

2016

The Hospital Nurse Staffing Survey (HNSS) assesses the size and effects of the nursing shortage in hospitals, Texas' largest employer of nurses. During the spring of 2016, the TCNWS administered the HNSS to 666 Texas hospitals. These included for-profit, nonprofit, public, and Texas Department of State Health Services-operated hospitals, as well as hospitals linked to academic institutions; military hospitals were not surveyed. The facilities surveyed were general acute care, psychiatric, special, and rehabilitation hospitals. 345 (51.8%) hospitals responded to the survey.

This report on transition to practice programs for newly licensed registered nurses (RNs) responds to the nursing community's need to understand the challenges new nurses face and develop a means of easing their transition into nursing. Hiring practices of newly licensed nurses, hospitals' efforts to help them acclimate to practice, and the benefits of doing so are presented herein.

Institute of Medicine's *The Future of Nursing*¹

In 2011, the Institute of Medicine (IOM) published The Future of Nursing: Leading Change, Advancing Health. This report recommended a series of concrete policy and administrative changes that would allow the American healthcare professions to deal with our country's healthcare workforce needs. As a means of partially addressing the country's shortage of highly-qualified practicing nurses, the IOM report notes exceptionally high turnover rates among first-year nurses. It recommends that employers of newly licensed RNs seek to ease the transition by implementing transition to practice (residency) programs. Such programs have thus far proven economically prudent with returns on investment as high as 884%, while also leading to increased first-year nurse satisfaction and improved quality of patient care.

The Texas Center for Nursing Workforce Studies included several questions regarding transition to practice programs in the 2016 HNSS. These programs included extended orientations, prolonged preceptorships, and formal residency programs.

¹Institute of Medicine, Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing. (2011). The future of nursing: Leading change, advancing health. Retrieved from The National Academies Press website: http://books.nap.edu/openbook.php?record_id=12956

Transition to Practice Programs in Texas

Table 1 provides data showing the percentage of hospitals in each region reporting whether or not they had a transition to practice program for newly licensed RNs. Statewide, 65.2% of responding hospitals offer a transition to practice program for newly licensed RNs, compared to 70.3% of hospitals in 2014.

Table 1. Percentage of responding hospitals with and without transition to practice programs by region

		Texas	Panhandle	Rio Grande Valley	North Texas	East Texas	Gulf Coast	Central Texas	South Texas	West Texas
Hospitals with Transition to Practice Programs	n	225	13	12	79	16	34	29	20	22
	0⁄0	65.2%	54.2%	66.7%	65.8%	64.0%	65.4%	64.4%	64.5%	73.3%
Hospitals without Transition to Practice Programs	n	120	11	6	41	9	18	16	11	8
	⁰∕₀	34.8%	45.8%	33.3%	34.2%	36.0%	34.6%	35.6%	35.5%	26.7%

Table 2 displays the number and percentage of newly licensed RNs hired by hospitals by their degree type.

Table 2. Number and percent of newly licensed RN hires by degree type

	n	# of Newly Licensed RNs Hired	% of Newly Licensed RNs Hired
Diploma	228	96	1.6%
ADN	246	2,067	35.0%
BSN	242	3,617	61.3%
MSN — Alternate Entry	226	120	2.0%

Note: n=number of hospitals in Texas that reported each nurse type

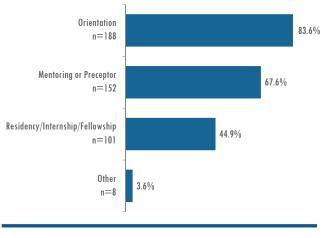
- Hospitals with transition to practice programs accounted for 97.3% of newly licensed RNs hired. Hospitals with residency/internship/fellowship programs accounted for 42.2%.
- The majority of newly licensed hires in metropolitan counties had a BSN (63.8%), while the majority in non-metropolitan counties had an ADN (59.9%).
- The percentages of newly licensed hires with a BSN were highest in West Texas (71.3%), the Gulf Coast (70.6%), and North Texas (69.2%), and lowest in the Panhandle (25.4%).

Description of Transition to Practice Programs

The 225 hospitals that reported having a transition to practice program in place were asked what kind of programs they had out of 4 options – residency/internship/ fellowship, mentoring or preceptor, orientation, and other (Figure 1).

- Orientation was the most commonly used transition to practice program.
- Most hospitals reported having 1 (32.4%) or

Figure 1. Percentage of hospitals with transition to practice programs by program type



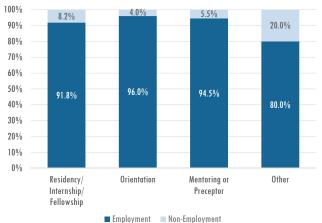
2 (37.8%) types of programs. Only 5 hospitals reported having all 4 types of programs.

Employment vs. Non-employment Models

As part of understanding hospitals' transition to practice programs, each was asked whether their program paid transitioning nurses (the employment model) or whether their program was unpaid (the non-employment model), perhaps through participation with a nursing school or as an individual internship (Figure 2).

Most programs used an employment model.

Figure 2. Transition to practice program type by employment model type



Length of Transition to Practice

Figure 3 shows the average length in weeks of transition to practice programs by program type.

Residency/internship/fellowship programs had the longest average length (18 weeks) and the widest range of lengths, from 1 week to 104 weeks.

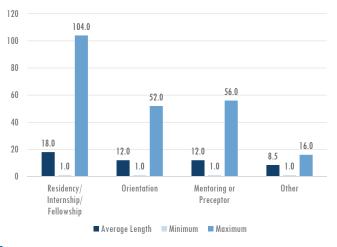


Figure 3. Average length and range in weeks of transition to practice programs by program type

Reported Benefits of Transition to Practice Programs

The same 225 hospitals with transition to practice programs were asked to indicate outcomes resulting from these programs (Table 3).

The top 3 reported outcomes were the same as in the 2014 HNSS.

Table 3. Percent of responding hospitals reporting outcomes of transition to practice programs

Transition to Practice Program Outcomes	% of Hospitals
Improved clinical competence in patient care among first year nurses	56.9%
Improved clinical decision making abilities among first year nurses	48.0%
Increased number of new graduates applying for RN positions in your organization	39.6%
Decreased turnover of newly licensed RNs in the first year of employment	38.7%
Improved communication skills among first year nurses with physicians, other health professionals, staff, patients, and families	29.8%
Improved organization and prioritizing skills in clinical practice among first year nurses	29.3%
Improved ability to incorporate research-based evidence in clinical practice among first year nurses	7.6%
Other	12.0%

Conclusion

Statewide, 65.2% of responding hospitals offer a transition to practice program for newly licensed RNs. Orientation was the most commonly used transition to practice program, and most hospitals reported having 1 (32.4%) or 2 (37.8%) types of programs. Most programs used an employment model. The most common outcomes

of transition to practice programs were improved clinical competence in resident/patient care among first year nurses, improved clinical decision-making abilities among first year nurses, and increased number of new graduates applying for RN positions in the organization.

TCNWS Advisory Committee Recommendations

In order to ease the transition of new nurse graduates and new APRN graduates and decrease high turnover rates among first-year nurses, employers of nurses should consider the following strategies:

Continue to explore the implementation of comprehensive transition to practice programs for new nurse graduates and new APRN graduates that integrate clinical reasoning and decision making, setting priorities, use of technology, and reflection and feedback.² The proportion of responding hospitals that offered transition to practice programs decreased slightly from 70.3% in 2014 to 65.2% in 2016.

 Develop a program for nurses to recruit and mentor prospective and new nurses.

² Spector, N. Transition to practice: Promoting quality and safety. Texas Board of Nursing: Nursing Education and Transition into Practice Conference. Austin, TX. 10 February 2010.