





The Long Term Care Nurse Staffing Study (LTCNSS) assesses nurse staffing and related issues in the long term care setting. In 2013, approximately 26% of licensed vocational nurses (LVNs) and 3% of registered nurses (RNs) in Texas worked in the Nursing Home/Extended Care setting. Long term care facilities may also employ certified nurse aides (CNAs), certified medication aides (CMAs), and advanced practice registered nurses (APRNs). During the spring of 2014, the TCNWS administered the LTCNSS to 1,191 Texas nursing facilities. A total of 443 facilities participated, for a final response rate of 37.2%.

# Institute of Medicine's *The Future of Nursing*<sup>1</sup>

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.

**Transition to Practice** 

The Texas Center for Nursing Workforce Studies included several questions regarding transition to practice programs into the 2014 LTCNSS. These programs may include extended orientations, prolonged preceptorships, and formal residency programs. The 2014 data responses will establish a baseline for tracking future progress toward the IOM's recommendation among long term care employers.

<sup>1</sup>Institute 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.nap.edu/openbook.php?record\_ id=12956

# Transition to Practice Programs in Texas

34.5% of 443 survey respondents reported using at least one of the methods listed in Table 1 as a transition to practice program for all nursing staff.

## Description of Transition to Practice Programs

The 153 facilities that had a transition to practice program in place were asked what kind of programs they utilized out of six options: residency, internship, orientation, mentoring or preceptorship program, fellowship, and other. Facilities could select multiple transition to practice program types. Because the program types were not defined on the survey, facilities could use their own definitions. For example, what one facility calls a residency, another might call an internship. For this reason, residency, internship, and fellowship were combined into one category.

The most commonly used transition practice program method was orientation, with

- approximately 80% of the 153 programs reported as this type.
- Internship/fellowship/residency was the least used method. For a point of comparison, 27% of hospitals in Texas utilize some combination of internships, fellowships, and residencies as a transition to practice program.

Table 1. Transition to practice programs used by responding facilities (n=153)

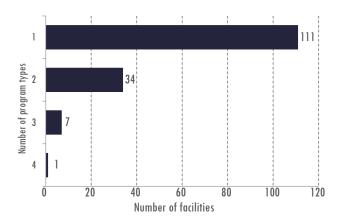
	# of respondents	% of respondents
Orientation	122	79.7%
Mentoring/preceptor program	49	32.0%
Internship/fellowship/ residency	18	11.8%



27.5% of the 153 facilities with a transition to practice program reported using more than one method listed in Table 1. Figure 1 shows the number of program types the 153 facilities reported.

- Approximately 73% of 153 programs reported utilizing only one type of transition to practice program.
- No facilities reported using all six of the transition to practice program types.
- 1 facility reported using four different transition to practice methods.

Figure 1. Number of program types used by facilities (n=153)



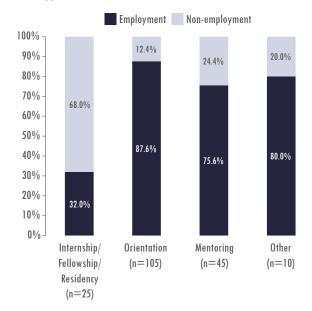
# Traits of Transition to Practice Programs in Texas

### **Employment Vs. Non-Employment Models**

As part of understanding facilities' 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).

 Orientation and mentoring were largely reported as being employment model programs.

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

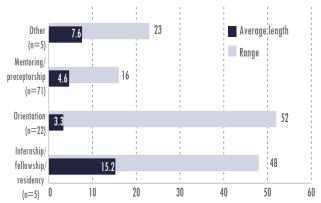


## Length of Transition to Practice (in weeks)

■ Internship/fellowship/residency had the longest average duration at over 15 weeks (Figure 3).

- Orientation programs had the shortest average length.
- Most program lengths varied widely from facility to facility. For example, orientations ranged from less than a week to 52 weeks.

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



### Reported Benefits of Transition to Practice Programs

Facilities provided the number of new nursing graduates that participated in each program type during the last fiscal year. The 153 facilities reported a total number of 575 graduates in each of the following transition to practice programs:

- 18 new nursing graduates for internship/fellowship/residency
- 293 new nursing graduates for orientation
- 179 new nursing graduates for mentoring
- 85 new nursing graduates for other



Table 2. Reported outcomes of transition to practice programs for first year nurses (n=153)

	n	%
Improved clinical competence in resident care	81	52.9%
Improved clincal decision making abilities	74	48.4%
Improved communication with physicians, other staff, and residents	72	47.1%
Improved organization and prioritizing skills in clinical practice	62	40.5%
Increased number of new grads applying	23	15.0%
Decreased turnover during 1st year of employment	21	13.7%
Improved ability to incorporate research based evidence in clinical practice	14	9.2%
Other	15	9.8%

Survey respondents could also select up to three outcomes resulting from transition to practice programs. Table 2 summarizes those results, with improvements in clinical practice, communication and clinical decision-making topping the list, each reported by almost half of the 153 respondents with any transition to practice program.

Table 3 lists the number of graduates by each transition to program type. A total of 490 new nursing graduates participated in the various transition to practice programs presented below.

Table 3. Number of graduates by transition to practice program type

Program type	Number of facilities	Number of graduates
Internship/fellowship/residency	4	18
Mentoring/preceptorship	22	179
Orientation	74	293