



New Nurses Are Not All Alike: Meeting Diverse Transition Needs of Newly Licensed Nurses

Dianne M. Marshburn, RN, PhD, NE-BC

Elaine S. Scott, RN, PhD, NEA-BC

March 10, 2009

OBJECTIVES

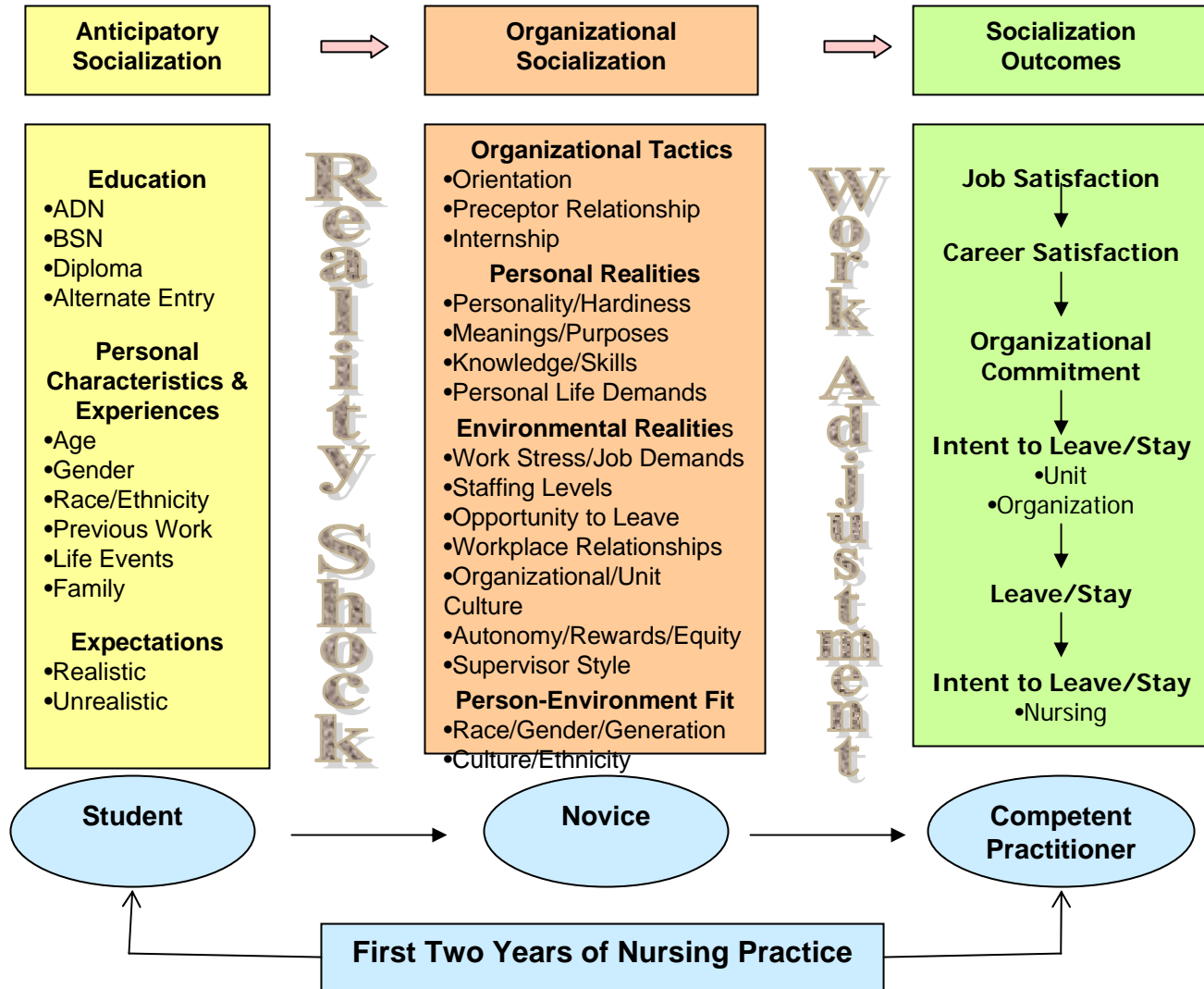
At the end of this workshop you will be able to:

- Discuss transition to practice considerations for select groups of new nurses.
- Identify effective preceptor interventions to facilitate transition to practice for these new nurses.

What Influences the Transition Needs of the Newly Licensed Nurse?



New Graduate Nurse Transition into the Workplace



What Influences New Graduate Nurses Prior to Work?



**ANTICIPATORY
SOCIALIZATION**

Personal Characteristics

- **Generational Differences**
 - Generation X (born 1965-1980)
 - Generation Y (born since 1981)
- **Learning Style Differences**
- **Personality Differences**
 - Extroverted versus Introverted
 - Intuitive versus Sensing
- **Racial and Ethnic Differences**
 - 25% of the American population is an ethnic minority while only 9% of RNs reflect this racial representation
- **Gender Differences**

Educational & Experiential Differences

- **Associate Degree RNs**
- **Baccalaureate Degree RNs**
- **Alternate Entry RNs**
- **RNs with previous experiences in health services (CNAs, EMTs, etc)**

Transition to Practice New Graduate Considerations

Generational (Age Related) Differences

- **Generation X**

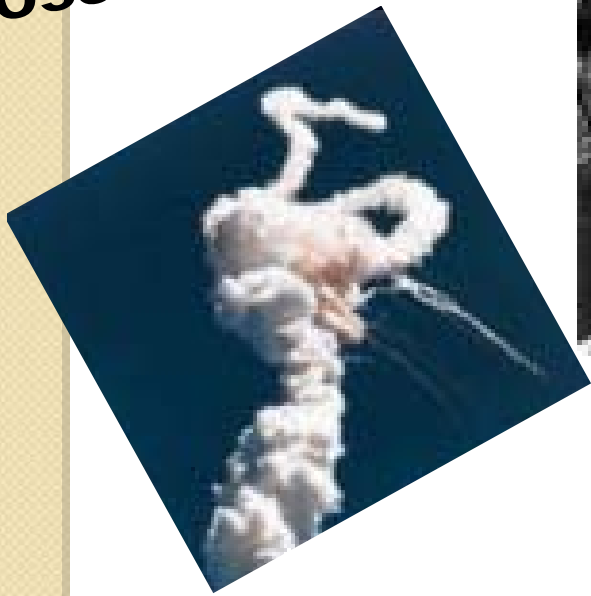
- Children of divorce
- Born 1965 – 1978
- 44 million
- Latchkey kid
- Cable TV
- Take care of themselves

- **Generation Y**

- Born 1979 – 1994
- 78 million
- Stay at home w/family
- Technology savvy
- Most racially diverse
- Taken care of by parents

Generation X – Major Events That Shaped the Generation

zLoss of heroes



Latch Key Kids



Children of divorce



The Pill

“What’s in it for me?”

- Highly individualistic!
- Loyal to self, not organizations –
- They want travel and leisure, good family life, and helping others.
 - Gen X’ers display family values much like those in the 1950’s
 - 87% of Gen X’ers say they will only marry once and want to spend a lot of time with their families.
- Have little acceptance of the philosophy of the greater good for the whole over the individual

“I’m easily bored.”

- Adaptable to change
- Comfortable with technology
- Independent
- Multi-Task
- Crave and require constant exposure to information
- Want to know what is expected of them and what benefits they will receive in return

Generation X: The Results of These Influences

Key Principles of Working and Motivating Generation X'ers

- **Remember, they want a life and for their involvements to be fun and relaxed; so informality appeals to them**
- **They love technology and “hands off supervision”-- elbow room; they are self-reliant**
- **They are pragmatic and like to figure things out**
- **They can be very cynical; hate politics and boomer's belief systems – so sometimes organizational and social mores irritate them**
- **They want development -- but they read less and need it brief and bulleted**
- **They like to juggle and roam**

Generation Y Major Events That are Shaping Their Lives



Stay at Home Moms

“Our differences are our strengths.”

- America’s most racially & ethnically diverse - least-Caucasian generation.
- Global economy, media & technology define this generation.
- Technological savvy
- Rule Followers
- Accept Authority
- Moral

“We can get it done.”

- Optimistic
- Civic-Minded
- Sociable
- Sophisticated & Street Smart
- Independent Minded
- Believe in the greater good of the whole over the individual

Generation Y: The Results of These Influences

Key Principles for Working with and Motivating Gen Y

- They love teamwork and they are technologically savvy so let them work together to learn
- They have a can-do attitude
- They're resilient and trust authority
- They believe hard work and goal setting are sure tickets to success; they will need a professional development plan
- Economists say they'll understand productivity and be one of the most effective work groups – include them in understanding the total picture

Key Principles of Working with Younger Generation NGNs

- Consistency
- Respect for me as a person
- Good rewards
- Chance for participation
- Opportunity for self-development
- Large amount of freedom of opinion & in efforts
(From 50 recent college grads & 150 current college students)
- Recognition
- Continuing Education
- Interpersonal Relationships
(Sadler, 2003)

- Skill development is very important; so important that they will often take lower pay to gain skill
- Change isn't a problem, they expect it as a result of watching downsizing, lay-offs and changing contracts between people in society. This does affect their commitment level.

Adapted from: Coaching Generations at Work – Nursing Administration Quarterly

- Baby Boomers are currently more satisfied than Gen X & Y
- Gen X & Y need opportunity for empowerment such as shared governance, self-scheduling & job sharing. They also want career development

(Wilson, Squires, Widger, Cranley & Tourangeau, 2008)

Influence of Gender on New Graduate Transition



ender

- Within four years of graduation, 7.5% of male nurses and 4.1% of female nurses have left the profession. (Uhlman, 2002)
- No differences in satisfaction levels at the end of a one year residency using McCloskey-Mueller Satisfaction Survey (Altier & Krsek, 2006)
- Men & women were motivated by the same characteristics of the job of nursing – service to others (de Cooman, de Gieter, Peppermans, DuBois, Caers, & Jegers, 2008)
- Male NGNs valued career & leadership possibilities and autonomy significantly more than female NGNs (de Cooman, de Gieter, Peppermans, DuBois, Caers, & Jegers, 2008; Romem & Anson, 2005; Boughn, 2001)
- Female NGNs showed slightly more interest in interpersonal contact as a professional value than male NGNs (de Cooman, de Gieter, Peppermans, DuBois, Caers, & Jegers, 2008)
- Male nurses reported a lack of advisors and mentors for career development and that they were selected to care for more aggressive patients & to

Key Principles for Working With Male New Graduates

- Four Barriers Articulated by Male Nursing Students that are Germane (O'Lynn, 2004)
 - Feeling Unwelcome on the Units
 - No Mentoring
 - No Guidance on Appropriate Touch
 - No Discussions on Communication Differences based on Gender
- Need to address these above areas of concern during orientation and preceptorship period
- Expose male NGNs to role models within nursing profession in your organization for future mentoring
- Develop peer support group of new male NGNs with an experienced male nurse mentor
- Black male nurses in some studies disclosed issues with female authority figures

Influence of Race on New Graduate Transition

Race

- Post graduation students noted that socialization & acculturation were major challenges as opposed to technical mastery & skill development (Shaw & Degazon, 2008)
- Statistically significant differences in levels of satisfaction with coworkers, interaction opportunities, and professional opportunities between white and non-white NGNs at the end of a 1 year residency (Altier & Krsek, 2006)
- No studies were found describing the transition experience for underrepresented new nurses of color or successful best practices for their retention during the first year of practice (Hare, 2007).
- **Research on minority nursing student & leader challenges include considering:**
 - The need for mentors and role models
 - Assistance in balancing work and family obligations
 - Need for effective communication strategies
 - Need for assistance in navigating the culture of professional practice

Key Principles for Working with Racial/Ethnic Minority New Graduate Nurses

- Mentoring literature suggests that partnering like race/gender yields more success
- If unable to partner a preceptor based on race/gender then develop support groups or peer exposure to these groups within your organization with an opportunity for socialization and connection (Yoder, 1996; Merrill 1998)
- Introduce and Identify Racial Minority Role Models within the organization as possible future mentors for NGNs
- Team Preceptorships – Matching a new nurse (< 2yrs of practice) with an expert preceptor to provide precepting of NGNs; this may be a way to have a minority involved (Beecroft, Hernandez, Reid, 2008)
- Be alert to disadvantaged NGNs who have had little exposure to professional cultures and the increased need for socialization experiences and mentoring

What Influences New Graduate Nurses
After They Go to Work



**ORGANIZATIONAL
SOCIALIZATION**

Key Principles for Working with Different Learning and Personality Styles

- Identify and match personality and learning styles of orientees and preceptors (Hautala, Saylor, & O'Leary-Kelly, 2007; Fahje, McMyler, & Mateo, 2001)
- Orientees who matched their preceptors on Myer Briggs Type indicator on introversion and extroversion reported statistically significant higher levels of satisfaction than those that did not match (Anderson, 1998)
- Tools to Assess Learning Styles
 - Multi-modal Paired Associates Test
 - Perceptual Modality Preference Survey
 - Edmonds Learning Style Identification Exercise
 - Gregorc Style Delineator
 - Visual-Aural Digit Span Test
- Tools to Assess Personality
 - Myers-Briggs Type Indicator
 - Hartman Personality Profile
 - Kiersey Temperament Scale
 - DiSC Personal Profile System

(Baltimore, 2004)



“I’m anxious, afraid, and wondering if I’m competent to do this job.”

Just what is the disposition of the new graduate when they arrive at orientation?

General Trends of NGNs in Transition

- Initial perceptions of competence and confidence are higher than those at 6 months
- Improvement in competence and confidence scores rises after one year to 18 months
- Developing a sense of professional belonging and socialization took at least a year (McKenna & Newton, 2008)
- NGNs spend a significant amount of time learning their place in the social structure in addition to learning skill mastery (Hodges, Keeley, & Troyan, 2008)
- Self-judgment and self-concept scores decline during the first year of practice (Bjorkstrom, Athlin, & Johansson, 2008)

Here's How New Graduates Felt

- 98% felt supported by family/friends
- 97% felt work was exciting and challenging
- 95% felt staff were available during new situations and procedures
- 47% were comfortable in the care of the dying patient
- 53% felt comfortable suggesting changes in the nursing plan of care
- 57% felt overwhelmed by their patient care responsibilities

Here's How New Graduates Felt

- Top Skills
 - 42% IV starts
 - 24% Blood draws
 - 23 % Swanz catheters
 - 17 % assessment skills
- Variability in skill competency across patient care units
Example: Majority of new nurses employed in NICU (71%) reported uncomfortable in performing IV starts compared to 25% of new nurses in the adult critical care unit.

Perception of Clinical Competence

Findings based on data collected one month after hire from the Marshburn Dissertation

Patterns & Trends of Success of New Orientees on PBDS Reassessments (Based on PCMH findings)

- Orientation period of 18 to 26 weeks for Intermediate and ICU new graduate nurses
- Orientation period of 12-13 weeks for medical/surgical nurse
- 1 to 2 preceptors/orientee
- 61% did not meet criteria on PBDS at the end of this period of orientation

Influence of Age, Gender, & Race on New Graduate Orientation Outcomes

(Marshburn Dissertation)

- Age

A significant difference in patient care scores for the three age groups [$F(2, 261) = 4.53, p = .01$].

Mean scores for nurses over 35 was significantly lower than the other groups on patient care scores.

- Gender

No significant difference on professional role scores on gender. Males scored higher on the professional role.

- Race/Ethnicity

- relationship between meeting criteria for problem management or communication based on differences in age, gender, ethnicity or education

- those having most difficulty in patient care were African American [$(250) = 3.11, p < .00$].

- African American nurses were found to score lower on the support scale

- African-Americans scored lower on the following:

- "I feel at ease asking for help from other RNs on the unit."

- "I feel my preceptor provides encouragement and feedback about my work."

Influence of Educational & Experiential Differences on New Graduate Orientation Outcomes

(Marshburn Dissertation)

- No significance difference in support, patient care and professional role scores when comparing nurses with different education (Diploma, ADN, BSN) and experience level.
- Significant relationship between problem management and previous experience $\chi^2 (1, N = 221) = 5.15, p = .03$.
- New nurses who had previous experience were more likely to meet criteria for problem management.
- Consistent with literature that experience in an internship or externship does have a positive impact on new nurse's adequacy preparation of practice – study found new nurses with previous health care experience were more likely to meet criteria on problem management.

Influence of Orientation on New Graduate Nurses

- Scott, Engelke, & Swanson (2007)
 - New graduate nurses who had high job satisfaction were 2.4 times more likely to be completely satisfied with their orientation
 - NGNs who had turned over ($M=7.8$, $SD=6.35$) averaged almost two weeks less orientation than those that did not turn over ($M=9.7$, $SD=6.39$; $t(313)=2.65$, $p = .008$).
 - Turnover rates for those who were completely satisfied with their orientation were 45% compared to 60% for those not completely satisfied with their orientation [$\chi^2(1)=6.44$, $p=0.01$].
- Salt, Cummings & Profetto-McGrath, 2008
 - Based on review of 16 NGN studies, the retention strategy with the greatest percentage of retention was a program 3-6 months long (86 – 90% experimental versus 60-63% control)

Ranked Aspects of Preceptor Program

(Almada, Carafoli, Flattery, French & McNamara, 2004)

- Length of Orientation 55% #1
- Preceptor/Orientees Match 35% #2
- Availability of Preceptor 10% #3

Orientee Top 3 Barriers to Success

- Patient Assignment
- Being Pull into Staffing the Unit
- Orientee unable to progress
- Orientee behavior concerns

Preceptor Top 3 Barriers to Success

- Lack of Experienced Nurse Coaches
- Too many new orientees on the unit at the same time
- Preceptor also Charge Nurse

Preceptor Focus Groups

Implications for New Graduate Nurse Orientation & Preceptorship

- Length of orientation of new graduate nurse
 - One size does not fit all
 - The competence of a NGN at the time of graduation influences the length of time it takes for development into an effective practitioner (Roberts, Lockhart, & Sportsman, 2009)
 - ESL NGNs probably need a prolonged orientation and preceptorship; ESL students required English support classes for success (Labun, 2002)
 - NGNs from disadvantaged backgrounds (those who are the first college graduates, have lived in public housing, or with a minority heritage) may need additional socialization and cultural transitioning support (Zuzelo, 2005)

Implications for New Graduate Nurse Orientation & Preceptorship

- # of preceptors that new grads have during orientation
- Preceptor assignment (full versus partial assignment)
- Additional responsibilities (are preceptors expected to be in charge etc)
- Training to be able to work with different populations of NGNs
 - Informal
 - Formal

Other Preceptor Considerations

- Available time for orientee
- Teaching opportunities
- Incorporating critical thinking (scenarios at bedside or in simulations)
- Effective communication
- Variety of patients/experiences
- Teamwork
- Delegation
- Volunteered
- Assigned by leadership
- Requested by leadership
- Clinical ladder requirements
- Critical thinking ability
- Teaching skills
- Based on previous experience

PRECEPTOR TIPS

General Strategies for Success

- All new graduates want reassurance, specific & precise guidelines & daily feedback but vulnerable NGN populations need this even more (Modic, 2003)
- Preceptor's roles include role modeling, socializing, and educating. Focusing only on educating denies the NGN access to an understanding of the culture of the work environment and an opportunity to network and establish a peer group and sense of orientation to the organization.(Baltimore, 2004)
 - Remember that orientees may never have worked a night shift.
 - NGNs do not know the norms of where to eat, how to dress, chain of command, how to get resources, things you take for granted
 - NGNs feel awkward and need introductions to other staff and the day to day events in a clinical setting
 - Minority NGNs need a social network of mentors and peers that are also minority nurses.

Other Environmental Influences on New Graduate Nurse Orientation/Preceptorship

- **Work Stress**

- Patient Load
- Patient Severity

- **Staffing Levels**

- NGNs satisfied with their jobs were six times more likely to experience staffing shortages ranging from weekly to none rather than daily
- NGNs experiencing daily shortages of staffing were more dissatisfied with nursing as a career than those who experienced intermittent shortages; however, the influence on career satisfaction only approached statistical significance ($p = 0.052$) (Scott, Engelke, Swanson, 2007)

- **Supervisory Relationships**

- Nurse unit managers can either positively or negatively influence NGN outcomes (Evans, Boxer, & Sanber, 2008)

- **Peer Relationships/Staff Support**

WHAT HAPPENS AFTER ORIENTATION & PRECEPTING

Satisfaction

Intent to Stay

Turnover



SOCIALIZATION OUTCOMES

New Graduate Job Satisfaction

Marshburn Dissertation

- **Most Satisfied With**
 - 204 (78%) amount of encouragement and feedback
 - 199 (75%) benefit package
 - 186 (71%) opportunities for career advancement
- **Least Satisfied With**
 - 127 (48%) opportunities to work straight days
 - 151 (57%) vacation
 - 157 (60%) weekends off per month
- Associate degree nurses scored significantly higher on job satisfaction than BSN nurses [$t(248) = 2.21, p = .03$].
- No statistically significant difference between job satisfaction based on age
- Associate degree nurses were more likely to be older than the BSN.

New Graduate Job Satisfaction

(Scott, Engelke, & Swanson, 2007)

- NGNs with job satisfaction were 1.7 times more likely to be married/ widowed.
- NGNs with job satisfaction were six times more likely to experience staffing shortages ranging from weekly to none rather than daily.
- NGNs with job satisfaction were 2.4 times more likely to be completely satisfied with orientation and 3 times more likely to be satisfied with nursing as a career.
- ADNs were over 3 times more likely to be satisfied with nursing as a career.
- NGNs with a high degree of satisfaction in the current job were more than four times as likely to report a high degree of career satisfaction.
- NGNs experiencing daily shortages of staffing were more dissatisfied with nursing as a career than those who experienced intermittent shortages; however, the influence on career satisfaction only approached statistical significance ($p = 0.052$).
- No significant relationship between age & job satisfaction
- 72.2% of non-white NGNs were dissatisfied with their jobs compared to 52.1% of white NGNs

Intent to Stay/Leave Job

(Marshburn Dissertation)

- 91 (58%) of the 157 respondent indicated an intent to remain in the hospital for 3 years.
- No **significant** differences between any of the nurse characteristics and intent to stay.
- A trend for older nurses to express an intent to stay when compared to younger nurses.
- New nurses who intended to stay longer had higher job satisfaction scores.
- Associate degree nurses were more likely to express an intent to stay when compared to BSN (62% to 51% respectively).

Intent to Stay/Leave

(Scott, Engelke, & Swanson, 2007)

- NGNs who intended to leave their current positions within three years were more than twice as likely to be dissatisfied with their job and three times more likely to be dissatisfied with the career of nursing.
- NGNs who attended a CE program on delegation were twice as likely to leave the job within three years.
- Univariate analysis found that career satisfaction and intent to leave the current position within three years were significantly related to intent to leave nursing within three years.

Intent to Stay/Leave

(Beecroft, Dorey, & Wenten, 2008)

- Older NGNs are more likely to show turnover intent if they do not get the unit/ward choice that they want
- Older NGNs turnover intent was related to (not statistically significant) a need for more social support
- Younger NGNs more less likely to show turnover intent if they rate the work environment and organizational characteristics high (including the job role they are in and the pay they are receiving)

As measured using the Kaplan-Meier Survivorship tool

References

- Almada, P., Carafoli, K., Flattery, J.B., French, D.A., & McNamara, M. (2004). Improving the retention of newly graduated nurses. *Journal for Nurses in Staff Development*, 20(6), 268-273.
- Altier, M.E. & Krsek, C.A. (2006). Effects of a 1-year residency program on job satisfaction and retention of new graduate nurses. *Journal for Nurses in Staff Development*, 22(2), 70-77.
- Baltimore, J.J. (2004). The hospital clinical preceptor: Essential preparation for success. *The Journal of Continuing Education in Nursing*, 35(3), 133-140.
- Beecroft, P., Hernandez, A.M., & Reid, D. (2008). Team Preceptorships. *Journal for Nurses in Staff Development*. 24(4), 143-148.
- Beecroft, P.C., Dorey, F., & Wenten, M. Turnover intention in new graduate nurses: A multivariate analysis. *Journal of Advanced Nursing*, 62(1), 41-52.
- Bjorkstrom, M.E., Athlin, E.E., & Johansson, I.S. (2008). Nurses development of professional self-judgment. *Journal of Clinical Nursing*, 17(10), 1380-1391.
- Boughn, S. (2001). Women and men choose nursing. *Nursing and Health Care Perspectives*, 22(1), 14-19.
- Connelly, L. & Hoffart, N. (1998). A research based model of nursing orientation . *Journal of Nursing Staff Development*, 14(1), 31-39.
- Cowin, L.S., Johnson, M. & Marsh, H.W. (2006). A longitudinal study of student and experienced nurses' self-concept. *Collegian*. 13(3), 25-31.

References

- De Cooman, R., De Gieter, S., Pepermans, R., DuBois, C., Caers, R., & Jegers, M. (2008). Fresmen in nursing: Job motives and work values of a new generation. *Journal of Nursing Management*, 16, 56-64.
- Fahje, C., McMyler, E, & Matco, M. (2001). When new employee orientation doesn't go as planned. *Journal for Nurses in Staff Development*, 17(3), 137-143.
- Hare, K. (2007). *A survey of program characteristics of new graduate residencies and support available for underrepresented new registered nurses of color in Washington State*. Washington Center for Nurses: Washington State Department of Health.
- Hautala, K., Saylor, C., & O'leary-Kelley, C. (2007). Nurses' perceptions of stress and support in the preceptor role. *Journal for Nurses in Staff Development*. 23(2), 64-70.
- Hodges, H.F., Keeley, A.C., & Troyan, P.J. (2008). Professional resilience in baccalaureate prepared acute care nurses: first steps. *Nursing Education Perspectives*, 29(2), 80-89.
- Lockhart, R.K. & Sportsman, S. (2009). A competency transcript to assess and personalize new graduate competency. *Journal of Nursing Administration*, 39(1), 19-25.

References

- McKenna, L. & Newton, J.M. (2008). After the graduate year: A phenomenological exploration of how new nurses develop their knowledge and skill over the first 18 months following graduation. *Australian Journal of Advanced Nursing*, 25(4), 9-15.
- Modic, M.B. (2003). Using strategies to promote change: Masterful precepting as cited in Guhde, J. (2005). When orientation ends – supporting the new nurse who is struggling to succeed. *Journal for Nurses in Staff Development*, 21(4), 145-149.
- O'Lynn, C. E. (2004). Gender based barriers for male students in nursing education programs. *Journal of Nursing Education*, 42(6), 245-258.
- Sadler, J.J. (2003). Who wants to be a nurse: Motivation of the new generation. *Journal of Professional Nursing*, 19(3), 173-175.
- Salt, J., Cummings, G.G., & Profetto-McGrath, J. (2008). Increasing retention of the new graduate. *JONA*, 38(6), 287-296.
- Shaw, H.K. & Degazon, C. (2008). Integrating the core professional values of nursing: A profession, not just a career. *Journal of Cultural Diversity* 15(1), 44-50.

References

- Uhlman, M. (2002). More nurses quitting careers early: A national survey of recent graduates said more men and women are finding other jobs. *Maine Nurse*, 4(4), 20.
- Whittock, M. & Leonard, L. (2003). Stepping outside the stereotype. A pilot study of the motivation and experiences of males in the nursing profession. *Journal of Nursing Management*, 11, 242-249.
- Wilson, B., Squires, M., Widger, K., Cranley, L., & Tourangeau, A. (2008). *Journal of Nursing Management*, 16(6), 716-723.

Recommended Reading

- Gilchrist, K.L. & Rector, C. (2007). Can you keep them? Strategies to attract and retain nursing students from diverse populations. *Journal of Transcultural Nursing*, 18(3), 277-285.