Maryland
MONL
Organization of Nurse Leaders

Program: Transition to Nurse Resident Program (TNRP)	**Updated:** 02/10/2021

Goal: Increase new to practice nurses' competence level (not necessarily confidence) entering hospital-based NRPs equal to their pre-COVID-19 pandemic counterparts.

The target learners consist of new to practice nurses entering Maryland hospital-based Nurse Residency Programs during the finite time of the COVID-19 pandemic. New nurses are entering with varying clinical experience, social and emotional needs due to the pandemic's impact (ONL & NLN, 2020). COVID-19 necessitated nursing schools to find alternate theory-based teaching strategies like virtual clinical and simulation to educate students in place of traditional on-site clinical experiences. The purpose of this curriculum is to develop specific skills and competencies that pre-licensure nursing students could not demonstrate and/or experience due to the reduction and/or cancelation of in-person clinical education in response to the pandemic.

The TNRP is a time-limited onboarding program to support new to practice nurses during the COVID-19 pandemic. Learning should take place in-person, using hands-on patient experiences or high/low fidelity simulation. Content is understood to be taught in the academic setting and return demonstrated in the practice setting. The content outlined by the learning objectives is demonstrated at a novice level to reinforce hands-on experiences disrupted during the pandemic.

Context (learner group, learner characteristics, style, developmental level, learning theory):
Participants are adult learners with a wide range of expertise, experience, and backgrounds. They uptake information using all four of Fleming and Mill's learning styles (Visual, Aural, Read/Write, and Kinesthetic) (Bastable, 2014). Further, the learners' development level ranges from young adulthood to middle-aged adulthood at the cognitive stage of formal operations (Bastable, 2014, p. 171). Cognitive learning theory drives this learning experience. Acquisition of knowledge and new skills requires a change in the learner's cognition (Bastable, 2014). Cognitive learning theory is active, directed by the learner, and "involves perceiving the information, interpreting it based on what is already known, and then reorganizing the information into new insights or understanding" (Bastable, 2014, p. 73). These principles help the learner to process this level of information.

Outcomes/ Objectives	Content Outline	Resources
By the conclusion of the program, the participant will be able to:		Included below is a sampling of resources to help support program implementation. Please note these are only suggestions, use is optional, and not all listed are free.

I. Demonstrate competence in fundamental nursing skills.	A. Isolation Precautions
	    a. Handling Soiled Equipment
	    b. Don and Doff PPE
	B. Hand Hygiene
	C. Vital Signs
	D. Point of Care Tests
	    a. Glucometer
	E. Handling Specimens
	F. Sharps Safety
	G. Patient Hygiene
	    a. Make Bed (with/without patient)
	    b. Bath
	    c. Toilet
	    d. Foley Care
	H. Ambulate/Transfer Patients
	    a. Foley Care
		Electronic resources:
		A. Online Cardionics- cost (aprox. $4,000)
		B. Respiratory Case studies and lung sounds- some free access
		
		Internal resources: (Clinical Rotation with multiple disciplines: Phlebotomy, Physical Therapy/ Shadow Time: Patient Care Tech)
		
		External resources: (Mosby's Text, Perry & Potter Text, Lippincott)

II. Demonstrate competence in communication skills.	A. Communicate with Patients
	    a. Introduce Self
	    b. Patient Identification/ Identifiers
	    c. Verbal/Nonverbal Behaviors
	B. Patient Education
	    a. Initiate and Update Plan of Care
	    b. Set Goals with Patient
	C. Communicate with Family
	    a. Communication of Plan of Care
	    b. Basic End of Life
		A. End of Life MCSRC simulation
		B. Staff Communication video
		C. ELNEC Curriculum Content
		D. TeamSTEPPS Communication Tools
		E. Internal resources (Clinical Rotation with multiple disciplines: Phlebotomy, Physical Therapy/ Shadow Time: Patient Care Tech, Unit Secretary)
		F. External resources (Taylor, Mosby's Text, Perry & Potter, Lippincott, TeamSTEPPS Webinars

	D. Communicate with Staff
	    a. Shift Report (Handoff)
	    b. Transfer of Care
	    c. Delegation
	E. Communicate with Other Disciplines
	    a. Report Patient Condition to Provider
	    b. Call Provider - SBAR
	F. Phone use & etiquette
	G. Documentation in EMR
	    a. Accurate Data Entry (i.e., intake and output)
	    b. Professional Writing
	H. Basic Communication with an Escalating Patient/Family
		active learning exercise for students. TeamSTEPPS: Handoff in Inpatient Surgical Teams
		https://www.youtube.com/watch?v=Cbvtk-slTyc
		
		Examples:
		Lynn, P. (2019). Skill checklists for Taylor's clinical nursing skills: A nursing process approach (5th ed.). Philadelphia: Lippincott Williams & Wilkins.
		
		Lynn, P. (2019). Taylor's clinical nursing skills: A nursing process approach (5th ed.). Philadelphia: Lippincott Williams & Wilkins.

III. Demonstrate competence in assessment skills.	A. Situational Awareness
	    a. Safety/Room Environment
	    b. Recognize an Escalating Patient/ Family
	    c. Recognize When to Seek Help
	B. Room Set-up & Use
	    a. O2
	    b. Suction
	    c. Bed Alarm
	    d. IV Pump
	    e. Other
	C. Recognize Changing Patient Condition
	D. Physical Assessment
	    a. Systems Assessment (head-to-toe)
	    b. Skin Assessment
	        i. Wound Care
	    c. Falls Risk
	    d. PIV Site Care
		A. Patient Assessment Simulation KSBN
		B. External resources (Mosby's Text, Perry & Potter Text, Lippincott)
		C. Internal resources (Clinical Rotation with multiple disciplines: WOC RNs, Code/RRT RNs)

| | | i. Discontinue PIV
    ii. Sharps Safety
E. Medication Administration
    a. Topical Medication Application
    b. Oral Medications (P.O.)
    c. IM and SubQ Injections
    d. IV Medications
    e. Antibiotic Administration (IV/PO)
        i. On Time
        ii. Lab Protocols
    f. NG/PEG Tube Medications
    g. Insulin Administration
F. Policy / Protocols
    a. Awareness/Location of Organization Policies and Access
    b. Professional Appearance and Attire
    c. Chain of Command | |

References

Bastable, S. B. (2014). Nurse as educator: Principles of teaching and learning for nursing practice. Jones & Bartlett Learning.

ONL/Organization of Nurse Leaders (Massachusettes, Rhode Island, New Hampshire, Connecticut, & Vermont) & NLN/Massachsettes/Rhode Island League for Nursing. (2020). *Supporting new nurse transition into practice during the COVID-19 pandemic* [PDF file]. Retrieved from https://onl.memberclicks.net/assets/docs/NewNurseGroupSupport/New_Nurse_Transition_Report_COVID-19_Pandemic.pdf