

R³ – Renewal, Resilience and Retention for Maryland Nurses

Results of a Needs and Opportunities Assessment



RESILIENT NURSES INITIATIVE

• M A R Y L A N D •

Presented by...

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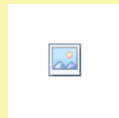
Needs and Opportunities Assessment



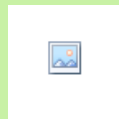
IRB Approval



Completed by one-person in SON with knowledge of pre-licensure curriculum; NRP educators from MNRPC



**Resilience and ethical practice content in pre-licensure (PL) and NRP is limited.
Greater focus in PL on ethics and less on resilience; opposite in NRP**



Potential for broader statewide assessment



Our sample

Nurse Educators

- N= 15 (22.39%)
- Urban, rural, and suburban areas were represented
- Included:
 - program directors
 - associate professors
 - Deans
 - Instructors of clinical and didactic nursing

NRP

- N= 52 (77.16%)
- Urban, rural, and suburban areas were represented
- Included:
 - program directors or coordinators
 - directors of nursing education
 - nurse managers



Ethics

Faculty

- Often threaded through curriculum
- Commonly seen in Professionalism and Foundations Courses
- Primarily lecture materials
- Sources include ANA Code of Ethics, Ethical Theories, Ethical frameworks for decision making

NRP

- Slight mention in curriculum
- Primarily lecture materials
- Offered to staff at adjunct programs



In what teaching and learning modality does your institution integrate ETHICS content?

Incorporation of Ethics	Schools of Nursing % (n)	Nurse Residency Programs %(n)
Minimal (mention it)	0.00 (0)	8.00(2)
Slight (A course module)	20.00 (2)	56.00 (14)
Moderate (incorporate into ½-2/3 of the course content)	30.00 (3)	16.00 (4)
Threaded throughout curriculum	40.00 (4)	16.00 (4)
Stand- alone course	10.00 (1)	n/a
Not at all	0.00(0)	4.00 (1)

Ethics Content in Curriculum

Ethics content included in curriculum	Schools of Nursing% (n)
ANA Code of Ethics and interpretive statements	18.00 (9)
Principles of Biomedical Ethics (Autonomy, Beneficence, Non-maleficence, Justice)	12.00 (6)
Ethical Theories	14.00 (7)
Care ethics	8.00 (4)
Ethical issues in nursing	12.00 (6)
Moral foundations of nursing	4.00 (2)
Ethical frameworks for decision making	12.00 (6)
Values clarification	4.00 (2)
Development of personal moral compass	2.00 (1)
Interprofessional ethical issues	8.00 (4)
Contemporary ethical issues	4.00 (2)

Resilience

Faculty

- Minimal mention in coursework
- Most common barrier:
 - No dedicated time in program
 - Lack of faculty knowledge
- If included most common modalities:
 - Journaling
 - Mindfulness

NRP

- Threaded throughout curriculum
- Multiple modalities included
- Curriculums includes multiple teaching and learning opportunities
- Most common barrier:
 - Lack of resources (time, staff, funding)



TEACHING AND LEARNING MODAILITIES FOR RESILIENCE IN SCHOOLS OF NURSING

	Lecture	27.78%	5
	Simulation (on site or virtual)	5.56%	1
	Clinical setting	5.56%	1
	Small group discussion	11.11%	2
	Role play	5.56%	1
	Assignments	11.11%	2
	Self- Reflection	27.78%	5
	Other (" I don't know")	5.56%	1
	Total	100%	18

RESILIENCE CONTENTS IN SCHOOLS OF NURSING

Resilience Modalities Employed	% (n)
Journaling or writing practices	18.52 (5)
Mindfulness	11.11 (3)
Meditation	3.70 (1)
Body practices such as yoga, movement etc.	3.70 (1)
Gratitude practices	0.00 (0)
Activating positive emotions such as appreciation, hope, etc	11.11 (3)
Self-compassion practices	3.70 (1)
Physical practices such as exercise	7.41 (2)
Sleep hygiene	3.70 (1)
Nutrition	3.70 (1)

Strengths and Limitations

Small Sample Size

Limited Geographic Regions

Lack of Reliability Testing

Larger and more diverse samples needed.



Take Home Messages

Lack of resources are a commonality

Cultural influences of the organization make prioritization of ethics and resilience programs challenging

Both faculty and NRP would like additional training in resilience and ethics

Faculty and NRP leaders feel ethical and resilience trainings are important for students and staff



QUESTIONS?



RESILIENT NURSES INITIATIVE

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Retaining Nurses by Renewing our Resilience



RESILIENT NURSES INITIATIVE

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Retaining Nurses by Renewing our Resilience

R3: Resilience, Retention and Renewal: Results of a Needs and Opportunity Survey for Ethics and Resilience in Maryland Faculty

Erin Wright, DNP, CNM, APHN-BC, FACNM; Victoria Hughes, DNS, MSN RN;

Abstract

Background: Maryland faces a current and foreboding shortage of nurses, caused not just by too few nurses entering the workforce but also by attrition of faculty and clinicians due to workload, work-life imbalance, and burnout. A call to action by the American Association of Colleges of Nursing (AACN) encourages schools to promote and build a wellness culture as part of the curriculum and organization. This includes evidence-based interventions to build skills in resilience and well-being (AACN, 2020).

Purpose: We propose a statewide initiative for academic faculty, nursing students, Nurse Residency Program educators, and novice nurses – Renewal, Resilience and Retention (R3) – to understand the current state of resilience, well-being, and ethics curriculum in our partner nursing schools and nurse residency programs in Maryland.

Method: An electronic needs and opportunity assessment was distributed to program leaders at eight Maryland Schools of Nursing and Education Coordinators of the 36 hospital members of Maryland Nurse Residency Collaborative.

Findings: A total of 52 Nurse Residency coordinators and 15 faculty from Maryland Schools of Nursing programs responded to the electronic assessment. Resilience and well-being have minimal mention in courses with no dedicated time for practice of resilience skills in courses or programs. Modalities used to foster resilience include journaling, mindfulness, and activation of positive emotions. Barriers that prevent resilience curriculum implementation include prioritization of other course content, time constraints, lack of resources, and lack of faculty knowledge of practices. Ethics content is most often threaded through the curriculum, presented as lecture content, and commonly seen in professionalism and foundations of nursing courses. The focus of study in ethics includes ANA code of ethics, ethical theories, and ethical frameworks for decision making. Barriers to presenting ethics content include time restrictions, lack of faculty experience, too much material to cover, and time restrictions.

Conclusion: A review of nursing faculty and Nursing Residency Programs indicate that ethics is currently incorporated to a degree into nursing curriculum within Maryland Schools of Nursing and Nurse Residency programs, however, there remains a need for the development of nurse educator curriculum and specific educational strategies to foster the development of well-being and resilience in nursing students.