Care Retention & RN Staffing

Report. Retrieved from http://www.nsinursingsolutions.com/files/assets

/library/retention-institute/nationalhealthcarernretentionreport2018.pdf

References

Petiprin, A. (2016). Nursing Theory: Benner. Patricia Benner novice to expert-nursing theorist. Retrieved from http://nursing-theory.org/nursing-theorists/Patricia-Benner.php

Parsh, B. & Taylor, E. (2013). Benefits of residency programs for new grads. *Nursing, 43,* (64-65). doi:10.1097/01.NURSE.0000437485.83616.1a

School Of Medicine and Public Health. (2017). Wisconsin's Health: What Works for Health Policies and Programs to Improve Wisconsin's Health. Retrieved from http://whatworksforhealth.wisc.edu/program.php

Van Camp, J., & Chappy, S. (2017). The effectiveness of nurse residency programs on retention: A systematic review. *Association of Perioperative Registered Nurses. 106*(2), 128-144. doi:10.1016/j.aorn.2017.06.003

Wackler, T. (2015). Why Implementing a Nurse Residency Program is a Great Idea. Premier Health Nursing. *2*(4), 1-4. Retrieved from https://www.premierhealth.com/Health-Professionals/Nurses/Newsletter/July-2015/Why-Implementing-a-Nurse-Residency-Program-is-a-Great-Idea/

Walden University College of Health Sciences School of Nursing (2017). Manual for Systematic Review: Doctor of Nurse Practice Scholarly Project.

Welding, N. (2012). Creating a nursing residency: Decrease turnover and increase clinical competence. *Medsurg Nursing, 20*(1), 37-40. Retrieved from https://www.amsn.org/professional-development/periodicals/medsurg-nursing-journal

References

Why Implementing a Nurse Residency Program is a Great Idea. Premier Health Nursing.

Retrieved from https://www.premierhealth.com/Health-

Professionals/Nurses/Newsletter/July-2015/Why-Implementing-a-Nurse-

Residency-Program-is-a-Great-Idea/

World Health Organization. (2012). Transforming and scaling up health professionals'

education and training: World Health Organization guidelines 2012. Retrieved

from http://worldhealthorganization

Yannascoli, S., Schenker, M., Carey, J., Ahn, J., & Baldwin, K. (2013). How to write a

systematic review: A step-by-step guide. *University of Pennsylvania Orthopaedic

Journa*, *23,* 63-69. Retrieved from http://upoj.org/wp-content/uploads/v23

/C_GENERAL_Yannascoli.pdf