Stepping it Up: Transitioning Novice Critical Care Nurses, Does it Work?

- Ingrid Daley, RN, MScN, CNCC (C)
- Elizabeth Gordon, RN, MHS
Objectives

• Background of Step-Up Guidelines
• MSICU Orientation Program
• Literature Review
• Survey Results
• Evaluation of the Step-Up Guidelines
• Future Directions
• Questions
What is the Step-Up Guidelines

• Developed to highlight different levels of competency skills & framework for skill acquisition for novice critical care nurse to demonstrate & achieve over quarterly increments

• Template for Charge Nurses/ Patient Care Coordinator to use in planning daily assignments
What is SUG Cont’d

• ICU busy with high acuity
• Hard for IC nurses to assign appropriate patients to new staff
• We did not want to instill Sink or swim attitude
• Limited time to attend to learning needs of new staff
CHALLENGES

I expected times like this - but I never thought they'd be so bad, so long, and so frequent.
Orientation programs:

• Developed to help new nurses entering ICU’s feel less overwhelmed

• Standardization of orientation goals provides structure/clarity and ensures consistency of experiences
Orientation programs need to provide learning opportunities related to curriculum at appropriate phases of development.

Mentorship very important post formalized training.
Synergy Model Framework works well within novice to expert & reflective practice framework since nurses competencies advance as nurses develop from baseline competency to expert practice.

Promotion of Critical thinking
Holistic Approach

Schon’s Theory of Reflective Practice

Synergy Model Framework

Benner’s Concept
Literature review Cont.’d

• Adult learners learn at various stages & different levels
• Orientation needs to be learner-centered, flexible & outline expectations
• Unit & learners are accountable partners in learning
Literature review Cont.’d

• Provide post formal learning structures and resources to promote learning & meet the individual needs by providing variety of experiences

• Learners need to identify their learning needs through-out process
Goal

To promote consistency in standards of practice.

To Build Confidence!
Implementation of the Step-up Guidelines

• Rolled out in 2008
• Incorporated into the Charge Nurse Workshop
• Located in Charge Nurse Reference binder
Implementation Cont’d

Flexibility was Key
Critical Care Orientation Program

- Eleven week program at Humber College
- Class and clinical component
- Completion of Critical Care Certificate
- Clinical component within the hospital with facilitator from MSICU or Nursing Resource Team (NRT)
MSICU Orientation Program

- 2 day MSICU specific education
- 1 day For Emergency procedures (defibrillation)
- Performance review with the APNE (Educator) at the end of the first year
- Unit Specific general orientation
Preceptor Program

• Four weeks with preceptor at the bedside
• Develop daily goals and learning needs
• Collaborative evaluation and assessment
(Step – Up Timeline)

Level 1
(0-3 months)

Level 2
(3-6 months)

Level 3
(6-9 months)

Level 4
(9-12 months)
Step-up Guidelines-Level 1

- 0-3 months
- Stable patient assignments
- Meet Basic ICU standards of practice:
  - Manage vasoactive drugs
- Transporting patients off unit
- Provide break coverage
- Assist with common ICU procedures
- Assist with therapeutic interventions
LEVEL TWO
SUG-level 2

- 3-6 months
- Stable post-op assignments (excluding lung tx)
- Assignments with complex HD monitoring
- Assist with emergent situations in the ICU
- Participate in family conferences
- Provide quality end of life care
SUG-level 3

- 6-9 months
- Stable post-op Lung Tx
- New admissions to the MSICU
- Complex vasoactive drug administration and HD monitoring
- Care for patients that meet the criteria for Organ Donation
SUG-level 4

- 9-12 months
- Care for HD unstable patients and multi-organ failure
- Care for patients requiring JET or HFO ventilation
- Function as Admission or Resource nurse
- Function as a Secondary RN with patients requiring extracorporeal therapies
Evaluation of the Step-up Guidelines

- Survey Monkey – email prompt
- 5 questions - face validity only
- Open questions
- Domains of inquiry:
  - Staff awareness of the guidelines
  - Satisfaction
  - Effectiveness
Results

- 68 new staff
  - orientated from January 2013 to October 2015
  - 48 nurses form MSICU
  - 20 nurses Consolidating in MSICU from Nursing Resource Team (NRT)
Survey Results Cont.’d

- 24 response rate (35%)

<table>
<thead>
<tr>
<th>Domain</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness</td>
<td>24</td>
<td>100%</td>
</tr>
<tr>
<td>Utilized consistently</td>
<td>12</td>
<td>50%</td>
</tr>
<tr>
<td>Helpful framework for clinical development</td>
<td>23</td>
<td>91%</td>
</tr>
<tr>
<td>SUG did not hinder their clinical progress</td>
<td>17</td>
<td>74%</td>
</tr>
</tbody>
</table>
Survey Results - Barriers

• Feedback not given to CN/PCC to gage comfort, competency & knowledge level
• Communication about individual nurses educational needs not met on a regular basis
• Inconsistent utilization to assignment planning
Survey Results Barriers Cont.’d

- No set preceptor to follow through the stages (point of care practice support)
- Large number of newly hired staff for CN/PCC to know who is who
Survey Results - Satisfaction

• Solidified learning of new knowledge and consolidation of newly acquired critical care skills gradually
• Utilizing SUG improves on comfort level/decreases anxiety levels
• Outlines expectations within a given time frame
• Allowed nurses to set learning goals & expectation
Future Directions

• Develop formalize mentor program—have mentor linked with new staff until one year is complete

• Change SUG from guidelines to a formalized program post training—better utilization

• Pre & Post evaluation to further evaluate effectiveness of using SUG
Future Direction Cont’d

• Plans for sustainability—planning for more resources?
• Better communication strategies
• Addressing barriers in a more timely manner
References


References Cont’d


References Cont’d


Questions?
Always remember that you are unique. Just like everybody else.