

Task Layered Orientation for Nurse Residents

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PICOT Question

In Nurse (RN) residents, how does task-layered orientation compared to patient-layered orientation, influence the RN resident's overall confidence in their first six months of orientation?

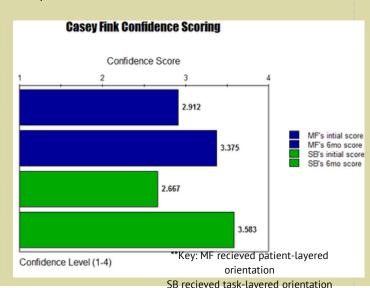
Evidence Summary

- "The tiered skills acquisition model equipment used, was a positive experience [...] orientees seemed to be more data confident and prepared." (Cantrell, Hessler, & McKenzie, 2022)
- "All of these changes contributed to decreased orientation times, fewer orientation extensions, less confusion among the preceptors and greater satisfaction in the orientation process." (Beamer, Jeffery, & Kromer, 2020)
- "The preceptee learns much about time management, prioritization, and managing a full patient assignment." (Nelson & Zimmerman, 2021)

Description of Change

While resident MF went through the traditional style orientation (patient-layered), resident SB experienced a "task-layered" orientation which included the following:

- Focus on task approach for entire patient load instead of layering by number of patients
- Ordered and grouped nursing task/duties by weeks-"phases"
- Set time frames and goals to accomplish
- Met at end of phase and decided if resident SB was confident in moving to next phase
- Included ungroupable or miscellaneous task as they presented i.e blood administration, lumber puncture assistance, NGT placement, vapotherm initiation etc.



Results

Data analysis of Casey Fink surveys showed, resident MF had an initial score of 2.9 on a 1 to 4 scale of confidence which increased to 3.375 after 6 months. This yields a 15.89% increase in confidence. Resident SB had an initial score of 2.66 on a 1 to 4 confidence scale and increased to a 3.58 after 6 months. This yields a 34.35% increase in confidence. In comparison, there is an 18.46% difference in the increase of confidence. This supports that the task-layered orientation increases the confidence of resident RNs. Data from this study may be skewed due to the limitation of resident SB's previous experience on the unit before conduction of this trial.

Recommendation

Based on the evidence of the study and the literature, it is recommended that preceptors and units take a task layered approach when orienting resident RNs for their unit. Each preceptor or unit educator can establish their own task and phases as appropriate to their unit to see an increase in their resident RN's confidence.

References

Cantrell, F.L., Hessler, K., & McKenzie, K., (2022) Task-layered clincal orientation for new graduate registered nurses. Journal of Nurses in Professional Development, 38(2), E13-18. doi: 10.1097/NND.0000000000000841

Beamer, J.C., Jeffery A.D., & Kromer, R.S., (2020) Imaging an orientation built on trust. Journal for Nurses in Professional Development 36(1), 2-6. doi: 10.1097/NND. 0000000000000602 Nelson, D.M., & Zimmerman A.R., (2021) Empowering preceptors: Implementation of an orientation record. Journal for Nurses in Professional Development 37(1), 56-60. doi:10.1097/NND.00000000000000715