

The Home Health and Hospice Care Nurse Staffing Study (HHHCNSS) assesses nurse staffing and related issues in home health and hospice agencies. In 2017, the Texas Center for Nursing Workforce Studies (TCNWS) administered the HHHCNSS to 925 Texas home health and hospice agencies with a patient census of at least 250. Respondents provided data for 222 agencies for a response rate of 24.0%. These agencies were representative of Texas home health and hospice agencies by region, patient census, and agency type.

This report presents the relevant findings of the survey related to transition to practice programs in Texas home health and hospice agencies. The 2017 HHHCNSS defined transition to practice programs as formal programs of active learning for newly licensed nurses as well as experienced nurses transitioning to new settings or specialties. Please see Appendix B for a more detailed description of the transition to practice program types.

### Institute of Medicine's *The Future of Nursing*

In 2011, the Institute of Medicine (IOM) published *The Future of Nursing: Leading Change, Advancing Health*.<sup>1</sup> This report recommended a series of concrete policy and administrative changes that would allow the American healthcare professions to deal with our country's healthcare workforce needs. As a means of partially addressing the country's shortage of highly-qualified practicing nurses, the IOM report noted exceptionally high turnover rates among first-year nurses. It recommended that employers of newly licensed registered nurses (RNs) seek to ease the transition by implementing transition to practice (residency) programs.

To follow up on the IOM report's recommendations, the National Academies of Science, Engineering, and Medicine published *Assessing Progress on the Institute of Medicine Report *The Future of Nursing** in 2016.<sup>2</sup> This report noted difficulty in measuring progress towards the recommendation of implementing transition to practice (residency) programs due to limited data and differences

among the programs considered to be residencies.

The 2017 HHHCNSS asked respondents about a variety of transition to practice programs in addition to residencies. In addition to newly licensed RNs, the 2017 HHHCNSS added options for licensed vocational nurses (LVNs), advanced practice RNs (APRNs), nursing students, and experienced nurses participating in transition to practice programs.

1 Institute of Medicine, Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing. (2011). *The future of nursing: Leading change, advancing health*. Retrieved from The National Academies Press website: [http://books.nap.edu/openbook.php?record\\_id=12956](http://books.nap.edu/openbook.php?record_id=12956)

2 National Academies of Sciences, Engineering, and Medicine. (2016). *Assessing progress on the Institute of Medicine report *The future of nursing**. Washington, DC: The National Academies Press. Retrieved from <https://www.nap.edu/read/21838>

### Transition to Practice Programs

53 of 219 respondents (24.2%) offered a transition to practice program. These respondents were asked what kind of programs they had out of 5 options - nurse residency, nurse fellowship, student nurse internship/externship, mentorship/preceptorship, and "other" programs (Figure 1, page 2).

- Preceptorship/mentorship was the most common type of transition to practice program.
- Nurse residencies and nurse fellowships were the least common programs.
- "Other" transition to practice programs described by respondents included training programs (4 respondents) and orientations (4 respondents).

## Employment vs. Non-Employment Models

Respondents also indicated whether their program paid transitioning nurses (the employment model) or whether their program was unpaid (the non-employment model), perhaps through participation with a nursing school or as an individual internship (Figure 2).

- 31 of 42 transition to practice programs (73.8%) used an employment model.
- Preceptorship/mentorship programs had the highest percentage of programs using employment models (85.2%), while student nurse internship/externships had the lowest (37.5%).

## Types of Nurses Eligible for Transition to Practice

Tables 1-3 show the types of nurses eligible for transition to practice programs.

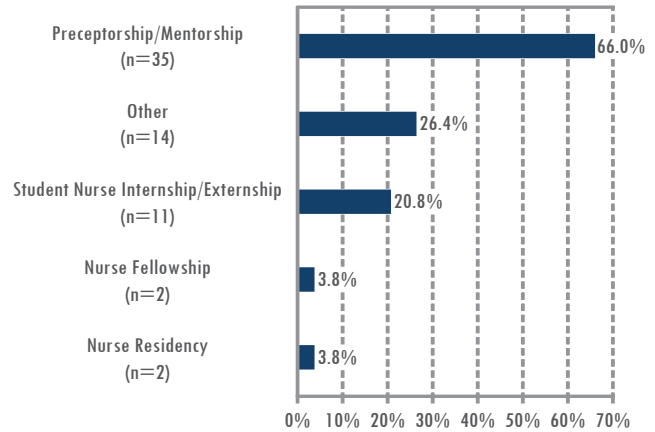
- With the exception of nurse residencies, RNs were the most common type of nurse eligible to participate in transition to practice programs.
- Mentorship/preceptorship programs were the only programs available to APRNs.

## Length of Transition to Practice

Respondents provided a program length in weeks for 37 transition to practice programs (Figure 3, page 3).

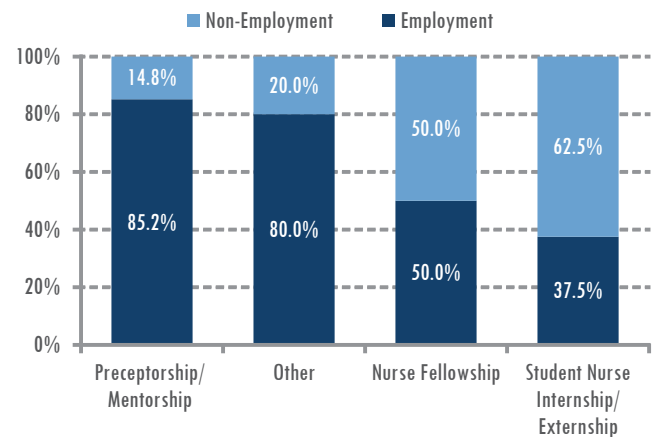
- Median program lengths ranged from 3 weeks among other programs to 8 weeks among nurse fellowship programs.
- Student nurse internship/externship programs varied the most in length, ranging from 4 weeks to 36 weeks.

Figure 1. Percentage of respondents with transition to practice programs by program type



Note: Respondents could select more than one program type.

Figure 2. Transition to practice program type by employment model type (n=42 programs)



Note: There were no data for nurse residencies.

Table 1. Types of nursing students eligible for transition to practice programs, by program type

Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Student Nurse Internship/Externship	Mentorship/Preceptorship	Other	
VN Students	n	-	-	6	-	2
	%	-	-	60.0%	-	18.2%
RN Students	n	-	-	7	-	3
	%	-	-	70.0%	-	27.3%

Note: n = number of respondents who reported nurse types eligible for their transition to practice program; % = the percentage of respondents offering each transition to practice program type who responded that nurse types were eligible for their transition to practice program; there were no data for cells with a dash (-).

**Table 2. Types of newly licensed nurses eligible for transition to practice programs, by program type**

Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Student Nurse Internship/ Externship	Mentorship/ Preceptorship	Other	
Newly licensed VNs	n	2	-	-	6	5
	%	100.0%	-	-	19.4%	45.5%
Newly licensed RNs	n	1	-	-	10	5
	%	50.0%	-	-	32.3%	45.5%
Newly licensed/certified APRNs	n	-	-	-	1	-
	%	-	-	-	3.2%	-

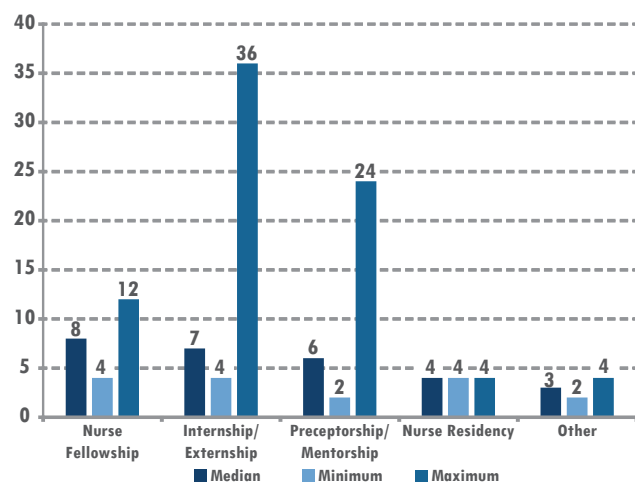
Note: n = number of respondents who reported nurse types eligible for their transition to practice program; % = the percentage of respondents offering each transition to practice program type who responded that nurse types were eligible for their transition to practice program; there were no data for cells with a dash (-).

**Table 3. Types of experienced nurses eligible for transition to practice programs, by program type**

Nurse Type	Transition to Practice Program Type					
	Nurse Residency	Nurse Fellowship	Student Nurse Internship/ Externship	Mentorship/ Preceptorship	Other	
Experienced VNs transitioning to new setting or specialty	n	-	1	-	18	5
	%	-	50.0%	-	58.1%	45.5%
Experienced RNs transitioning to new setting or specialty	n	-	2	-	25	6
	%	-	100.0%	-	80.6%	54.5%
Experienced APRNs transitioning to new setting or specialty	n	-	-	-	2	-
	%	-	-	-	6.5%	-

Note: n = number of respondents who reported nurse types eligible for their transition to practice program; % = the percentage of respondents offering each transition to practice program type who responded that nurse types were eligible for their transition to practice program; there were no data for cells with a dash (-).

**Figure 3. Median length and range in weeks of transition to practice programs by program type**



## Number of Participants

Table 4 provides the number of respondents that reported the number of participants in their transition to practice programs in the last fiscal year and the number of total participants by program type.

- Student nurse internships/externships had the most participants (106), followed by preceptorships/mentorships (76).

**Table 4. Number of transition to practice participants by program type**

Program Type	n	Number of Participants
Nurse Residency	1	2
Nurse Fellowship	2	7
Student Nurse Internship/Externship	7	106
Preceptorship/Mentorship	24	76
Other	6	13

Note: n=number of respondents who reported participants

## Coordination of Transition to Practice Programs

45 respondents with transition to practice programs indicated how their programs were coordinated (Table 5).

- The most common selection was chief nursing officer or director of nursing, followed by nurse manager.
- “Other” responses that were written in included the HR Department (1 respondent) and a combination of the new nurse, the DON, and the preceptor (1 respondent).

## Reported Outcomes of Transition to Practice Programs

37 respondents indicated up to three outcomes resulting from their transition to practice programs.

- Respondents most often reported improved communication skills among first year nurses with physicians, other health professionals, staff, patients, and families (48.6%), followed by improved clinical competence in patient care among first year nurses (45.9%), and improved clinical decision making among first year nurses (43.2%).
- “Other” outcomes written in by respondents included understanding the requirements of the new setting (1 respondent) and 1 respondent who noted no change resulting from the transition to practice program.

**Table 5. Position in charge of coordinating transition to practice program**

	Number of Programs	Percentage of Programs
Chief Nursing Officer or Director of Nursing	28	62.2%
Nurse manager	12	26.7%
Dedicated transition to practice coordinator	3	6.7%
Other	2	4.4%

**Table 6. Outcomes of transition to practice programs (n=37)**

Outcomes	n	Percentage of Respondents
Improved communication skills among first year nurses with physicians, other health professionals, staff, patients, and families	18	48.6%
Improved clinical competence in patient care among first year nurses	17	45.9%
Improved clinical decision making abilities among first year nurses	16	43.2%
Decreased turnover of newly licensed RNs in the first year of employment	7	18.9%
Improved organization and prioritizing skills in clinical practice among first year nurses	6	16.2%
Increased number of new graduates applying for RN positions in your organization	5	13.5%
Other	5	13.5%
Improved ability to incorporate research-based evidence in clinical practice among first year nurses	1	2.7%

## Conclusion

53 of 219 respondents (24.2%) offered a transition to practice program. The most common program type was preceptorship/mentorship, and nurse fellowship and nurse residency were the least common types. The majority of transition to practice programs used an employment model.

More than half of respondents indicated their transition

to practice programs were coordinated by a chief nursing officer or director of nursing. The most commonly reported outcomes of transition to practice programs were: improved communication skills among first year nurses with physicians, other health professionals, staff, patients, and families; improved clinical competence in patient care among first year nurses; and improved clinical decision making among first year nurses.

## TGNWS Advisory Committee Recommendations

According to survey respondents, growing demand for home health and hospice services were implicated in driving the need for personnel experienced in home health and hospice care. Study results indicated that most agencies (69.2%) ranked past relevant nursing experience

as the most important attribute they looked for when hiring RNs.

Stakeholders should promote a better understanding of nursing services in the home health and hospice setting, specifically:

- Local and regional home health and hospice agencies should collaborate with each other as well as with nursing programs to provide educational and clinical experiences, including content on case management, for nursing faculty and students (such as in the RN to BSN and graduate nursing programs).
- Nursing programs should explore preceptorship and internship opportunities in home health and hospice settings.

Although most agencies valued past relevant nursing experience as the most important attribute they looked for when hiring RNs, and over half of responding agencies found it difficult or very difficult to recruit RNs with home health and hospice experience (68.5% of home health agency respondents and 77.5% of hospice agency respondents). Agencies found it much less difficult to hire RNs with no home health or hospice experience (only 29.7% of agencies found it difficult or very difficult), so innovative solutions are needed to acclimate RNs with no previous home health or hospice experience to this setting.

Traditional hospital-based transition to practice programs for newly licensed nurses will not work in the home health and hospice setting, because the Texas Board of Nursing strongly discourages newly licensed nurses from working in an independent living environment setting until they have 12-18 months of experience in an acute health setting.

Home health and hospice agencies should develop innovative strategies for transition to practice for RNs and LVNs who already have at least 12 months of experience in other settings in order to prepare them to function as home health and hospice nurses in a home-based setting. Specifically:

- These strategies should especially emphasize frail elderly adults and special needs pediatric populations. Such strategies should help teach care coordination across the lifespan.
- Since the majority of home health and hospice agencies in Texas are relatively small, these strategies should be community collaboratives, with multiple agencies working together to provide transition to practice experiences for their employees.