

Evaluating Key Stakeholder Perceptions of Newly Licensed Nurse Residency Programs

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Problem Statement

- Nurse residency programs (NRPs) support the successful transition of newly licensed nurses (NLNs) to practice following graduation (Asber, 2019; Van Camp & Chappy, 2017) and represent a significant financial investment for organizations (Pillai et al., 2018).
- Evaluation typically focuses on preceptors and NLNs, with limited tools available to obtain feedback from key stakeholders (Laflamme & Hykras, 2020).

Background

- Despite evidence supporting NRPs, there are few tools available to measure their effectiveness from the perspective of key stakeholders.
- The Nurse Residency Program – Stakeholder Evaluation Survey (NRP-SES) (Failla et al., 2021) was developed to address the gap in the literature and has been found to effectively measure key stakeholders' perceptions of NRPs.

Purpose

- To evaluate the effectiveness of the current NLN Residency Program from the perception of key stakeholders.

Research Question

- “What are the perceptions of the key stakeholders about the effectiveness of the NLN Residency Program?”

Conceptual Framework

- Benner's novice to expert framework (Benner, 1984)

Methodology

Study Design: Cross-sectional descriptive design

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

Sample: Purposive sampling was used to recruit 107 key stakeholders knowledgeable about the nurse residency program

IRB: IRB review conducted and met regulatory requirements for exempt research

Data analysis: Data analysis included means, standard deviations, and Cronbach's alpha reliability coefficients with current sample compared to the NRP-SES study sample

Data Collection: Demographic questions, NRP-SES, two open ended questions

Results

- Response rate was 45% (n=49); response rate differed by roles
 - Highest response rate from clinical leaders (77%) and lowest from preceptors (27%)
- Demographic data suggests need to strengthen preceptor education at the organization
 - 74.1% (n=20) reported that they had not received formal preceptor education
- Findings highlight the perceptions of effectiveness of the NRP by key stakeholders (Table 1)

Table 1: NRP-SES Summary statistics and sample comparisons

NRP-SES Scales	items	Current Sample (n = 49)		Failla et al. sample (n = 301)		z-test
		α	M (SD)	α	M (SD)	
Evidence-based practice	5	0.84	3.10 (0.41)	0.89	3.08 (0.43)	0.29
Patient-centered care	6	0.90	3.23 (0.41)	0.90	3.15 (0.42)	1.41
Teamwork and collaboration	6	0.85	3.07 (0.43)	0.89	2.95 (0.47)	1.76
Quality improvement and safety	13	0.93	3.12 (0.38)	0.96	3.07 (0.42)	0.82
Informatics	4	0.86	3.25 (0.45)	0.79	3.13 (0.46)	1.83
Overall satisfaction	9	0.89	3.05 (0.38)	0.94	3.13 (0.50)	-1.06
Total scale	43	0.97	3.12 (0.35)	0.98	NA	

- A series of t-tests were conducted to assess if NRP-SES scale means differed for various demographic groups; only one set of comparisons revealed significant differences (Table 2)

Table 2: T-tests between clinical leaders and preceptors on the NRP-SES scales

NRP-SES Scales	Clinical Leaders (n = 10)		Preceptors (n = 17)		Levene's test		t-test		
	Mean	SD	Mean	SD	F	p	t	df	p
Evidence-based practice	2.84	0.46	3.24	0.46	0.05	0.824	-2.16	25	0.041
Patient-centered care	3.10	0.25	3.38	0.45	9.25	0.005	-2.10	25.0	0.046
Teamwork & collaboration	2.93	0.26	3.22	0.53	4.24	0.050	-1.84	24.5	0.078
Quality improvement & safety	2.93	0.26	3.29	0.46	7.24	0.013	-2.62	24.9	0.015
Informatics	3.13	0.24	3.44	0.51	23.54	< .001	-2.17	24.3	0.040
Overall satisfaction	2.89	0.26	3.09	0.49	1.71	0.203	-1.16	25	0.257
Total scale	2.95	0.22	3.26	0.43	7.01	0.014	-2.43	24.7	0.023

Open Ended Responses

Strengths

- Program length & use of cohort model
- Clinical and didactic components
- Ongoing reflective exercises
- Supportive environment provided by NPDMs and preceptors

Opportunities

- Improve preceptor education and development
- Limit # of preceptors assigned to NLNs
- Promote consistency for unit-based progress meetings
- Increase # of simulation experiences
- Address retention and establish a mentor program
- Extend orientation for NLNs hired to specialty practice units

Implications

- Nurse leaders may use the NRP-SES to determine baseline and ongoing effectiveness of NRPs.

Conclusions

- Study highlighted the effectiveness of the organization's residency program.
- Demographic data and open-ended responses identified numerous opportunities to strengthen the NRP.
- Results showed concordance with Failla et al. (2021), validating usefulness of the NRP-SES instrument when used in a different setting with a different sample size.

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