

Background and Setting

Nursing unit culture and assimilation of nurses into a new practice setting, particularly for new graduates, have a profound effect on nurses' satisfaction, professional engagement and advancement, and on the overall practice environment and quality of care in the department.

Our setting is a 14-bed Neuroscience & Trauma Intensive Care Unit within a 536 –bed Magnet-recognized hospital which includes a Level II Trauma Center and Primary Stroke Center.

Purpose

Create a departmental environment of nurturing and caring skills and practices leading to improved job satisfaction for nurses, enhancement of the department's overall nursing practice environment, and improved assimilation of new registered nurses into the department as active, integral team members.



Action Steps

In 2010 departmental leadership recognized that the unit's history included low morale (reflected in its annual employee satisfaction surveys and National Database of Nursing Quality Indicators (NDNQI) surveys) and poor teamwork and staff support. To engage staff and leadership in transformation of the unit's culture, we chose to apply Watson's Caring Theory and Caritas Processes to new nurses and to existing staff who served as their preceptors and mentors.

These action steps included:

Welcome all new nurses prior to their arrival:

- send a welcoming message
- acknowledge their immediate value to our unit
- provide information on their schedule, unit expectations, and contact information for their preceptor and unit leadership . (Caritas Process 1)

Celebrate new nurses' arrival on our unit:

- introduce them to unit staff, physicians and other clinicians
- recognize their prior achievements (nursing school, experience in nursing, other careers and talents (Caritas Processes 1,2)

Thoughtfully value the precepting process:

- select preceptors and plan in advance
- attentively match new nurses to a single primary preceptor and identify a "back-up preceptor"
- communicate preceptor-orientee assignments early (Caritas Process 4)

Guiding Principles

Jean Watson's Caring Theory: Ten Caritas Processes™

1. *Embrace altruistic values and Practice loving kindness with self and others.*
2. *Instill faith and hope and Honor others.*
3. *Be sensitive to self and others by nurturing individual beliefs and practices.*
4. *Develop helping - trusting- caring relationships.*
5. *Promote and accept positive and negative feelings as you authentically listen to another's story.*
6. *Use creative scientific problem-solving methods for caring decision making.*
7. *Share teaching and learning that addresses the individual needs and comprehension styles.*
8. *Create a healing environment for the physical and spiritual self which respects human dignity.*
9. *Assist with basic physical, emotional, and spiritual human needs.*
10. *Open to mystery and Allow miracles to enter.*

Action Steps (continued)

- celebrate precepting as professional growth and as professional responsibility for practicing nurses.
- encourage new nurses to serve as preceptors at 10-12 months post-orientation to reinforce and recognize their own skills and contributions (Caritas Processes 2, 3, 6, 7).

Introduce and support ongoing professional growth goals and activities during and after orientation

- invite new nurses to attend and participate in Department Shared Governance Council (DSGC) meeting during orientation
- involve new nurses actively in unit and hospital activities
- promote national specialty certifications and national professional organizations membership and participation). (Caritas Processes 3, 6, 8).

Hire for cultural fit (empathy, compassion, communication, teamwork, respect) prioritized over entering clinical skills. (Caritas Processes 3, 8, 10)

Results

- Improvement in key clinical performance measures

Measure	2010	2013
Foley Catheter Utilization (Days)	3,068	2,138 -30%
CAUTI Rate	5.35	1.38 -74%
CLABSI Rate	1.76	0 -100%
VAP Rate	6.68	2.38 -64%

Results (continued)

- Dramatic improvement in professional environment measures

Measure	2009	2010	2011	2012	2013
NDNQI Practice Environment Score and Approximate National Percentile Rank	2.64 ~10 th percentile	3.05 ~73 rd percentile	3.28 ~94 th percentile	3.22 ~88 th percentile	3.53 >95 th percentile
Cone Health Employee Partnership Score and Approximate National Percentile Rank	N/A	67.1 38 th percentile	74.8 61 st percentile	79.1 75 th percentile	82.8 85 th percentile

- Significant growth in measures of staff's professional engagement

Measure	2009	2010	2011	2012	2013
Percentage of Department nurses holding National Professional Specialty Certification	6%	8%	18%	24%	64% (78% in 2014)
Department Nurses advancing in Cone Health clinical career ladder	3%	3%	3%	6%	14%

Discussion

These outcomes validate previous literature and demonstrate the value and impact of intentional caring behaviors in creating a positive nursing practice environment. Application of Watson's Caring Theory and Caritas Processes to nursing unit staffs can yield significant improvements in the nursing practice environment at minimal implementation cost.

References

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