

Emergency Nurse Onboarding Position Statement





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Emergency Nurse Onboarding

Description

Emergency nursing is a specialty of nursing practice that is both autonomous and collaborative. The emergency nursing onboarding process, tailored for the new graduate or transition to practicing nurse, introduces the specialty's professional standards (Emergency Nurses Association [ENA], 2022). Assessment and intervention based on a presenting chief complaint and the patient's acuity level is a specialized approach unique to emergency nursing. Emergency nurses work in stressful, fast-paced, and time-constrained environments where they integrate evidence-based knowledge, make rapid assessments and critical decisions, and perform life-saving interventions, all while prioritizing and multitasking (Lee et al., 2021). Emergency nurses possess a unique skill set that goes beyond the requirements of standard nursing licensure. Their expertise is tailored to their work environment and the diverse patients for which they care. It is critical that the emergency nurse is competent to provide emergent, urgent, and non-urgent care to patients across the health and age continuum. This requires a fluid and gradual process of knowledge acquisition, skills refinement, and risk recognition through a structured onboarding program with continuing education (ENA, 2022).

ENA Position

It is the position of the Emergency Nurses Association that:

1. As the professional organization for the specialty of emergency nursing, ENA defines the scope and standards of the emergency nurse's role.
2. Successful emergency nurse onboarding is a comprehensive, individualized, evidence-driven, competency-based approach that incorporates adult learning principles, active teaching and learning activities, and socialization strategies.
3. A successful emergency nurse onboarding or residency program involves the emergency department team, including, but not limited to, leadership, managers, nurse educators, clinical nurse specialists, preceptors, mentors, peers, ancillary services, and providers.
4. A competent and effective preceptor is critical to the success of the onboarding process.
5. Successful completion of an emergency nurse onboarding is based on each participant's ability to demonstrate competence by applying knowledge using critical thinking skills and risk recognition, while demonstrating proficient technical skills to provide safe, quality care.
6. Emergency nurses support research to investigate the effectiveness of nurse onboarding programs versus a specialty-specific residency program.

Background

Implementing a thorough onboarding program with a standardized framework can help ensure the success of the onboarding process (Patra & De Jesus, 2023; Wilburn et al., 2018). A structured and standardized framework for the delivery of content and evaluation of the orientee provides support for the preceptor and assures the comprehensive educational needs of the orientee through the building of

knowledge and skills (Brown & Walker, 2020; Hardacker et al., 2022; Wilburn et al., 2018). The use of a standardized tool for evaluation of the orientee provides an objective view of the onboarding and identifies gaps and failure to progress (Brown & Walker, 2020; Hardacker et al., 2022; Wilburn et al., 2018). Specific exercises and discussion questions foster the development of critical thinking and clinical reasoning during the transition into emergency practice (Boyer et al., 2018; Innes & Calleja, 2018; Joswiak, 2018; Senyk & Staffileno, 2017; Wilburn et al., 2018). Current research suggests having a structured framework of onboarding and training will potentially reduce or eliminate sentinel events (Patra & De Jesus, 2023). According to The Joint Commission (2021), the lack of appropriate staff onboarding, education, or competency assessment has led to medication errors such as drug overdoses, medication dosing errors, transfusion errors and systemically has contributed to inadequate assessment and increased suicides of our mental health patients. In addition, the lack of appropriate education has been associated with nurses feeling incompetent and subsequently having a low sense of personal accomplishment, increasing their desire to leave (Bridgeman et al. 2018).

The World Health Organization defines burnout as “feelings of energy depletion or exhaustion, increased mental distance from one’s job, or feelings of negativism or cynicism related to one’s job” (2019, p. 42). Burnout is classified as an occupational phenomenon, not a medical diagnosis according to the WHO’s *International Classification of Diseases (ICD-11)* (2022). It is imperative to consider the importance of effective onboarding to ensure safe learning, personal accomplishment, and effective coping strategies to decrease the potential of burnout (Cook et al., 2021; Lee et al., 2021; Powers et al., 2019; Winters, 2019).

The debriefing and discussion process provide the preceptor the opportunity to evaluate the thought processes behind the actions of the orientee and provides the orientee the opportunity to reflect. Clearly designated questions designed to facilitate reflective practice and evaluated with a rubric enable the preceptor to document progress of the orientee’s ability to assess risks in patient scenarios. Critical thinking skills and risk recognition require the ability to assess the patient, identify the highest priority or biggest risk to the patient, and strategize stabilization interventions (Boyer et al., 2018).

The complexity of knowledge and skill needed to be a competent emergency nurse requires a variety of teaching and learning methods, which may include the following:

- Self-paced learning modules with follow-up discussions
- Simulation with debriefing
- Traditional classroom lectures and group discussions
- Case scenarios
- Electronic learning
- Hands-on patient care with a competent and effective preceptor
- Hands-on competency skill training and evaluation using a validated tool
- Collaborative relationships with interprofessional members of the emergency care team
- Consistent application of teamwork principles
- Mentorship
- Scaffolding patient experiences (a teaching method that provides individualized support to students as they learn and develop a new concept or skill)

Firsthand experiences support and provide context for the didactic classroom lessons (Powers et al., 2019). Integral to onboarding is the ability of the learner to actively participate in, question, and critique the process. Incorporation of social integration and support into onboarding programs assists in facilitating the transition from orientee to emergency team member (ENA, 2022).

The preceptor functions as a failsafe for the emergency nurse orientee and the patient while modeling the desired characteristics and behaviors of the competent emergency nurse. The preceptor assignment, with a 1:1 ratio, will enable adequate individual instruction of the orientee while providing learning opportunities for them (Powers et al., 2019). Traditionally, the preceptee would follow a preceptor nurse

with their full assignment load. However, taking the preceptor off the daily staffing numbers to focus on and instruct the resident will provide a better experience. According to Ulrich (2019), having the preceptor focus on the new hire without burden of a separate assignment increases patient safety while onboarding. The preceptor role, specifically, can have a positive effect on the one-year retention rate of novice emergency nurses (Goss, 2015).

Preceptor confidence and competence are increased through specialized education in adult learning theories, feedback and evaluation communication, and conflict resolution (Powers et al., 2019). It is vital for the success of the orientee that the preceptor be competent and effective in their role and, ideally, participate in specialty-specific preceptor education targeting the challenges encountered in the ED environment (Wu et al., 2018). Having this specialty-specific training and education empowers the preceptor with the tools and resources needed to approach the challenges often experienced, such as communication, providing constructive feedback, escalating concerns, and addressing difficult conversations.

The broad spectrum and depth of information required to work in the emergency care setting can be overwhelming for the new and transitioning emergency nurse. To facilitate this transition, the onboarding program is individualized to the nurse rather than a designated time-period, with a focus on demonstrating the acquisition of the required knowledge and skill set to provide quality and safe care in the emergency care setting (Boyer et al., 2018). Current literature suggests that residency programs taught over 18 weeks with didactic instruction, clinical immersion, case studies, and structured mentoring or coaching enhance nurse competencies to the level of the competencies of nurses with 17 months of work experience (Gorman, 2019; Nursing Solutions Inc., 2023; Zaleski, 2019; Cline et al. 2018).

As the new nurse gains experience, competence, and readiness, additional specialty onboarding is required before performing sub-specialty roles, such as triage and charge nurse. Because of the staffing shortage and resource limitations, some hospitals have decided to prepare emergency nurses earlier for roles such as triage, trauma, and charge. Further information on the qualifications and competencies for the triage nurse role can be obtained from the *Triage Qualifications and Competency* position statement (Stone & Wolfe, 2017). As emergency nursing's professional association, ENA defines the specific scope of the specialty of emergency nursing (ENA, 2022).

The framework for emergency nurse onboarding content is derived in part from *Emergency Nursing Scope and Standards of Practice* (ENA, 2022), ENA's *Emergency Nurse Residency Program* (ENA, n.d.), and *Emergency Nursing Core Curriculum* (Sweet, 2018). Any of the above-mentioned onboarding programs and resources can help build a strong educational foundation for the emergency nurse or enhance a standardized program.

Providing emergency nurses, particularly new graduates and those transitioning to emergency nursing practice, with coping strategies may reduce the emotional exhaustion experienced by many and can improve the personal sense of accomplishment, ultimately reducing burnout and improving staff retention (Cook et al., 2021; Powers et al., 2019; Winters, 2019). Participating in a structured, specialty-specific, ED onboarding program is the starting point for professional growth (Powers et al., 2019; Wu et al., 2018). Continuous and ongoing professional development is essential to increasing a sense of personal accomplishment and subsequently decreasing burnout (Lee et al., 2021). Obtaining a specialty-specific residency program or developing one tailored for the new graduate or transition to practice nurses is an important investment (Silvestre et al., 2017). The return on investment due to increased retention rates and improved quality of patient care provides benefits, including a financial benefit for patients, nurses, and the entire organization.

Resources

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