

# ▶ RN Residencies for New Graduates

Finishing school and passing the NCLEX are major steps in your nursing career, but they are just the beginning. Making the transition from student to professional nurse also requires gaining additional knowledge and expertise in clinical skills, critical thinking, and professional role assimilation. How you begin your nursing career is an important decision for you and for the safety of your patients.

By Beth T. Ulrich, Charles Krozek, Suzie Reinsvold



## From Novice to Expert

Patricia Benner's model for developing nurses in a systematic fashion from novices to experts is particularly applicable to new graduates (Benner, 1984). Regardless of how good your nursing education was, it is almost impossible for you to attain all the knowledge and competence required to begin practicing as a professional nurse during your time as a nursing student. Clinical time is short. Exposure to all types of patients, diagnoses, and procedures is limited. As a student, you are not fully engaged as a part of the nursing team on a unit or in an organization. You need additional knowledge, skills, support, and nurturing to move forward from novice to advanced beginner and then progressively to becoming competent, proficient, and expert.

## What Is a Residency?

A new graduate RN residency provides a transition from nursing school to professional practice. Residencies are systematic, structured, and designed specifically to meet the needs of new graduates.

Most hospitals require that new graduates be licensed before they can participate in a residency. Because the residency costs the hospital in both the resources required to provide the residency as well as the salaries of the residents, many hospitals require that residents agree to work for the hospital for a set period of time after the residency.

## Why Do a Residency?

New graduate RN residencies have been shown to be advantageous to new graduates, healthcare organizations,



and ultimately to patients (Krozek, 2008). Residencies improve core competencies and increase the confidence of new graduates (Blanzola, Lindeman, & King, 2004); and the guidance and support they offer can help new graduates successfully cope with the many stressors and significant adjustments in the first year of practice (Casey, Fink, Krugman, & Propst, 2004; Fink, Krugman, Casey, & Goode, 2008; Symes et al., 2006). Formal, structured residencies have been shown to increase the likelihood that a new graduate will stay or want to stay in the organization (Beecroft, Kunzman, & Krozek, 2001; Newhouse, Hoffman, & Hairston, 2007; Pine & Tart, 2007; Salt, Cummings, & McGrath, 2008). Hospitals that have experience with residencies have also reported positive culture changes throughout the nursing division and beyond as the number of residency graduates in the organization increases (Hacker, Dechairo-Marino, Brooks, Lowery, & Siek, 2008).

## What to Look For in a Residency

There are several types of new graduate RN residencies available. Examples include the University HealthSystem Consortium (UHC)/American Association of Colleges of Nursing (AACN) Nurse Residency Program, the Versant RN Residency, and "home grown" residencies developed at individual hospitals (Nurse Executive Center, 2006). The following guidelines can be used to evaluate residencies that you are considering. A list of questions to ask about residencies can be found in the sidebar on page 27. It is also advantageous to talk with nurses who have completed the residencies you are considering.

## Structure

A structured systematic residency is important to your success. The National Council of State Boards of Nursing (NCSBN)/(2006), in a review of postgraduate strategies, determined that RN residencies must be carefully structured to be successful. Clearly stated expectations for competent performance are an important aspect of the structure (Santucci, 2004). The nurse recruiter or other persons with whom you interview should be able to provide you with the details of the

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hospital's RN residency including a calendar of events for the entire residency.

## Sufficient Length

The first year of practice is critical to a new graduate's future success, so the length of the residency program is important. In addition, studies have shown that new graduates are particularly vulnerable three to six months after starting to practice independently and when the stress level is highest. New graduate retention has been found to be high when residencies are three to six months in length (NCSBN, 2007; Salt et al., 2008).

## Content

Residency content should include nursing knowledge, skills acquisition and improvement, development of critical thinking skills, and professional practice issues. The content should be updated on a regular basis (at least annually and more frequently as indicated). The National Council of State Boards of Nursing (2007) has found that new graduates make significantly fewer errors when residency programs address specialty care. It is also important to understand the methods used in the residency for knowledge and skill acquisition, both routinely and when residents need additional help.

## Preceptors

Preceptors are critical to the successful transition from student to professional nurse. How preceptors are selected in the organization, whether they receive additional training in how to precept new graduates, how preceptors are assigned and for how long are important considerations.

## Mentoring

A formal mentoring experience is another critical element of a residency program. Mentoring is very important, especially in early parts of your career and later at key development and career path decision points. Mentoring can occur on a one-to-one basis or through small groups led by RN mentors.

## Feedback

Residencies should include systems that provide for timely, supportive, constructive feedback about your performance. Benner (2004) has noted that new graduates need support and constructive feedback in order to advance through each stage of professional development.

## Exposure to Other Departments

Guided exposure to other departments is an important component of a residency. Such exposure helps you understand the continuum of care for your patients, build skills that you may not be exposed to in your home unit, and develop relationships with

## Evaluating a Residency – Questions to Ask

- ▶ Is there a structured residency program for new graduates?
- ▶ Do all new graduates participate in the residency?
- ▶ How long is the residency? Is there a systematic way of providing the information and knowledge that each resident needs?
- ▶ What is the content of the residency? How often is it updated?
- ▶ Does the residency provide specialty content?
- ▶ How are new skills acquired? If a resident has difficulty mastering a skill, is there additional support available?
- ▶ Are there resource nurses available who can help residents develop critical thinking skills?
- ▶ Who serves as preceptors for the residents? Do they receive additional training in precepting?
- ▶ How are preceptors assigned to residents? How long does each resident have a preceptor?
- ▶ Is a mentoring process part of the residency? How does it occur?
- ▶ What is the system for providing feedback to residents?
- ▶ Does the residency provide guided experiences to other departments? In what areas?
- ▶ Is there added support (i.e., debriefing sessions) when stressful experiences occur (for example, the first exposure to death of a patient or ethical dilemmas)?
- ▶ Are there documented outcomes for the residency? What are some examples?

other departments that can result in improved communication and collaboration. Successful guided exposure experiences are pre-scheduled, have objectives, and have a person in each of the other departments available to work with the resident during the experience.

## Support for Transition

The transition from new graduate to professional nurse is a time of both personal and professional effects of

dence, and job satisfaction as well as the percentage of new graduates successfully completing the residency and continuing to work at the facility are indicative of overall residency outcomes and effectiveness.

## Your Responsibilities

By selecting you as a resident, an organization has committed its financial and personnel resources to assure that you have the knowledge and skills required to function competently and

how well the residency is working and what can be improved. If you identify problems or opportunities for improvement (for example, a preceptor or mentor relationship that's just not working well or a residency experience that could be improved), discuss them in a professional manner so that you can work together to solve the problem.

- **Pay it back.** Organizations that provide residencies want residents to become engaged in the work of nursing and the organization. You have a unique and valuable view and your engagement in the organization can help improve patient care and outcomes, and can enhance the professional nursing practice environment.
- **Pay it forward.** Not too long after you finish your residency, another group of new graduates will begin theirs. Then it's your turn to provide the nurture and support. More than anyone else in the hospital, you understand what new graduates are experiencing and can provide insight for them on the successful transition from student to professional nurse.

## Your Responsibilities as a Resident



- ▶ BE THERE
- ▶ BE HONEST
- ▶ ASK FOR HELP
- ▶ TAKE FEEDBACK CONSTRUCTIVELY
- ▶ PROVIDE FEEDBACK
- ▶ PAY IT BACK
- ▶ PAY IT FORWARD

stress (Fink et al., 2008; Kramer, 1974; Ulrich, 2003). Minimizing this stress is important for both new graduate nurses and their patients as new graduate stress has been related to practice errors (NCSBN, 2007). Successful residencies provide opportunities for residents to debrief with trained facilitators—to talk about the stresses they are experiencing and to receive timely support and coaching in self-care strategies to effectively deal with the stress.

## Documented Outcomes

Just as there are documented outcomes for patient care, so too should there be documented outcomes for residencies. Measures of residents' progress in areas such as knowledge application, skills acquisition, confi-

dently as an RN. By accepting the residency offer, you commit to assume certain responsibilities

- **Be there.** The residency is an intense time of learning. To get the most out of it, you need to be fully engaged in the residency every day.
- **Be honest.** Be honest with yourself, your preceptor, and your mentor about what you know and what you don't know.
- **Ask for help.** Commit to asking for help when you need it from preceptors, mentors, managers, and colleagues.
- **Take feedback constructively.** We all want to be excellent nurses. Being open to feedback is one of the best ways to improve performance.
- **Provide feedback.** Give your preceptors and managers feedback on

## Launching Your Career

A residency launches you in your career as a professional nurse. It is an investment for both you and your employer. For employers, providing a residency demonstrates their commitment to high-quality nursing care, patient safety, and contributing to the long-term career success of new graduate nurses; and it improves the likelihood that they will be able to recruit the best new graduates. For you, the residency sets the clinical and professional practice foundation for your entire career. It is a choice that needs to be made with much thought and deliberation. ©

## references

Beecroft, P.C., Kunzman, L., & Krozek, C. (2001). RN internship: Outcomes of a one-year pilot program. *Journal of Nursing Administration*, 31(12), 575-582.

Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park, CA: Addison-Wesley.

Benner, P. (2004). Using the Dreyfus model of skill acquisition to describe and interpret skill acquisition and clinical judgment in nursing practice and education. *Bulletin of Science, Technology & Society*, 24(3), 188-199.

Blanzola, C., Lindeman, R., & King, M.L. (2004). Nurse internship pathway to clinical comfort, confidence, and competency. *Journal for Nurses in Staff Development*, 20(1), 27-37.

Casey, K., Fink, R., Krugman, M., & Propst, J. The graduate nurse experience. *Journal of Nursing Administration*, 34(6), 303-311.

Fink, R., Krugman, M., Casey, K., & Goode, C.J. (2008). The graduate nurse experience: Qualitative residency program outcomes. *Journal of Nursing Administration*, 38(7/8), 341-348.

Hacker, M.D., Dechairo-Marino, A., Brooks, Y., Lowery, J., & Siek, T. (2008). Nurse leadership panel: The guiding light of visibility. Presented September 10, 2008 at the Versant Client Conference, San Diego, CA.

Kramer, M. (1974). *Reality shock: Why nurses leave nursing*. St. Louis, MO: Mosby.

Krozek, C. (2008). The new graduate RN residency: Win, win, win for nurses, hospitals, and patients. *Nurse Leader*, 6(5), 41-44.

National Council of State Boards of Nursing (NCSBN). (2006). *Transition report*. Chicago, IL: Author. Retrieved October 28, 2008 from [https://www.ncsbn.org/Final\\_06\\_Transition\\_Report.pdf](https://www.ncsbn.org/Final_06_Transition_Report.pdf)

National Council of State Boards of Nursing. (2007). *The impact of transition experiences on practice of newly licensed registered nurses*. Chicago, IL: Author. Retrieved October 28, 2008 from [https://www.ncsbn.org/07\\_Final\\_Impact\\_of\\_Transition.pdf](https://www.ncsbn.org/07_Final_Impact_of_Transition.pdf)

Newhouse, R.P., Hoffman, J.J., & Hairston, D.P. (2007). Evaluating an innovative program to improve new nurse graduate socialization into the acute healthcare setting. *Nursing Administration Quarterly*, 31(1), 50-60.

Nurse Executive Center. (2006). *Transitioning new graduates to hospital practice: Profiles of nurse residency program exemplars*. Washington, DC: The Advisory Board Company.

Pine, R., & Tart, K. (2007). Return on investment: Benefits and challenges of a baccalaureate nurse residency program. *Nursing Economics*, 25(1), 13-18, 39.

Salt, J., Cummings, G.G., & Profetto-McGrath, J. (2008). Increasing retention of new graduate nurses: A systematic review of interventions by healthcare organizations. *Journal of Nursing Administration*, 38(6), 287-296.

Santucci, J. (2004). Facilitating the transition into nursing practice. *Journal for Nurses in Staff Development*, 20 (6), 274-284.

Symes, L., Krepper, K.R., Lindy, C., Byrd, M.N., Jacobus, C., & Throckmorton, T. (2005). Stressful life events among new nurses: Implications for retaining new graduates. *Nursing Administration Quarterly*, 29(3), 292-296.

Ulrich, B.T. (2003). Successful strategies for new graduates. *Nurse Leader*, 1(6), 28-30.



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