

An Innovative Program to Precept Newly Licensed Nurses

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Problem Statement

- The demand to orient and support NLNs is exceeding the availability of qualified preceptors.
- This contributes to staff burnout, impacts morale, and may lead to increased turnover of NLNs.
- In addition, patient outcomes as well as patient and staff satisfaction may be negatively impacted.

Background

- Effective preceptorships are essential in facilitating first year transition of newly licensed nurses (NLNs) to practice and are shown to increase retention rates (Watkins & Mareno, 2016).
- The Innovative NLN Preceptor Program (INPP) is an innovative strategy designed to support preceptors and NLNs during the initial clinical orientation period.

Setting

- A 171-bed Magnet® designated community teaching hospital in the Northeast U.S.

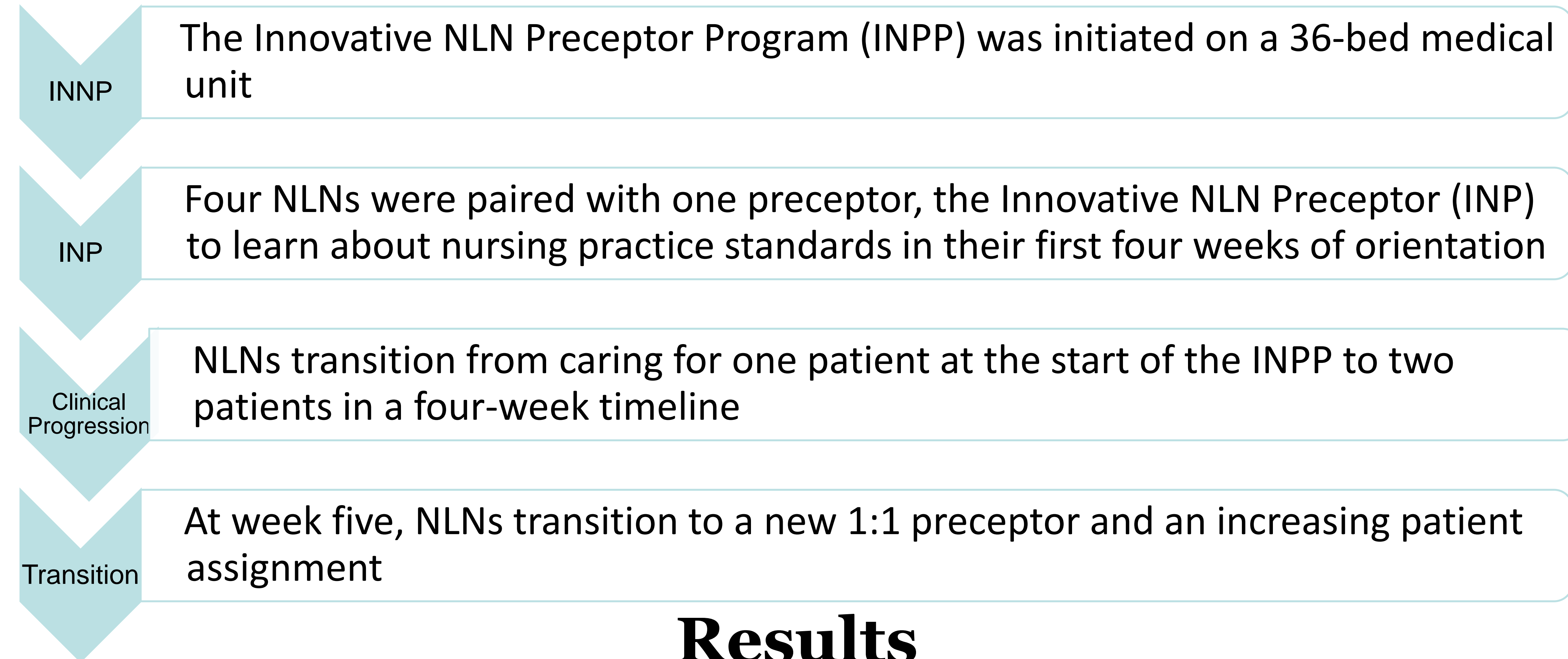
Purpose

- The purpose of the INPP is to promote a safe and healthy work environment for NLNs as well as the preceptors.

Reference

Watkins, C., Hart, P.L., & Mareno, N. (2016). The effect of preceptor role effectiveness on newly licensed registered nurses' perceived psychological empowerment and professional autonomy. *Nurse Education in Practice*, 17, 36-42. <https://doi.org/10.1016/j.nepr.2016.02.003>

Process

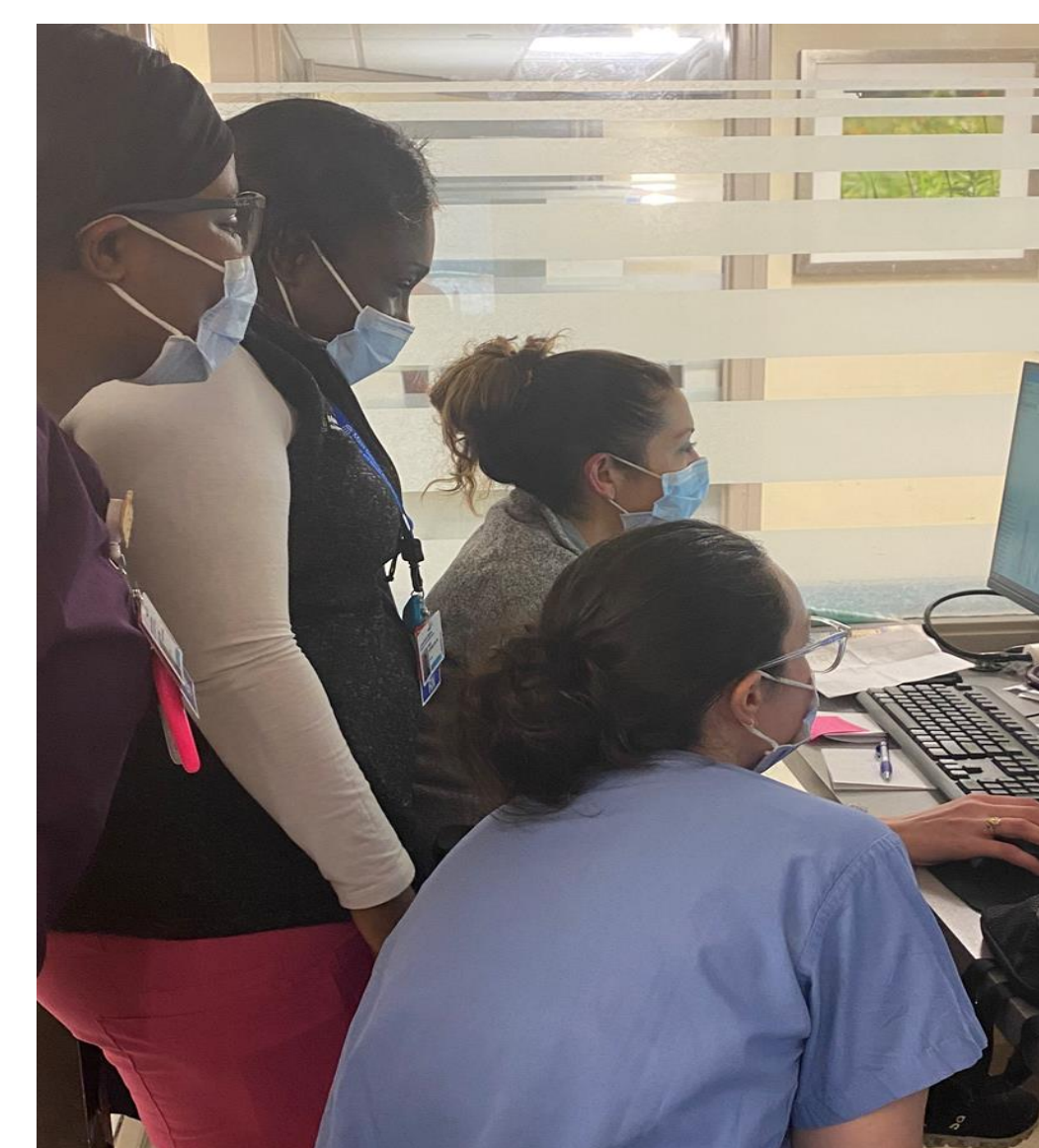


Results

- The first INPP was implemented fall of 2022 and received extremely positive feedback from everyone involved in the program, especially the NLNs.
- One NLN stated, *"In a period of my career where I expected to feel stressed and overwhelmed, the INP helped me feel comfortable and confident and for that I will always be grateful."*
- Evaluation will be key to the success and evolution of the program and will include both process and outcome measures such as NLN turnover and satisfaction data.

Implications

- The role of the INP is invaluable, serving as an internal consultant, an educator, and resource for NLNs and all clinical nurses.
- The development of INPs can increase the availability of skilled preceptors, supports their professional development, and contributes to the retention rate of NLNs.



Center: INP Kim Danna, BSN, RN with a NLN Cohort

INPP Timeline

Week 1	Hospital Orientation (1 Day), Nursing Orientation (2 Day), Epic Training (1/2 Day), & De-Escalation (1/2 Day)
Week 2 Monday & Tuesday	<ul style="list-style-type: none"> • Into to unit, tour, Omnicell and telemetry, emergency equipment, infection control practices, specimen handling, patient safety, roles, staff communications, policy review, NSI • Meet with Nurse Director, NPDM, Clinical Leader • Does not include medication administration
Wednesday & Thursday	<ul style="list-style-type: none"> • Group shares 1-2 patients • INP Introduces medication administration to NLNs. NLNs will be divided into 2 groups • Group 1 with INP for med administration, Group 2 with NPDM to focus on a skill (IV pumps, EKG, Bladder scan)
Friday	<ul style="list-style-type: none"> • Each NLN to take 1 patient assignment • Focus on handoff, rounding, assessments • INP to assign patients with common disease processes as found on units • Weekly De-Briefing session on Friday
Week 3 Monday & Tuesday	Each NLN to take 2 patient assignment
Wednesday	<ul style="list-style-type: none"> • Each NLN to take 2 patient assignment • Add admission/discharge
Thursday & Friday	<ul style="list-style-type: none"> • Each NLN to take 2 patient assignment • Add admission/discharge • Weekly De-Briefing session on Friday
Week 4 Monday - Friday	<ul style="list-style-type: none"> • Each NLN has 2 patient assignment and is responsible for the complete planning, implementing, and evaluating plan of care for their assigned patients • Weekly De-Briefing session on Friday
Week 5 Transition to 1:1 Preceptor	<ul style="list-style-type: none"> • Preceptor will receive formal handoff to review status of 4-week Innovative NLN Preceptor Competency checklist with defined plan to address additional learning needs • NLN up to a 2-patient assignment

Contact Information

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