Engaging New Graduates in the Transition from Nursing Student to ICU Nurse: A Grounded Theory Study

Abstract Authors:

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Purpose / Objective:
The purpose of the study was to generate a theory to explain workplace readiness and needs of new graduates entering the ICU from the viewpoint of managers, clinical educators, preceptors, and new RN graduates.

Background / Significance:
Intensive Care Units (ICUs) are hiring large groups of new nurse graduates without providing these new hires with the appropriate training to promote competency. Because of the shortage of experienced nurses, there is a need to understand the workforce readiness of new graduates entering the ICU.

Methodology / Data Analysis:
Grounded theory was the qualitative approach used with this study. The study was conducted in a large teaching hospital. A total of 24 in-depth interviews were conducted with managers, educators, preceptors, and new graduates in ICUs to investigate the workplace readiness of new ICU nurses. The interview transcripts were analyzed using a grounded theory design. The constant comparative method facilitated the discovery of themes, and all the themes and codes were organized via NVivo 9 software.

Findings / Implications:
The four themes that emerged from the analysis were: (a) embracing the new ICU role, (b) overwhelming experience of performance ambiguity or anxiety, (c) adapting to the ICU, and (d) embodying the new ICU RN role. The themes developed the Novice Nurse Embracing the ICU theory (NNEIT).

Discussion:
The results of this study indicate that new ICU RNs have limited exposure in nursing school to the ICU. Novice nurses embodying the new role require time, preparation, and support to adapt to the new ICU RN role. The Novice Nurse Embracing the ICU Theory (NNEIT) that emerged from the study will provide guidance in resolving the discourse of the necessary competencies and skills for new nurses entering the ICU.

Conflict of Interest:
I have no conflicts financial or otherwise, related to this abstract/presentation.
I confirm that the above disclosure is accurate and complete: Dr. LaToya Lewis-Pierre