



The Hospital Nurse Staffing Survey (HNSS) assesses the size and effects of the nursing shortage in hospitals, Texas’ largest employer of nurses. During the summer of 2017, the TCNWS administered the HNSS to 713 Texas hospitals. These included for-profit, nonprofit, public, and Texas Department of State Health Services-operated hospitals, as well as hospitals linked to academic institutions; military hospitals were not surveyed. The facilities surveyed were general acute care, psychiatric, special, and rehabilitation hospitals. 348 (48.8%) hospitals responded to the survey.

This report on transition to practice programs for newly licensed registered nurses (RNs) responds to the nursing community’s need to understand the challenges new nurses face and develop a means of easing their transition into nursing. Hiring practices of newly licensed nurses, hospitals’ efforts to help them acclimate to practice, and the benefits of doing so are presented herein.

Note: Analyses by Texas region and geographic designation are not included in this report, as survey respondents were not representative of all Texas hospitals, but responding hospitals are still comparable to previous years’ respondents. For more information, see the 2017 HNSS Design and Methods report.

Institute of Medicine’s *The Future of Nursing*¹

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 recommends that employers of newly licensed RNs seek to ease the transition by implementing transition

to practice 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.

In addition to newly licensed RNs, the 2017 HNSS added options for licensed vocational nurses (LVNs), advanced practice RNs (APRNs), nursing students, and experienced nurses participating in transition to practice programs.

¹Institute 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

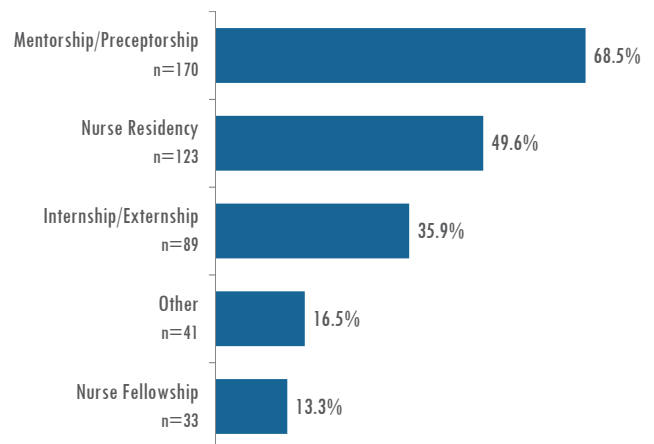
Transition to Practice Programs in Texas

Statewide, 71.3% of responding hospitals offered a transition to practice program for newly licensed RNs in 2017, compared to 65.2% of hospitals in 2016.

The 248 hospitals that reported having a transition to practice program in place were asked what kind of programs they had out of 5 options – nurse residency, nurse fellowship, student nurse internship/externship, mentorship/preceptorship, and other (Figure 1).

- Mentorship/preceptorship was the most commonly used transition to practice program.
- Most respondents reported having 1 (52.0%) or 2 (23.4%) types of programs. Only 4 hospitals reported having all 5 types of programs.

Figure 1. Percentage of hospitals with transition to practice programs by program type (n=248)



Other transition to program types described by programs included orientation (n=6), informal shadowing/training (n=3), LVN to RN transition (n=2), and monthly meetings (n=1).

Employment vs. Non-employment Models

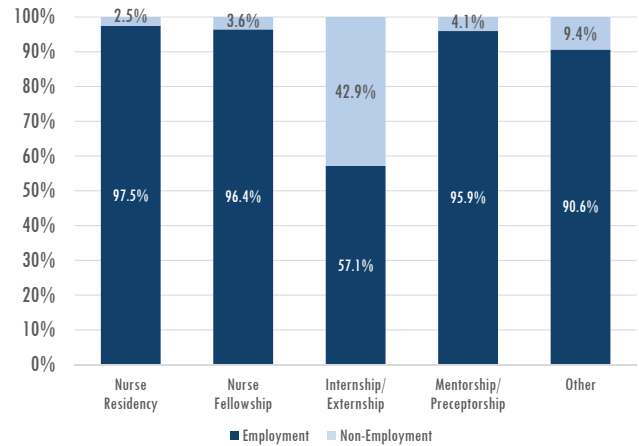
As part of understanding hospitals' transition to practice programs, each was asked whether their program paid transitioning nurses (the employment model) or whether their program was unpaid (the non-employment model), perhaps through participation with a nursing school or as an individual internship (Figure 2).

- Most programs used an employment model.
- Student nurse internship/externships were the least likely to use an employment model (57.1%).

Types of Nurses Eligible for Transition to Practice

Tables 1-3 show the types of nurses who were eligible for transition to practice programs.

Figure 2. Transition to practice program type by employment model type (n=232)



- Among all program types, RNs were the most common eligible nurse type.

Table 1. Types of nursing students eligible for transition to practice programs, by program type

Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Internship/Externship	Mentorship/Preceptorship	Other	
VN Students	n	-	-	19	-	3
	%	-	-	21.3%	-	7.3%
RN Students	n	-	-	80	-	3
	%	-	-	89.9%	-	7.3%

Note: n = number of hospitals responding that nurse types were eligible for their transition to practice program; % = the percent of hospitals offering each transition to practice program type who responded that nurse types were eligible for their transition to practice program

Table 2. Types of newly licensed nurses eligible for transition to practice programs, by program type

Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Internship/Externship	Mentorship/Preceptorship	Other	
Newly licensed VNs	n	20	-	-	65	11
	%	16.3%	-	-	38.2%	26.8%
Newly licensed RNs	n	115	-	-	134	19
	%	93.5%	-	-	78.8%	46.3%
Newly licensed/certified APRNs	n	-	2	-	17	4
	%	-	6.1%	-	10.0%	9.8%



Table 3. Types of experienced nurses eligible for transition to practice programs, by program type

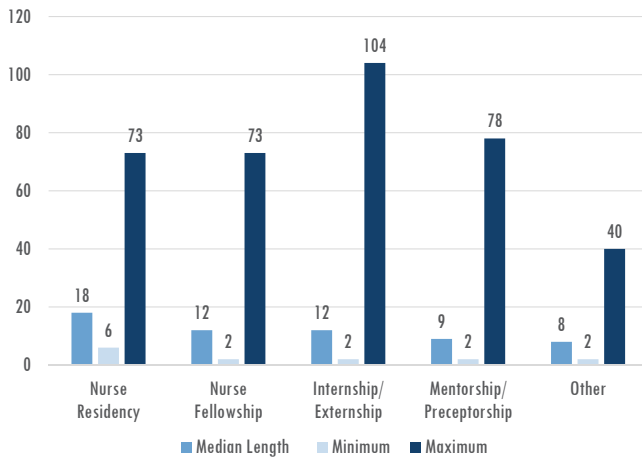
Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Internship/ Externship	Mentorship/ Preceptorship	Other	
Experienced VNs transitioning to new setting or specialty	n	-	7	-	60	9
	%	-	21.2%	-	35.3%	22.0%
Experienced RNs transitioning to new setting or specialty	n	-	28	-	126	23
	%	-	84.8%	-	74.1%	56.1%
Experienced APRNs transitioning to new setting or specialty	n	-	1	-	15	5
	%	-	3.0%	-	8.8%	12.2%

Length of Transition to Practice

Figure 3 shows the median length in weeks of transition to practice programs by program type.

- Nurse residency programs had the longest average length (18 weeks)
- Internship/externship programs had the widest range of lengths, from 2 to 104 weeks.

Figure 3. Median length and range in weeks of transition to practice programs by program type (n=212)



Participants in Transition to Practice Programs

Table 4 provides the number participants in transition to practice programs in the last fiscal year.

- Nurse residency programs had the most participants (4,016), followed by preceptorships/mentorships (3,104).

Table 4. Number of transition to practice participants by program type (n=248)

	n	# of Participants
Nurse Residency	90	4,016
Nurse Fellowship	20	276
Student Nurse Internship/Externship	63	2,794
Preceptorship/Mentorship	101	3,104
Other	20	576

Note: n = number of hospitals that reported participants

Transition to Practice Coordination

Hospitals were asked to identify how their transition to practice programs were coordinated (Table 5).

- 70 responding hospitals (29.7%) reported that a nurse manager was in charge of coordination.
- Other methods of coordination included education department (n=38) or some combination of CNO, DON, and nurse manager (n=7)

Table 4. Position in charge of coordinating transition to practice program (n=236)

	# of Programs	% of Programs
Dedicated transition to practice coordinator	46	19.5%
Chief Nursing Officer or Director of Nursing	44	18.6%
Nurse manager	70	29.7%
Other	76	32.2%

Reported Outcomes of Transition to Practice Programs

The same 248 hospitals with transition to practice programs were asked to indicate outcomes resulting from these programs (Table 6).

- The top 3 reported outcomes were the same as in the 2014 and 2016 HNSS: improved clinical competence in resident/patient care, improved clinical decision making abilities, and increased number of new graduates applying for RN positions.
- Other outcomes included increased focus on safety and increased compliance.

Table 6. Percent of responding hospitals reporting outcomes of transition to practice programs (n=219)

Transition to Practice Program Outcomes	# of Hospitals	% of Hospitals
Increased number of new graduates applying for RN positions in your organization	99	39.9%
Decreased turnover of newly licensed RNs in the first year of employment	93	37.5%
Improved clinical decision making abilities among first year nurses	111	44.8%
Improved clinical competence in resident/patient care among first year nurses	134	54.0%
Improved communication skills among first year nurses with physicians, other health professionals, staff, residents/patients, and families	71	28.6%
Improved organization and prioritizing skills in clinical practice among first year nurses	58	23.4%
Improved ability to incorporate research-based evidence in clinical practice among first year nurses	14	5.6%
Other	2	0.8%

Conclusion

Statewide, 71.3% of responding hospitals offer a transition to practice program for newly licensed RNs. Mentorship/preceptorship was the most commonly used transition to practice program, and most hospitals reported having 1 (52.0%) or 2 (23.4%) types of programs. Most programs used an employment model.

The most common outcomes of transition to practice programs were improved clinical competence in resident/patient care among first year nurses, improved clinical decision-making abilities among first year nurses, and increased number of new graduates applying for RN positions in the organization.