Clinical Immersion: A New Transition to Practice Model

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Abstract

Background/Introduction
Health care is more complex, with high-level problem-solving abilities, and critical thinking required for nurses. Nurses are key decision-makers, entrusted with the ability to act. The question remains how do we develop this skill set in novice nurses? This issue is compounded by the "Great Resignation" in health care with few seasoned mentors to foster new nurses' transition into practice. Health care has suffered since COVID with a 30% loss of the nursing workforce (Poindexter, 2022) further limiting qualified diverse nurses to deliver care and support new graduates. Current health care instability leads to new nurses lacking confidence, knowledge, and skills to provide safe patient care (Serafini, 2023).

Purpose
The new model addresses current workforce issues, professional needs, and identified gaps. Implementation of the Clinical Immersion Program (CI) increases clinical program hours and gives students the opportunity to improve clinical judgement, communication, and confidence.

Methods or Processes/Procedures
The CI is a 12-credit/21-week experience where each student (CI Scholar) works with one registered nurse (CI Mentor) in a particular service line. The CI Scholar participates with the CI mentor in direct patient care, leadership, quality and safety activities for a total of 756 clinical hours.

Results
• 100% reported an increase in confidence • 88% reported an increase in ability to provide holistic and therapeutic communication • 93% reported improved interdisciplinary communication • 97% reported improved professionalism and accountability

Limitations
This program is in its inaugural year and refinements are part of the early stages within the continuous improvement cycle. CI mentor results are forthcoming. The CI adaptability, based on program type, school size, location, partnering hospital, and clinical mentors will be discussed.

Conclusions/Implications for Practice
Early self-reports indicate increased levels of confidence, communication, professionalism, and accountability. Next steps will explore if this leads to improved clinical judgement and transition to practice.

Biography

Dr. Torrie Snyder received her BSN from Carlow University in 2001, a Master's degree in nursing education from Waynesburg University in 2010, and her Ph.D. in Instructional Management and Leadership in 2018 from Robert Morris University. Torrie is an AACN Elevating Leaders in Academic Nursing Fellow. Dr. Snyder is Chair of Undergraduate Programs at Duquesne University in Pittsburgh, Pennsylvania. In her doctoral studies, she explored, "The Relationship between Admission Requirements, Academic Performance Measures and Undergraduate Nursing Student Success." Dr. Snyder has extensive experience working with high-risk students. Torrie's research interests are nursing student retention, increasing diversity in nursing, and mentorship.

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