Introduction

Nurse satisfaction with professional development influences overall job satisfaction, intent to stay and nurse turnover.\(^1\)\(^5\)

Turnover costs the average US hospital up to six million dollars.\(^6\)

Results from a 2017 NDNQI satisfaction survey at project benchmark showed 69% of all units scored below benchmark for professional development. Units below benchmark on the professional development domain also ranked below benchmark on overall satisfaction.

Nurse turnover increased to a historical level; 54% of the turnover occurred in nurses with less than 3 years experience.

Literature synthesis recommends a structured, yet iterative intervention to enhance professional development with leadership support.\(^2\)

Purpose and Aims

Improve new graduate nurses’ knowledge and satisfaction with their professional development opportunities utilizing a professional development-tracking tool coupled with coaching sessions. Also, improve professional development self-efficacy

Methods

Design/Setting: Paired pre-and post-test QI design; 23-bed inpatient telemetry unit/large academic medical center.

Sample: Nurses 6 to 36 months experience (N=5); Nurses with less than 6 months or greater than 36 months excluded

Intervention: Professional tracking tool was coupled with coaching sessions over twelve weeks.

Tools

- Professional Development Qualities 15-item Likert Pre- and Post-test Survey.
- IBM SPSS Statistics, Version 26
- Evidence-based professional development-tracking tool.

Results

- Descriptive statistics showed overall improvements in median knowledge, satisfaction and self-efficacy summary scores.
- Bachelors’ prepared nurses showed the highest overall improvements.

Conclusion

- Coaching coupled with an evidence-based tracking tool provides an iterative and structured approach can enhance professional development in early tenured nurses.
- Expansion of future study to include larger sample size and diverse clinical settings will improve scalability of findings.

Dissemination Plan: Organizational engagements with nurse leaders/frontline RNs; abstract submissions to ANPD and MAGNET conferences; submission for publication in Journal for Nurses in Professional Development.

Baseline Demographics of Sample

<table>
<thead>
<tr>
<th>Demographic characteristic</th>
<th>(N=5)</th>
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</thead>
<tbody>
<tr>
<td>RN experience in months, median (IQR)</td>
<td>26 (3)</td>
</tr>
<tr>
<td>Pre-licensure nursing degree, n (%)</td>
<td>2 (40.0)</td>
</tr>
<tr>
<td>Associates degree</td>
<td>2 (40.0)</td>
</tr>
<tr>
<td>Bachelors’ degree</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Masters’ degree</td>
<td>1 (20.0)</td>
</tr>
<tr>
<td>Other</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Nursing as first career, n (%)</td>
<td>5 (100.0%)</td>
</tr>
<tr>
<td>Yes</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>No</td>
<td>0 (0.0%)</td>
</tr>
</tbody>
</table>

Note. IQR=intenquartile range

Comparison of Pre and Post-Test Median Summary Scores

Knowledge Outcome

- Median summary scores shift 7.0 (IQR 0) to 5.0 (IQR 0)
- Shift to lower score reflects improvement- 28% increase
- Bachelors prepared nurses showed highest improvement

Satisfaction Outcome

- Median summary scores shift 4.0 (IQR 1) to 2.0 (IQR 1)
- Shift to lower score reflects improvement- 50% increase

Self-Efficacy Outcome

- Median summary scores shift 25.0 (IQR 5) to 19.0 (IQR 3)
- Shift to lower score reflects improvement- 24% increase
- Bachelors prepared nurses showed highest improvement

References

7. IBM SPSS Statistics, Version 26