"New Graduate Orientation Evaluation: Are There Any Best Practices Out There?"

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Learning Objective

- The learner will be able to discuss current innovations, evidence, and research opportunities to evaluate orientation of the new graduate nurse.

Current State

- In the current nursing shortage, a time when healthcare needs to get innovative with hiring and retaining new graduate nurses, orientation can be a factor in a new graduate's decision to leave their place of employment.

- Efficient, cost-effective, and safe orientations with clear expectations are necessary; including orientation evaluation.

- There is, however, little guidance in the literature on best practices about completing an orientation evaluation.

- Although scarce, innovations and evidence do exist, as do research opportunities, and those are discussed during this presentation.

- The purpose of my project was to describe, based on the literature, current evidence that seeks to inform best practices to objectively evaluate orientation progress and completion.

Method: Scoping Review

- A scoping review has been described as a type of literature review that discusses available evidence about a broad topic, utilizing any applicable study design.

- Five stages in which to conduct a scoping review are utilized: (1.) identify research question, (2.) identify relevant studies, (3.) study selection, (4.) charting the data, and (5.) collating, summarizing, and reporting results.

- In order to describe and discuss the evaluation of new graduate orientation in the current literature, I conducted a scoping review.

- My review focused on answering the following questions:

  - What is the goal of orientation?
  - What theoretical aspects have been described to guide orientation?
  - What methods have been described for initial and ongoing evaluation, including competencies?
  - What tools have been used for monitoring progress?

Method: Scoping Review *(cont.)*

- The literature searches for this scoping review were conducted in CINAHL, Clinical Key, PubMed, Cochrane Database of Systematic Reviews, MEDLINE, Nursing and Allied Health Collection, Ovid Nursing Database, and Science Direct in November 2018 (Table 1.)

- Only articles published within the last five years were included, 14 papers were incorporated in the review. (Figure 1.)

Table 1: Search Terms

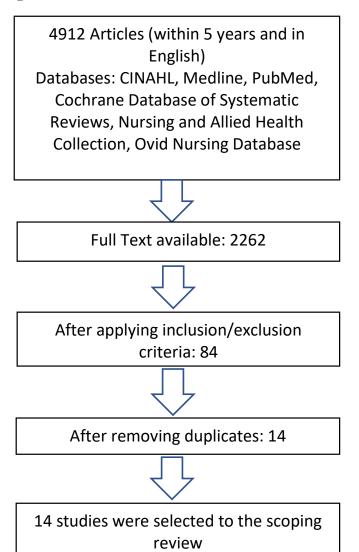| Database	Controlled vocabulary	Search terms	Number of identified articles
CINAHL	Subject headings/MeSH	SH "Transitional programs", SH "Orientation", SH "Evaluation", SH "Performance appraisal", SH "Competency"	n=1017
Cochrane	MeSH		n=0
Medline	MeSH	MM "Nurse", MM "Nursing", MH "clinical competence"	n=53
Nursing and Allied Health	Subject search	ST "Employee orientation", SD "Analysis", ST "Evaluation", SD "methods"	n=11
Ovid Nursing Database	MeSH	MeSH "Orientation"	n=1
PubMed	MeSH	Inservice training, employee performance appraisal, clinical competence, staff development	n=15

Note:

MeSH: Medical Subject Headings; MH: Major and Minor Heading (CINAHL); MM: Major Heading; SD: Subdivision; SH: Subject Heading; ST: Subject Term

Search Results

- Fourteen articles were included in this scoping review, mostly published in the United States (86%), Norway (7%), and Australia (7%).

- Also, the websites cited in this literature were included in the review (American Association of Critical Care Nurses, 2000; Quality and Safety Education for Nurses, 2007).

Figure 1. Search results

| 4912 Articles (within 5 years and in English) Databases: CINAHL, Medline, PubMed, Cochrane Database of Systematic Reviews, Nursing and Allied Health Collection, Ovid Nursing Database |

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| Full Text available: 2262 |

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| After applying inclusion/exclusion criteria: 84 |

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| After removing duplicates: 14 |

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| 14 studies were selected to the scoping review |

Findings: Goal of Orientation

The goal of orientation is to become an accomplished, competent advanced-beginner.

- Competency refers to organization/specialty specific skills and thus needs to be defined in order to determine what the learning process, including evaluation, looks like for a particular practice site (Martin & LaVigne, 2016).
- It is often expected that advanced beginners are able to use their experience to perceive the importance of a situation as a proficient nurse, but it is more reasonable to anticipate a new graduate to identify individual factors that make up a commonly seen situation (Benner, 2001).

Evidence is lacking in support of timeframes and use of checklists. (Martin & LaVigne, 2016).

There is no one way to merge priorities into one evaluation tool; **clear criteria for orientation progression is needed** (Martin & LaVigne, 2016).

There is no agreement how to **evaluate readiness, progression,** and **expected competency attainment**; this is an opportunity to be embraced (Martin & LaVigne, 2016).

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Findings: Theoretical Aspects

- Patricia Benner's (2001) classic theory 'From Novice to Expert' describes five stages of nursing skill attainment based on the Dreyfus model of Skill Acquisition

- Each consecutive stage focuses less on individual pieces of information to having more of an understanding of the whole situation including the ability to identify what information is relevant (Benner, 2001).

- Considering the attributes of each stage of skill attainment, the novice or advanced beginner focus for orientation evaluation criteria is appropriate (Spiva, Hart, Pruner, Johnson, Martin, *et. al.,* 2013).

- **An important aspect to consider** is, however, that depending on the new graduates' clinical experiences during their academic course, **they may be completely new to a practice area (novice) or come into their new role with some (advanced beginner) experience.**

Findings: Initial and Ongoing Evaluation

- **Evaluation of orientation**: Tests, meetings, and preceptor evaluation are three methods, identified in the literature, as innovations to determine completion of orientation (Jones, *et.al,* 2017; Martin & LaVigne, 2016).

- **Quality and Safety Education for Nurses' (QSEN) competencies** are recommended in the literature as a framework for initial nursing orientation evaluation.

- **Resources are needed** to create orientations that are safe for patients, cost effective, efficient, and with clear expectations, there is a necessity to advocate for more resources for nurse orientation, residency and ongoing professional development (Jones, *et.al,* 2017).

- **Unit orientation changes are needed** to objectively determine if outcomes were met. The American Association of Critical Care Nurses (AACCN, 2000) and the QSEN competencies (2007) offer frameworks that address the essential core competencies.

Findings: Competency Evaluation

- **Competency evaluation is more than watching a nurse perform a task one time and checking it off on a checklist. Consistent achievement of desired results is needed.**

- Each organization needs to define competency.

- Each domain of skill ability (i.e. technical, interpersonal, and critical thinking) needs to be evaluated, choosing a method to provide the best information about a nurse's practice (Martin & LaVigne, 2016, Wright, 2015).

- **Identified methods to consider for evaluation of a skill:** (Wright, 2015)
  - ✓ Tests
  - ✓ Return demonstration
  - ✓ Self-assessments
  - ✓ Peer review
  - ✓ Evidence of daily work

Findings: Tools for Monitoring Progression

- **Lasater Clinical Judgment Rubric (LCJR)** has been used to assess new hires' clinical judgment upon completion of a written case study and as a preceptor tool.
  - **Newly hired nurses:** The rubric is used to evaluate clinical judgment in a context-specific case study on: noticing, interpreting, responding, and reflecting. New hires are scored as beginning, developing, accomplished, or exemplary.
    - New hires with over 3 years of experience: higher levels of clinical judgment than new graduate nurses, showing a need to find ways of gaining experience more efficiently, such as with simulation and case studies. (Lasater, Nielsen, Stock, & Ostrogorsky, 2015).
  - **Preceptors:** Context-specific case studies can be used by preceptors as an objective method to evaluate clinical judgment during orientation.
    - The LCJR can be used as a framework in evaluating new graduate clinical judgment, in addition to giving feedback, and prioritizing (Nielsen, Lasater, & Stock, p. 89, 2016)

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Findings: Tools for Monitoring Progression *(cont.)*

- **Grading sheet:**

    - Evaluate where the orientee is at in relation to the expected behaviors. This includes addressing barriers to progression (Olmstead, Hoskins, MacCartney, & Little, 2013).
        - Expectations and grades can be reviewed and completed twice per week during orientation.
        - Grading range: green (expected), yellow (counseling needed, identify barrier) and red (immediate manager meeting) ranges.
        - Examples of outcomes : successful completion of orientation and transition of the orientee to another environment within the organization.

Conclusions

- Each organization needs to define competency; then effective methods and clear expectations of evaluation can be created.

- The current evidence, although sparse, does describe the challenge of orientation evaluation - laying the groundwork for research opportunities and practice change.

- Preceptor development is necessary in order to implement findings in this scoping review, in particular, how to give feedback and foster clinical judgment while juggling a patient assignment. There is a need for preceptor expectations to be more standard (Nielsen, Lasater, & Stock, 2016; Spiva, Hart, Pruner, Johnson, Martin, *et.al.,* 2013). These can be weaved into future plans for orientation development.

- Nurse residencies and transition to practice programs (e.g. with a focus on QSEN competencies) are found beneficial as well as partnerships between academia and practice to decrease the knowledge and experience gap. (Lasater, Nielsen, Stock, & Ostrogorsky, 2015; James, Patrician, & Miltner, 2017).

Recommendations

- Further research is indicated:

- **Outcomes of using grading sheets** to progress orientation in the moment or to counsel nurses in another direction are some of those areas; demonstrated evidence is needed to recommend as a best practice.

- Specific information on **what works in nurse residencies and transition to practice programs** was not found, which is another opportunity for future research (Lasater, Nielsen, Stock, & Ostrogorsky, 2015; James, Patrician, & Miltner, 2017).

- Empirical studies are needed to increase and strengthen current evidence, and especially **larger sample sizes** are required.

- Research regarding the **efficacy of organization specific orientation tools** with a focus on core competencies versus those available in public would be helpful, as this question was not found within the current literature.

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Questions?

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