

Here one day, gone the next: Solving the new nurse burnout puzzle



Why is burnout so high among new nurses?

A healthcare organization's ability to retain new nurses—and quickly make them proficient, productive members of the nursing staff—has a direct impact on the quality and efficiency of care delivery, not to mention patient satisfaction.

However, hospitals find themselves facing a number of pressures that directly impact their ability to retain new nurses and empower them to contribute positively to patient care.

While the ongoing nursing shortage has spurred an increase in nursing programs at community colleges, opportunities to gain an appropriate amount of real-life clinical experience have not kept pace. As a result, today's nurses are not only coming from a variety of academic backgrounds, they also begin their professional careers with different levels of knowledge and a varied understanding of practice expectations.

The digitization of licensing exams creates another double bind. Enabling nurses to receive their results in weeks, instead of the four to six months it previously took, does mean they're able to become licensed RNs quicker. That said, it also gives nurses fewer chances to build their skills and confidence through hands-on experience before they're thrust into high-pressure care environments.

Therefore, effective training and support are critical to helping new nurses build their professional skills and prevent burnout, which lead to a cycle of costly turnover.

Too often, though, hospitals encourage individual nurse educators to build their own, unit-specific training programs. Not only does this lead to inconsistencies in terms of how key concepts are taught, it also relies too heavily on expertise that may not always be available.

Moreover, this static, overly broad curriculum fails to capture and replicate the realities new nurses face on the hospital floor. Evaluating new nurses can be difficult, as well. When feedback is collected informally—and not always in person—nurse leaders may not have the clearest picture of where new nurses are struggling or the critical issues they're facing.

Together, pre-set training and inconsistent evaluations threaten to leave nurses feeling frustrated, under-supported, and unsure of themselves and their abilities. Turnover can accelerate as a result, driving up costs while jeopardizing patient satisfaction, safety, and outcomes.

Avoiding these issues requires standardized, evidence-based training that is both more engaging and better aligned with the situations individual nurses find themselves in each day. But to do this correctly, hospitals must first address:

- **Ineffective, overly broad onboarding programs that don't capture the demands of patient care**
- **Gaps in the assessment and communication process that accelerate burnout**



Effectively preparing nurses for the rigors of patient care

Driven by a growing number of patients with comorbidities and complex treatment requirements, new nurses find themselves entering into an extremely challenging care environment. Despite this, the patient-to-nurse ratio is higher than ever. The resulting stress and uncertainty often pushes new nurses to look to their more experienced colleagues for guidance. But that tactic tends to introduce inconsistencies into care delivery.

Longtime nurses may offer coaching and information that differ from what new nurses learn in their coursework. Practice variation across individual units further increases inconsistencies—and adds to new nurses' stress and frustration. Clinical lessons delivered in static presentation and lecture formats can also leave residents feeling unprepared, as they might not accurately reflect how nurses should work with their team members to care for high-acuity patients.

Between an accelerated licensure process and veteran nurses retiring at a steady rate, new nurses have less time to develop their confidence and professional skills. If hospitals aren't equipped to provide the appropriate levels of support, they could endanger patient safety, see lower HCAHP scores, and experience higher rates of turnover.

Due to the retirement of veteran nurses and health systems getting strained by the coronavirus pandemic, 6 million new nursing jobs will be needed by 2030.¹



To help new nurses make positive contributions to their team members and patients alike—and stem turnover—it's crucial for hospitals to implement broad measures that increase nurses' self-confidence and willingness to tackle complex clinical challenges. Doing this effectively takes immersive, evidence-based training that replicates critical, real-world care scenarios—topics and situations that are critical to nurses' ability to interact with care teams and patients. Finally, new nurses need self-service learning tools they can freely refer to whenever they want to reinforce and strengthen their knowledge.



1 in 5 nurses leave their first job within 12 months.²

Reducing new-nurse burnout

Nursing leaders play a crucial role in guiding new nurses through their transitions to clinical practice. Unfortunately, though, these leaders don't always have the clearest picture of how nurse residents are performing or the issues they're experiencing each day. While they may be able to see how well a particular unit or facility is doing, this level of visibility doesn't always extend to individual nurses.

This inability to identify where new nurses need help can leave them feeling alone and unsupported. And although nursing leaders may look to regularly scheduled residency group meetings as a means of capturing feedback and addressing concerns, those sessions rarely reveal the full picture. New nurses may hold back in such a setting because they don't want to appear unknowledgeable or uncertain in front of their peers.

While this is an understandable mindset—especially for the newest members of the team—it can mean that a nurse leader may only learn a new nurse was poised to leave after it's too late. With no advance warning, there's little opportunity to intervene, remediate any issues, and prevent new nurses from departing. And that can put hospitals into a costly, continuous cycle of turnover—and could even discourage motivated candidates from entering their residency programs.

To prevent burnout before it begins, hospitals need access to timely insights that can help nursing leaders more effectively support the newest members of their teams. That means providing reporting capabilities to easily identify when and where new nurses are struggling in their coursework, so nurse leaders can deliver targeted, effective coaching at the moment it's needed most. And to make it easier for new nurses to share concerns and surface issues, hospitals should provide intuitive survey and journaling tools that encourage self-reflection—and deliver their feedback directly to nursing leaders. This feedback should be complemented by guidance that prompts leaders when to intervene, helping them deliver timely support and promote greater satisfaction among those in the residency program.



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Ensuring a smooth transition to clinical practice

Attempting to educate, support, and nurture an entire nursing team with a static, pre-set curriculum hinders learning and productivity—and accelerates burnout.

To limit the potential for burnout—while making sure new nurses build their confidence and resilience—hospitals must be able to simulate the type of complex care situations new nurses often experience, so they can practice and learn in a safe environment. They need to promote routine self-reflection, as well as daily communication between nurse residents and their leaders, to foster a more supportive environment. Meanwhile, nurse leaders require timely insights to know how new nurses are progressing, so they can identify learning challenges at the cohort and individual levels, employ targeted remediation measures, and track the impact of these efforts.

And that's why hospitals are turning to Elsevier.

With Elsevier's Transition to Practice, hospitals will be better equipped to help new nurses build their confidence and understanding of how to use consistent, evidence-based practices when caring for patients across units. They'll encourage self-reflection and more frequent communications between nurses and their support team. And they'll empower nursing leaders to offer timely guidance and support to address a specific nurse's struggles or concerns.

With Elsevier Transition to Practice, healthcare organizations can:

Boost new nurse confidence and readiness:

By pairing immersive virtual learning with evidence-based curriculum and resources, new nurses can rapidly develop their professional skills, improve their confidence, and position themselves to become the next generation of nurse leaders.

Improve new nurse support through timely insights:

By providing nurse leaders with timely insights, they'll be able to take more meaningful and tailored actions to support nurse residents, helping to reduce burnout, promote better patient outcomes, and ultimately deliver greater value to the organization.

To learn more, please visit elsevier.com/transition-to-practice.

1. On World Health Day, New Report Says the World Needs 6 Million More Nurses, World Economic Forum, April 7, 2020
2. Want to Keep Nurses at the Bedside? Here's How, Jennifer Thew, RN, HealthLeaders, March 27, 2019



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