Universal Onboarding: Impacting Satisfaction and Turnover

Joanne Aberilla  
West Kendall Baptist Hospital, joannab@baptisthealth.net

Julia Caballero  
West Kendall Baptist Hospital, JuliaCa@baptisthealth.net

Follow this and additional works at: https://scholarlycommons.baptisthealth.net/se-all-publications

Citation
https://scholarlycommons.baptisthealth.net/se-all-publications/4953

This Conference Poster – Open Access is brought to you for free and open access by Scholarly Commons @ Baptist Health South Florida. It has been accepted for inclusion in All Publications by an authorized administrator of Scholarly Commons @ Baptist Health South Florida. For more information, please contact Carrief@baptisthealth.net.
Background / Significance

• While Nursing schools prepare students to pass board exams, burden to prepare nurse to practice falls on Clinical Nurse Educators (CNE).

• With high expectations from new graduate nurses, and onboarding experience feedback from former nursing residents, CNEs developed a universal onboarding process to bridge gap between school and expectations to safely practice in clinical setting.

Purpose / Goals / Objectives

• Purpose of initiative was to develop a remodeled new nurse onboarding structure through (CNE) conducting hands on learning as a supplement to residency program, aimed to better prepare new nurses to bedside practice and increase staff and educator satisfaction.

Methods / Implementation Plan

March 2022, CNE team fully implemented a universal onboarding (UO) process with nursing residents for concept learning events.

- Events included a sequestered week with CNEs conducting mock codes and a “show and tell” from interdisciplinary team members and physical assessments conducted on each other and rationales.

- UO concepts were based in evidence on Benner’s learning theory and Donna Wright competency principles which state that learners require experience to improve and focus on competency-based patient safety.

- Key to learning was “immersion” session added to clinical resident rotation involving working alongside interprofessional team members.

- Evaluation of learners’ experience included questions about what they learned and their satisfaction with program.

- Outcomes proved promising as residents from start of its implementation had provided positive feedback and were able to be released off orientation sooner than previous cohorts while expressing a better understanding of clinical practice concepts.

- Written evaluations revealed positive quantitative (see graph) and qualitative feedback (see word cloud).

- Incidentally, upon analyzing direct patient care nurse turnover data around time of initiative, turnover dropped from 14.11% to 5.81%, a 58.8% turnover reduction.

Results / Outcomes

- Immersive universal onboarding learning for new nurses is an effective preparation for safe bedside practice with a high degree of satisfaction and impact on turnover.

- Evaluation of learners’ experience included questions about what they learned and their satisfaction with program.

- Outcomes proved promising as residents from start of its implementation had provided positive feedback and were able to be released off orientation sooner than previous cohorts while expressing a better understanding of clinical practice concepts.

- Written evaluations revealed positive quantitative (see graph) and qualitative feedback (see word cloud).

- Incidentally, upon analyzing direct patient care nurse turnover data around time of initiative, turnover dropped from 14.11% to 5.81%, a 58.8% turnover reduction.

Discussion

- Immersive universal onboarding learning for new nurses is an effective preparation for safe bedside practice with a high degree of satisfaction and impact on turnover.

- Evaluation of learners’ experience included questions about what they learned and their satisfaction with program.

- Outcomes proved promising as residents from start of its implementation had provided positive feedback and were able to be released off orientation sooner than previous cohorts while expressing a better understanding of clinical practice concepts.

- Written evaluations revealed positive quantitative (see graph) and qualitative feedback (see word cloud).

- Incidentally, upon analyzing direct patient care nurse turnover data around time of initiative, turnover dropped from 14.11% to 5.81%, a 58.8% turnover reduction.

References
