

Walden University

College of Nursing

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Lauren Williams

has been found to be complete and satisfactory in all respects,
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Walden University
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Abstract

Applying Duchscher's Role Transition Theory to Reduce Novice Nurse Turnover

by

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MSN, California University of Pennsylvania, 2017

BSN, University of Pittsburgh, 2008

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2023

Abstract

The identified gap in practice was teaching graduate nurses about the phases and barriers outlined in Duchscher's role transition theory. The practice-focused question that guided the project addressed whether a staff education program applying Duchscher's role transition theory would provide the needed knowledge in preparing the graduate nurse for transition to novice nurse. The project included identical pre- and post surveys and a staff education program. Twenty participants selected a Likert response to each of the four questions: I feel prepared for the transition from graduate nurse to novice nurse, I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse, I understand the importance of maintaining a healthy self-care routine, and I feel comfortable asking for feedback. For each question, score range, improvement in response scores, score frequency, totals, standard deviation, and z scores were calculated. An overall increase in score total after the program was noted for each question. For the first question, the total increased from 70 to 81. For the second question, the total increased from 73 to 85. For the third question, the total increased from 89 to 95. For the fourth question, the total increased from 85 to 91. These results indicate that the education program was effective in helping graduate nurses feel more comfortable and knowledgeable about their transition to novice nurses.

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Section 1: Nature of the Project

Turnover of nurses, both experienced and novice, is a problem facing the United States (Lippincott Solutions, 2017). More specifically, this is a problem in the acute care setting with improved support and guidance during the role transition period cited as a potential retention strategy (Lockhart, 2020). Although many interventions are in place to try to retain novice nurses, the way in which hospitals are supporting them is not effective, as evidenced by the fact that 18% of them either change jobs or leave the profession within their first year after graduation (Lockhart, 2020).

This doctor of nursing practice (DNP) project included a staff education program for graduate nurses transitioning to novice nurses based on Duchscher's role transition theory. Within the project setting, this staff program sought to decrease distress for participating nurses during their transition from graduate nurse to novice nurse. With increasing external pressure on hospitals to provide high-quality cost-efficient care, there is a business case for improving nurse retention because it is positively correlated to patient outcomes (Murray et al., 2019). Addressing this problem may produce positive social change by contributing to the nursing workforce sustaining itself by retaining novice nurses who provide care to members of the community.

Problem Statement

This doctoral project may enhance the experience of graduate nurses during their first year off orientation. Although interventions were in place in the project setting to orient the graduate nurse to the organization and to the nursing profession, including a nurse residency program, turnover rates indicated these interventions were insufficient.

This staff education program was designed to help participating nurses feel more prepared to face the developmental challenges of their first year as a nurse. During monthly check-ins, graduate nurses expressed angst about their performance, their role within the team, and the increased responsibility associated with transitioning from graduate nurse to novice nurse. By attending the staff education session that addressed these concerns and actions the graduate nurse can take during each developmental milestone outlined in Duchscher's role transition theory, the graduate nurse experience was optimized within the local practice environment.

In response to this problem and building on the foundation of Duchscher's role transition theory, which establishes developmental milestones in the transition from graduate nurse to novice nurse, this doctoral project addressed the gap in practice through implementation of a staff education program for graduate nurses. The staff education session provided an overview of the developmental milestones outlined in Duchscher's role transition theory and actions that the graduate nurse can take to decrease distress and promote engagement within the work environment.

The issue of nurse retention for the organization and for the field of nursing practice is an important one, with the cost of replacing one nurse estimated between \$82,000 and \$88,000 (Dwyer et al., 2019). As external pressure mounts for hospitals to improve quality outcomes, a business case exists for the nursing profession to solve the retention issue because higher turnover rates are negatively correlated to patient outcome metrics (Murray et al., 2019). National turnover data showed that the way in which organizations are onboarding and supporting graduate nurses is ineffective for retention

(Lockhart, 2020). This doctoral project, while performed at the local level, has the potential to impact the way in which graduate nurses are educated and supported during their first 12 months off orientation. There are potential implications to adjust the curriculum for the senior year capstone clinical class in the bachelor of science in nursing program (Duchscher, 2009). Effectively educating and supporting graduate nurses has the potential to improve their overall experience and retain them within the profession, their organization, and their local units.

The idea for this DNP project was conceived prior to the Sars COVID-19 pandemic affecting the United States in 2020. Prior to the pandemic, there was a global nursing shortage, which was exacerbated by the pandemic and its sequelae (International Council of Nurses, 2021). Although this doctoral project did not correct the conditions imposed by the pandemic, the staff education sessions helped graduate nurses feel better prepared to continue in the workforce while caring for themselves and maintaining positive engagement with their work environment.

Purpose Statement

The purpose of this doctoral project was to improve the experience of graduate nurses by decreasing distress associated with role transition from graduate nurse to novice nurse by providing a staff education program. The meaningful gap in practice that this doctoral project addressed was application of Duchscher's role transition theory, which outlines challenges and milestones the graduate nurse can expect to experience and achieve in their first 12 months off orientation (Duchscher, 2008, 2009). The guiding practice-focused question was the following: Will a staff education program applying

Duchscher's role transition theory provide the needed knowledge in preparing the graduate nurse for transition to novice nurse? This project addressed the gap in practice by employing a staff education program centered on Duchscher's role transition theory, which aided graduate nurses in their transition to novice nurse by providing them with information on what to expect during their first year off orientation. For each developmental challenge outlined by the theory, the staff education program provided the novice nurse with an associated action item to help them overcome the challenge.

Nature of the Doctoral Project

Education on the developmental milestones during the first year as a nurse is not something that is currently included in the onboarding curriculum. Eligible nurses within the practice environment were offered the same survey before and after the education program. The de-identified survey addressed graduate nurses' comfort with their role transition and their knowledge of expected milestones during this transition. The primary source of evidence was anonymous, voluntary, pre- and postsurvey data obtained from novice nurses who participated in the education program. These identical surveys gauged the effectiveness of the staff education program by asking questions related to the novice nurse's awareness of what developmental barriers they can expect to overcome during their first year off orientation.

A review of the literature indicated that up to 24% of nurses turn over in their first year of practice (Plescia, 2021). Lockhart (2020) noted that 18% of new nurses change jobs or leave the profession in their first year. A negative relationship between quality metrics and nurse turnover was observed (Murray et al., 2019). Gardiner and Sheen

(2017), who cited Duchscher (2009) several times in their publication, reported that new nurses require frequent feedback on their performance. This regular feedback serves the purpose of decreasing the nurse's anxiety and helping them develop their professional identity (Gardiner & Sheen, 2017).

Databases used to search the literature included CINAHL, MedLine, EBSCO Discovery Service, and PubMed via the Walden University Library. Google Scholar was also used. Search terms included *novice*, *nurse*, *retention*, *turnover*, and *role transition*. Except for literature that established theories on which this DNP project was based, database searches were limited to literature published between 2015 and 2020. This project also included using the Walden University Staff Education Manual. Although Duchscher's role transition theory is well documented in the literature, the identified gap in practice was educating novice nurses about this theory to better prepare them for their first year of professional nursing practice. The DNP project was developed to address the gap.

Significance

The primary stakeholder for this project was the graduate nurse. The project had a positive impact on graduate nurses' education about developmental milestones associated with the transition from graduate nurse to novice nurse, and decreased graduate nurses' distress during this transition. On a larger scale, the organization was a stakeholder. From a financial perspective, preventing one nurse from leaving their position, even if to transfer from one hospital within the organization to another, can save the hospital \$82,000 to \$88,000 (Dwyer et al., 2019). When quality outcomes were considered, the

patient also became a stakeholder because improved nurse retention is related to more favorable patient outcomes (Murray et al., 2019).

Graduate nurses demonstrated the effectiveness of this education program in preparing them for transition to novice nurses. There is the potential to impact the onboarding process within the organization. Although core nursing education components occur on a broader scale within the organization during the onboarding period, the cultural onboarding occurs on the unit level. Implementing this education program on a broader scale may not only impact retention but also improve the experience of the novice nurse. The didactic content of this doctoral project is transferable within the organization to train nurse leaders, nurse educators, and nurses who will serve as preceptors to graduate nurses. In my experience, of these three groups, nurse educators are the only ones to focus not only on content and skill development but also on the overall experience of the novice nurse.

The local community depends on the availability of quality acute health care, which is largely driven by nurses. As the nursing shortage continues, which has been a problem since 1998 (Juraschek et al., 2019), the population continues to age and older nurses continue to retire (Waltz et al., 2019). This project was undertaken to better serve novice nurses, which in turn may improve nurse retention and have a positive impact on the ability to provide the community with quality acute care. This aligns with Walden University's mission for social change, which aims to "benefit the communities we serve" (Walden University, 2020, para. 4). Attrition of nurses is expensive, negatively

impacting individual departmental operations and budget, and also negatively impacting the cost of health care as hospitals spend money on replacing nurses.

Summary

Nurse turnover is a national problem (Lippincott Solutions, 2017). Although interventions are in place to retain graduate nurses, literature suggested the way in which organizations are supporting them is not adequate, as evidenced by 18% of them either changing jobs or leaving the profession within their first year after graduation (Lockhart, 2020). This doctoral project was undertaken with the primary goal of improving the experience of the novice nurse, and thereby improve nurse retention within the organization to better serve the community. Section 2 provides in-depth review of Duchscher's role transition theory, including phases and developmental milestones associated with each phase. Additionally, terms are operationalized and clarified, and more details of the DNP project are provided.

Section 2: Background and Context

Nurse turnover rates are a national and local problem (Lippincott Solutions, 2017). Providing a staff education program was a strategy to assist in the role transition from graduate nurse to novice nurse. The staff education program included Duchscher's role transition theory to provide the needed knowledge. The practice-focused question was based on the problem of nurse turnover. The purpose of this doctoral staff education project was to decrease distress and improve the experience of graduate nurses during their role transition to novice nurse. Section 2 introduces Duchscher's role transition theory, discusses the relevance of the project to nursing practice, provides the local background and context, and presents my role as the DNP student in this staff education project.

Concepts, Models, and Theories

The primary theory informing this doctoral project was Duchscher's role transition theory, which posits that during the graduate nurse's first 12 months off orientation, the nurse will progress through three phases: doing (also known as transition shock), being (also known as transition crisis), and knowing (Duchscher, 2008). Each phase is characterized by milestones, feelings, and behaviors as well as external expectations (Duchscher, 2009). It is the sense of shock that is thought to contribute to turnover (Duchscher & Windey, 2018). This theory was applicable to the local practice environment and to the doctoral project. Because Duchscher's role transition theory applies to graduate nurses, it was the foundation of the staff education program. Because this theory includes milestones within the nurse's first year off orientation and provides

an estimated time line on which these milestones will occur, it was suitable for building an education program to not only decrease distress in novice nurses but also encourage an engaged generation of nurses within the organization. The intention of the staff education program was to provide participating graduate nurses with information regarding the emotions and barriers they will experience during their first year and suggested actions they can take during each phase to practice self-care while promoting engagement in their work environment.

After 10 years of research, Duchscher (2008) established the role transition theory, which applies to nurses making the transition from student to professional, occurs in three phases, and spans the first 12 months of independent practice after orientation. The first phase (doing) is also referred to as transition shock because the novice nurse experiences a variety of emotions preceded, in part, by the shock of a full patient assignment equal in complexity to that of a more experienced nurse. An additional shock associated with this stage is tending to nonclinical tasks, including clerical duties such as answering the unit phone. From a skills development perspective, the result of novice nurses caring for assignments equal in complexity to their more experienced peers results in the novice nurse becoming task and time oriented and struggling to see the bigger picture of their patients' care. Preoccupied with fitting in, novice nurses report not feeling comfortable expressing feeling overwhelmed (Duchscher, 2008). Transition shock spans the first 3 to 4 months off orientation (Duchscher, 2008; Duchscher & Windey, 2018).

The second phase of Duchscher's role transition theory (being), also referred to as transition crisis, occurs during Months 4 through 5 after orientation and is characterized

by the nurse separating their identity from the profession, questioning the profession, and subsequently reengaging with the profession (Duchscher, 2008). One of the hallmarks of this phase is the nurse feeling more comfortable asking questions of their more experienced peers to confirm their own thought processes, rather than for prescriptive direction (Duchscher, 2008). The nurse further experiences a new awareness of what they do not know, despite an awareness of knowledge and skills gained in their first several months as a professional nurse. Consequently, the nurse experiences a waning of their confidence (Duchscher, 2008).

The final phase of Duchscher's role transition theory (knowing) is characterized by a stabilization of the nurse's professional identity as well as a continued desire for work-life balance. This search for balance may be characterized by a desire for a decrease in shift work. During the third stage, the nurse also possesses a more conscious awareness of their work environment, which may lead to criticism of that environment (Duchscher, 2008).

Clarification of Terms

The focus of this staff education program was on the graduate nurse. *Graduate nurse* was defined as a nurse in their first year of practice in their first position as a professional nurse. For purposes of this doctoral project, the term graduate nurse included nurses who had and had not yet completed with a passing score the National Council Licensure Examination to become a licensed RN.

Relevance to Nursing Practice

Even before the COVID-19 pandemic, the United States faced an ongoing nursing shortage (Juraschek et al., 2019; Lippincott Solutions, 2017). In the identified practice environment, that shortage worsened because of nurses leaving for high-paying travel assignments during the pandemic. By investing in and retaining graduate nurses, health care organizations can continue to provide quality care to their patients. An experienced nursing workforce able to sustain itself is crucial to the health and well-being of communities.

Locally, decreasing distress associated with transitioning from graduate nurse to novice nurse may improve the experience of the nurse and improve job satisfaction. In addition to the stress of the transition from student to professional, the graduate nurse is also learning to navigate the changing health care arena (Waltz et al., 2019). By educating the graduate nurse on the emotions and barriers they may experience during their first year and encouraging both self-care and engagement in improving the work environment early in the graduate nurse's career, this education program sought to support the participating nurses and stabilize the local nursing workforce.

In terms of orientation and onboarding for the graduate nurse, current practice at the identified organization includes a compulsory nurse residency program required for all nurses who possess fewer than 12 months of experience at the time of hire. The cohort style of the program facilitates building professional relationships. Additionally, the organization uses a preceptor-facilitated orientation period that varies in length from 6 to 8 weeks. Although current practice helps develop graduate nurses' clinical skills and

ability to apply evidence to their daily practice, one of the areas in which graduate nurses are failed with the current orientation practice is in knowing what to expect during their first year off orientation. This education program addressed this gap in practice and was an optional offering in addition to novice nurses' preceptor-facilitated orientation and required residency participation.

Local Background and Context

The project was selected prior to the COVID-19 pandemic. At that time, the proposed project organization already measured RN turnover as part of its operational data and was actively working to improve this metric. The organizational definition of turnover included only employees who left the organization, not nurses who transferred within the organization to another unit or department. While turnover was a metric closely monitored, the project organization did not have a mechanism whereby graduate nurses were educated about the developmental barriers they could expect to experience during their first 12 months of independent practice.

Role of the DNP Student

I worked with leadership to advertise the education program to those who met the operational definition of a graduate nurse: a nurse in their first year of practice in their first position as a professional nurse. I attended nurse residency sessions to offer the staff education program to interested participants. I designed the pre- and postintervention survey, the content of the education program sessions, and led the sessions.

Summary

The doctoral project, which was a staff education program for graduate nurses, sought to close the identified gap in practice, which was graduate nurses' lack of awareness of what to expect in their first 12 months after orientation as a professional nurse. I carried out this staff education program and used data from pre- and postintervention surveys to measure the program's effectiveness.

Section 3: Collection and Analysis of Evidence

The project site used many interventions to improve nurse retention. At the time of project implementation, educating graduate nurses about Duchscher's role transition theory, how it applies to them, and what actions they can take during each stage had not been attempted. This doctoral project presented a novel application of Duchscher's role transition theory. Section 3 presents the practice-focused question, sources of evidence, and plans for analysis and synthesis of evidence.

Practice-Focused Question

The practice-focused question on which this doctoral project was based was the following: Will a staff education program applying Duchscher's role transition theory provide the needed knowledge in preparing the graduate nurse for transition to novice nurse? Locally, RN turnover is a problem for both graduate and experienced nurses. Although nurse educators within the organization were aware of Duchscher's role transition theory, the gap in practice was that graduate nurses were not educated about the milestones addressed by the theory.

The purpose of this doctoral project was to improve the experience of the graduate nurse by decreasing transition-associated distress with an education program. The application of an education program on Duchscher's role transition theory aligned with the practice-focused question. The staff education program engaged nurse participants in learning about barriers and milestones they can expect to experience during their first year of nursing. The education program also included suggested actions the graduate nurse can take during their first year as a nurse. Operationally, *graduate*

nurse was defined as a nurse in their first year of practice in their first position as a professional nurse.

Sources of Evidence

The Walden University Library was used to conduct a literature search addressing the practice problem and Duchscher's role transition theory. A second source of evidence was the pre- and postsurvey taken by the novice nurses who participated in the education intervention. Because the primary goal of this doctoral project was to educate novice nurses on the developmental barriers they can expect to experience during their first 12 months off orientation, the pre- and postsurvey served as the primary source of evidence. The surveys were de-identified and anonymous.

Databases used to search the literature included CINAHL, MedLine, EBSCO Discovery Service, and PubMed via the Walden University Library. Google Scholar was also used. Search terms included *novice, nurse, retention, turnover, and role transition*. Except for literature that addressed theories on which this DNP project was based, database searches were limited to literature published between 2015 and 2020. This project also included using the Walden University Staff Education Manual. I offered pre- and post-surveys to nurses who chose to participate in the education program. This was the best way to assess the effectiveness of the education program session in addressing the practice-focused problem of novice nurse knowledge and preparation for the transition from graduate nurse to novice nurse.

Evidence Generated for the Doctoral Project

Participants

Prior to the staff education sessions, participants completed a presurvey that addressed their knowledge of milestones and developmental barriers they could expect to encounter during their first year off orientation. The education program was offered to all graduate nurses within two nurse residency cohorts. Because the practice-focused question focused on educating graduate nurses on the developmental barriers they can expect to encounter during the transition from graduate nurse to novice nurse, this participant group was relevant to the practice-focused question.

Procedures

I did not use a measurement instrument; rather, I sought to educate graduate nurses about Duchscher's role transition theory as it pertained to the barriers they would experience during their transition from graduate nurse to novice nurse. The program sessions also included education on actions the graduate nurse can take to overcome the barriers and associated distress, with a focus on self-care and engagement within the unit. The education program started with an introduction of the doctoral project and an acknowledgement of the difficult nature of the transition from graduate nurse to novice nurse. The sessions were conducted in person because pandemic restrictions had been lifted by the time of project implementation. Duchscher's role transition theory was reviewed briefly. As each stage of the theory was reviewed with participants, I focused on what emotions the nurse could expect to experience, what self-care techniques they

could employ during each phase, and what work-related activities they could participate in to foster their organizational commitment and engagement.

Content of the Education Program

The transition shock or doing phase of Duchscher's role transition theory is characterized by the graduate nurse feeling overwhelmed and feeling a sense of shock at being expected to manage patient assignments as complex as their more experienced coworkers, and at being expected to manage nonclinical tasks such as answering the unit phone. This phase spans the first 3 to 4 months off orientation (Duchscher, 2008). In terms of self-care, participants were educated on the importance of continuing to engage in healthy activities that they enjoyed as a student nurse. In terms of engaging with their work environment, participating graduate nurses were educated on the importance of being honest with their supervisor during monthly check-ins about how overwhelmed they may feel during their shifts. Additionally, the graduate nurses were educated on the benefit of regularly asking for feedback from their supervisor during their monthly check-ins. Receipt of thoughtful, well-timed feedback on a regular basis is associated with lower anxiety levels in the novice nurse (Gardiner & Sheen, 2017).

Next, I reviewed the second phase of Duchscher's (2008) role transition theory, known as being or transition crisis. This review focused on the developmental task of the novice nurse separating their identity from the profession, questioning the profession, and subsequently reengaging with the profession. A self-care technique that was shared with the graduate nurses for this phase was asking questions and engaging in committees or efforts to improve their unit or hospital environment.

Lastly, I reviewed with participating graduate nurses the third phase of Duchscher's (2008) role transition theory, which is knowing and is characterized by a stabilization of the nurse's professional identity and a continued desire for work-life balance. In terms of self-care and engagement strategies during this phase, participants were educated on the importance of continuing to engage in activities they enjoy and bettering their work environment in the form of committee membership or special projects on the unit.

Pre- and Postsurvey Questions

The pre- and posteducation session surveys included the same questions and focused on the nurses' knowledge and comfort with their transition from graduate nurse to novice nurse. Likert-scale responses included five levels of agreement: *strongly agree*, *agree*, *neutral*, *disagree*, and *strongly disagree*. Questions included (a) I feel prepared for the transition from graduate nurse to novice nurse, (b) I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse, (c) I understand the importance of maintaining a healthy self-care routine, and (d) I feel comfortable asking for feedback.

Protections

Graduate nurses enrolled in their hospital's nurse residency program were offered the opportunity to participate in the education program. I communicated to prospective participants that participating in the education program was voluntary. De-identification of pre- and postsessions surveys was accomplished by having participants use a four-digit code of their choosing. The same private four-digit code was used for the pre- and

postsurveys. The survey was conducted with pen and paper so that participant anonymity could be maintained. Anonymity of the data was maintained by me, and leadership did not have access to the data. I also communicated to participants that they could cease participation at any time without consequence.

To gain access to the evidence for the DNP project, I presented the project to the chief nursing officer and the Magnet program director for approval. Because this DNP project also benefitted the organization at which it was being completed, there were no anticipated barriers to obtaining the information when done through proper channels. This project did not require institutional review board approval from the implementation site or from Walden University.

Analysis and Synthesis

Pre- and postsurvey responses were analyzed using Microsoft Excel for analysis and graphing. I hoped to see improvement between the pre- and postsurvey completed by the participants. Questions included (a) I feel prepared for the transition from student nurse to novice nurse, (b) I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse, (c) I understand the importance of maintaining a healthy self-care routine, and (d) I feel comfortable asking for feedback. I analyzed de-identified pre- and postsurveys completed by the participants. Likert scale response ratings included 5 = *strongly agree*, 4 = *agree*, 3 = *neutral*, 2 = *disagree*, and 1 = *strongly disagree*. The score range of participants' pre- and postsurveys were analyzed, as well as the frequency of ratings for each question and score totals. I used Microsoft Excel to analyze and visualize the data. The results of the

preeducation surveys and the posteducation surveys were tabulated using simple percentages to determine whether the education program provided to the nursing staff was effective. These percentages were calculated to z scores.

Summary

The purpose of this DNP project was to educate graduate nurses about the developmental trajectory during the transition from graduate nurse to novice nurse. In the best of situations, this transition is stressful. An identified gap in practice was educating graduate nurses about Duchscher's role transition theory. The education program was designed to equip the graduate nurse with information about transition from graduate nurse to novice nurse to decrease distress associated with the transition.

Section 4: Findings and Recommendations

Two staff education sessions were conducted, which included a total of 20 participants. A pre-session and post-session survey was given to each of the participants. The purpose of the survey was to measure the effectiveness of the staff education sessions. Findings are presented in Section 4. Questions included (a) I feel prepared for the transition from graduate nurse to novice nurse, (b) I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse, (c) I understand the importance of maintaining a healthy self-care routine, and (d) I feel comfortable asking for feedback. Likert response options were *strongly agree* (5), *agree* (4), *neutral* (3), *disagree* (2), and *strongly disagree* (1).

Findings and Implications

Participants completed a pre-session survey, which consisted of four questions with Likert responses. For each question, score range, improvement in response scores, score frequency, and totals were calculated using Microsoft Excel. Standard deviation and z scores were then calculated using Microsoft Excel. Mean and SD were calculated for each individual question, as well as the aggregate responses for pre- and post-education sessions. The overall mean for pre-session scores was 3.96 with an SD of 0.459. The overall mean for post-session scores was 4.4 with an SD of 0.311.

Question 1

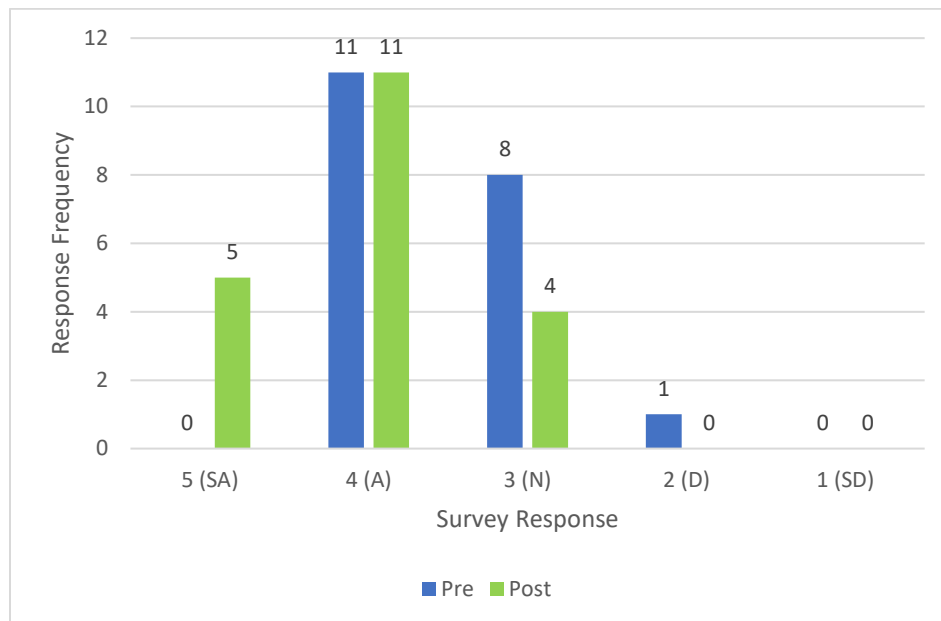
The mean for pre-session responses to the first question, “I feel prepared for the transition from graduate nurse to novice nurse,” was 3.5 with an SD of 0.606 and a z score of -1.001. As depicted in Figure 1, prior to the education session, 11 out of 20

respondents selected *agree* for the question “I feel prepared for the transition from graduate nurse to novice nurse,” while 8 of 20 selected *neutral* and 1 selected *disagree*. The total of all pre-session scores for the first question was 70. The z score for the pre-session responses for this question was the furthest below the mean of pre-session scores for all four questions.

After the education session, 5 of 20 respondents selected *strongly agree*, 11 of 20 selected *agree*, and 4 of 20 selected *neutral* in response to the statement “I feel prepared for the transition from graduate nurse to novice nurse.” The total of all post-session scores for this question was 81. These score changes were reflected in the post-session mean, which was 4.05 ($SD = 0.686$) and z score of 0.281.

Figure 1

Score Rating Frequency, Question 1



Question 2

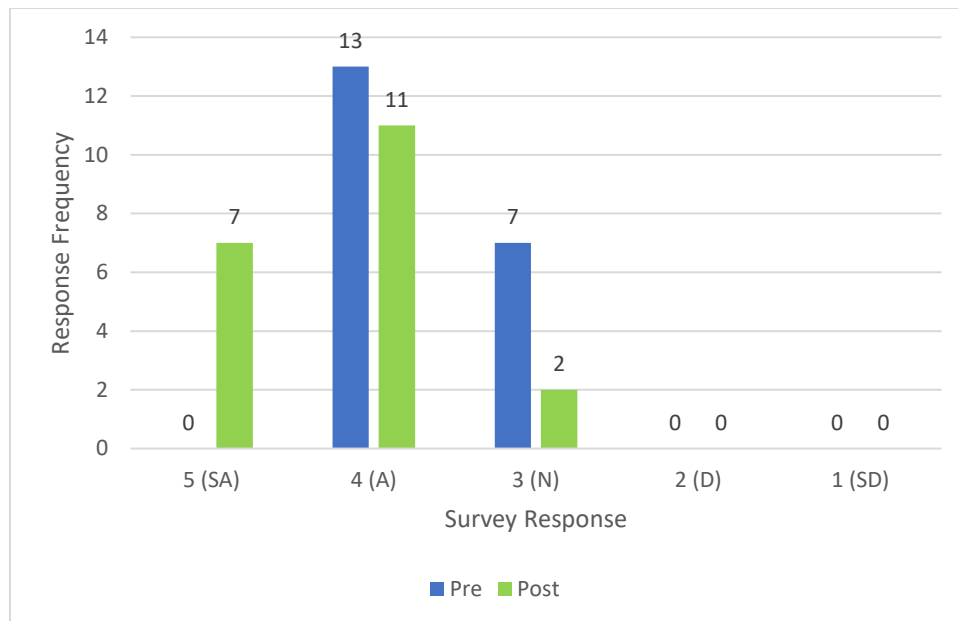
The mean for pre-session responses to the second question, “I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse,” was 3.65 with an *SD* of 0.489. As depicted in Figure 2, prior to the education session, 13 of 20 participants selected *agree* for this statement and 7 of 20 participants selected *neutral*. The *z* score for pre-session responses for this question was -0.681, indicating response scores were below the mean by less than one *SD*. The total of all pre-session scores was 73.

After the educational session, 7 of 20 participants selected *strongly agree*, 11 of 20 selected *agree*, and 2 of 20 selected *neutral*. The *z* score for post-session responses for

this question was -0.482. Within the postsession data set, responses to this question were the furthest below the mean. The total of all postsession scores for this question was 85.

Figure 2

Score Rating Frequency, Question 2



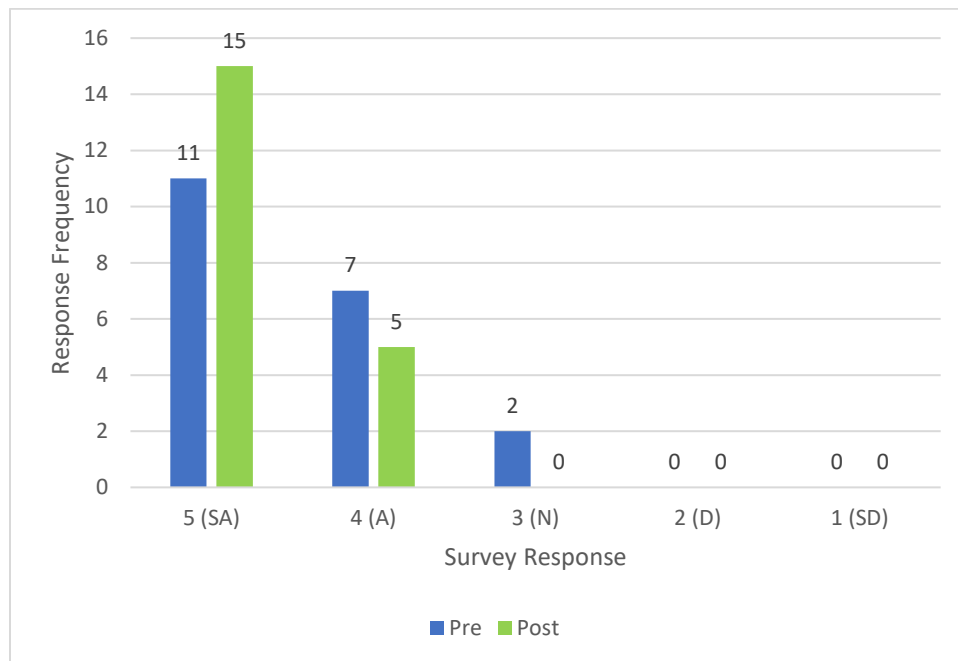
Question 3

The mean for presession responses to the third question, “I understand the importance of maintaining a healthy self-care routine,” was 4.45 with an *SD* of 0.686 and *z* score of 1.126. As depicted in Figure 3, prior to the education session, 11 of 20 participants selected *strongly agree*, 7 of 20 selected *agree*, and 2 of 20 selected *neutral* in response to this statement. The total of all presession scores was 89 for this question.

After the educational session, 15 of 20 participants selected *strongly agree*, and 5 of 20 selected *agree*. The total for all postsession scores for this question was 95, with a mean of 4.75, *SD* of 0.444, and *z* score of 1.126.

Figure 3

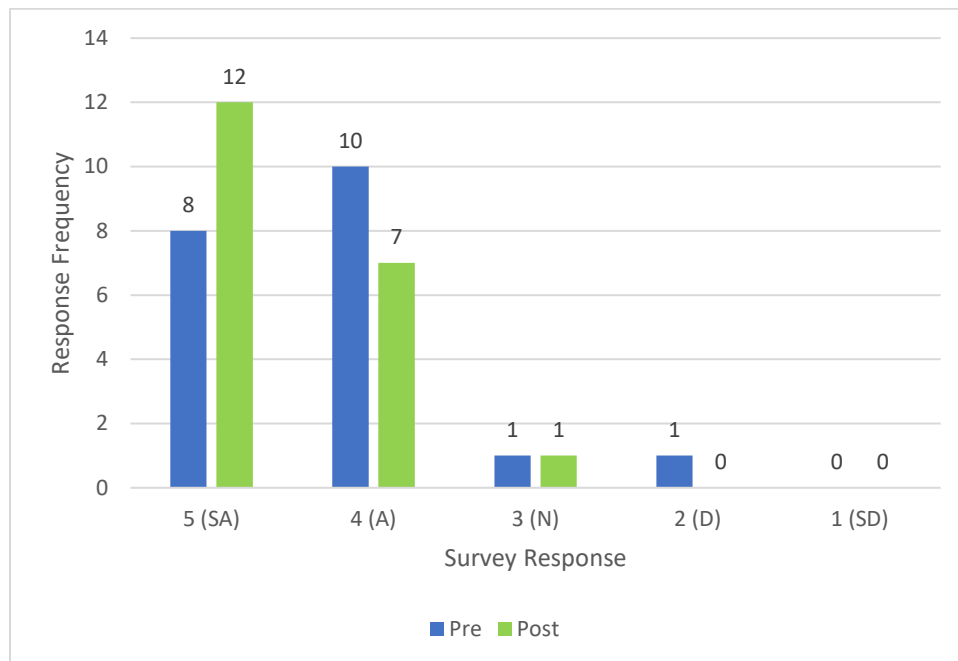
Score Rating Frequency, Question 3



Question 4

The mean for pre-session responses to the fourth question, “I feel comfortable asking for feedback,” was 4.25 with an *SD* of 0.786 and a *z* score of 0.626. As depicted in Figure 4, prior to the education session, 8 of 20 participants selected *strongly agree*, 10 of 20 participants selected *agree*, 1 of 20 participants selected *neutral*, and 1 of 20 participants selected *disagree*. The total of all pre-session scores for this question was 85.

After the education session, 12 of 20 participants selected *strongly agree*, 7 of 20 selected *agree*, and 1 of 20 selected *neutral*. The total of all post-session scores for this question was 91, with a mean of 4.55, *SD* of 0.605, and *z* score of 0.482.

Figure 4*Score Rating Frequency, Question 4***Implications**

An overall score increase was noted for all four questions, with the greatest increase noted for the first and second questions. This indicates an overall benefit of the staff education program to those transitioning from graduate nurse to novice nurse. Additionally, with a noted score increase for each individual question, the objective of the education program was achieved.

The increase in response scores to the first question indicates effectiveness of the education program in helping new nurses feel prepared for the transition from graduate nurse to novice nurse. Based on these responses, there may be benefit in including this education program in new nurse onboarding to equip graduate nurses with this knowledge earlier in their career.

Responses to the second question displayed a narrower yet similar spread as the first question. The fact that pre-session responses for this question scored higher than the first question indicates a preexisting knowledge about the barriers graduate nurses can expect to navigate during their first 12 months off orientation. It is unclear whether the participants' knowledge was specific to the barriers outlined by Duchscher's role transition theory or if it was general knowledge about the adjustments associated with their first year as a nurse.

Responses to the third question indicate that participants possessed a preexisting knowledge about the importance of maintaining a healthy self-care routine. To enhance the relevance of this session to participants, there may be benefit in tailoring this portion of the session to healthy self-care routines nurses can implement during their shifts.

Responses to the fourth question indicate an overall preexisting comfort among participants with asking for feedback. To augment the benefit of this education program, future iterations may focus on best practices for seeking feedback.

Recommendations

Based on the survey score response improvements, my primary recommendation is for the organization to include the contents of this project in the graduate nurse onboarding curriculum. The secondary recommendation is to include the contents of this project in the didactic portion of nursing students' capstone clinical courses prior to entry into the workforce. Lastly, based on the noted improvements found in this project, it is recommended for new preceptors and new managers to receive training in the contents of

this project. This will allow them to more effectively support the graduate nurse who is transitioning to novice nurse.

Contribution of the Doctoral Project Team

The doctoral project team (and organization) changed during the project. Although I was the primary member of the team, assistance from the organization's chief nursing officer was essential, as was the nurse educator who oversees the nurse residency program. Within the new organization, this DNP project and associated data may contribute to the hospital's Magnet application. As such, the organization's Magnet program director also played a pivotal role in the project.

Strengths and Limitations of the Project

The primary strength of the DNP project was its novel application of Duchscher's role transition theory. The identified gap in practice was explanation of Duchscher's role transition theory to graduate nurses in their transition to novice nurses. The other strength of this DNP project was its relevance and application to practice. The education program, while standardized in its approach to both groups of participants, encouraged participants to reflect on their knowledge, learn new information, and assimilate this new information into their practice.

The primary limitation of the DNP project was that I had to implement it at a different organization than originally planned. Consequently, turnover and demographic data were not available. The second limitation of this project was the relatively small sample size. Because the original organization faced massive turnover with relatively few graduate nurses being hired, recruitment for participation was nearly impossible. Lastly,

my overarching goal beyond the DNP project was to impact nurse turnover. Measuring nurse turnover in a meaningful way was beyond the scope of this DNP project. As such, I should have excluded turnover data from the project proposal.

Section 5: Dissemination Plan

Analysis of Self

The process of planning and implementing the DNP project was rigorous and reinforced the value of persistence. Completion of the project required application of all major didactic concepts learned during the DNP program. Additionally, the ability to communicate effectively and establish and maintain professional relationships was of paramount importance. In meeting with the chief nursing officer for approval to implement this project, I discussed a dissemination plan. Because the project organization is a new hospital, it is not yet eligible for application to the Magnet recognition program. My project and data will be included in the organization's Magnet application. To accomplish this, I will deliver the staff education program to several additional groups of graduate nurses. Beyond the Magnet application, I will advocate to have this content included in the organization's nurse residency program moving forward.

Summary

The identified gap in practice was education of graduate nurses about Duchscher's role transition theory. The practice-focused question on which the DNP project was based was the following: Will a staff education program applying Duchscher's role transition theory provide the needed knowledge in preparing the graduate nurse for transition to novice nurse? Analysis of the pre- and postsurvey responses indicated that I achieved the desired outcome with the staff education program. In the long-term dissemination phase, I hope to measure the impact on turnover and memorialize this staff education program as an enduring part of new nurse onboarding.

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Appendix A: Preeducational Intervention Assessment

Role Transition Readiness Assessment Tool

Thinking about your transition into your first professional nursing role, respond to the below questions, utilizing the rating scale: 5 = *strongly agree* (SA), 4 = *agree* (A), 3 = *neutral* (N), 2 = *disagree* (D), and 1 = *strongly disagree* (SD).

	5 SA	4 A	3 N	2 D	1 SD
1. I feel prepared for the transition from graduate nurse to novice nurse.					
2. I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse.					
3. I understand the importance of maintaining a healthy self-care routine.					
4. I feel comfortable asking for feedback.					

Appendix B: Posteducational Intervention Assessment

Role Transition Readiness Assessment Tool

Thinking about your transition into your first professional nursing role after the educational intervention, respond to the below questions, utilizing the rating scale: 5 = *strongly agree* (SA), 4 = *agree* (A), 3 = *neutral* (N), 2 = *disagree* (D), and 1 = *strongly disagree* (SD).

	5 SA	4 A	3 N	2 D	1 SD
1. I feel prepared for the transition from graduate nurse to novice nurse.					
2. I feel knowledgeable about the developmental barriers I can expect to navigate during my transition from graduate nurse to novice nurse.					
3. I understand the importance of maintaining a healthy self-care routine.					
4. I feel comfortable asking for feedback.					