American Association



Report of the UHC/AACN Post-Baccalaureate Nurse Residency Program March 2015

This report addresses the activities and progress of the UHC/AACN Post-Baccalaureate Nurse Residency Program (NRP) since October 2014. Highlights include: 1) 2015 Annual Outcomes Meeting; 2) NRP strategic planning; 3) Merger with VHA Inc.; and 4) Accreditation of nurse residency programs.

Annual Outcomes Meeting

The Annual Outcomes Meeting took place from March 3-5, 2015 in Scottsdale, AZ. Based on data shared at this meeting, a total of 40,823 residents are or have been residents in the current sites of the UHC/AACN Nurse Residency ProgramTM since its inception in 2002. The program is located in 30 states and the District of Columbia. This report was based on 5,631 residents hired between 1/1/2013 and 12/31/2013 who completed the program between 12/31/2013 and 12/31/2013, a total of 133 sites were active in the program.

The outcomes report also contains the following findings:

- The residents are, on average, 24 years old, 87% female and hired at the rate of 90/residents per year per institution (range 5 to 1000).
- Residents' overall confidence and competence as well as their perceived abilities in the areas of organization and prioritization and communication and leadership significantly increased during the program.
- Retention of residents is 95.8%, which greatly exceeds that conventionally reported for new graduates (87% nationally). Thirty sites had no residents leave during the program. Retention of even one graduate nurse/year could save the employing institution \$88,000 or more annually, depending on the local market factors, and costs in the areas of temporary replacement, recruitment, hiring and orientation.
- Transition to the professional role is impacted by a combination of the workload, expectations and a fear of doing harm. Peer support is the most satisfying aspect of the program; working with patients and their families is the most satisfying part of their work.
- Residents showed consistent and significant across the time in the program in Autonomy/Advocacy, Collaboration, Unit Engagement and Unit Leadership, while showing a decrease in Satisfaction. Even with a decline in satisfaction, they have a mean of 3.3 or greater out of 4. Using a 0–10 scale residents rate themselves on competence at mean of just over 4.4 at the start of the program and just over 6 at its completion.

- Residents evaluate the program at least 3 on a 4-point scale. More than 87% would recommend the program to others. A total of 97% participated in some evidence based research activity.
- Nurse Managers rated the NRP consistently at or above a mean of 3 (out of 4) on Institutional Benefit, Enhanced Resident Knowledge, Evidence-Based Practice Project Impact, and Leadership Contributions. They want more involvement in the program, more presence in communication loops, and greater involvement with the evidence-based practice project, which they review very positively.

NRP Strategic Planning

NRP strategic planning initiatives include:

- Revised the NRP curriculum (revision is done every three years). NRP consultants and coordinators utilized the 2008 *Baccalaureate Essentials*, the QSEN competencies, and *Core Competencies for Interprofessional Collaborative Practice* to perform a gap analysis and determine what revisions need to be made. The NRP curriculum is now online.
- Moved the NRP out of the research and IRB process and moving towards a benchmarking emphasis on quality outcomes approach. This change should result in an increased response rate for resident survey participation at the beginning, middle, and end of the residency program.
- Expanded the evaluation process of the NRP to include nurse managers' and chief nursing officers' feedback on the NRP. Preliminary results show a very positive response.
- Implemented two new survey tools: "The Nurse Resident Progression Survey" and the "The Post-Nurse Residency Survey" both of which will be proprietary to the program.

Merger with VHA Inc.

VHA Inc., the national healthcare network, and the UHC announced an agreement to combine into a single organization that will be the largest member-owned health care company in the country. VHA and UHC's combined breadth and depth of data and analytics will provide members unparalleled insight into improving the quality and total cost of care. The combined organization will offer superior access to leading practices, networking and knowledge sharing among its membership. Financial terms of the deal, which is expected close by the end of March 2015, have not been disclosed.

Deb Trautman and Kathy McGuinn had a conference call with UHC senior leadership on February 27 to discuss the merger. UHC's and AACN's commitment to the Nurse Residency Program was emphasized. All contracts will be reviewed as the merger proceeds; however no impact on the residency program is expected.

Accreditation of Nurse Residency Programs

CCNE currently accredits 14 residency programs and has 10 new applicant programs. Of the new applicant programs, three hosted on-site evaluations in Fall 2014 and will be considered by the CCNE Board of Commissioners in April 2015. One will host an on-site evaluation in Spring 2015 and will be considered by the CCNE Board of Commissioners in Fall 2015.

CCNE is currently undertaking a review and revision of the residency program accreditation standards. A standards committee has been appointed to guide this process. The committee recently circulated a Call for Comments, and the process is expected to continue through the Spring 2015.