

Examples of Exemplary, Average, and Poor Narrative Responses



Question: Explain your methods / strategies for ongoing emergency nursing staff development.

Exemplary - High Scoring Response:

High-performing organizations recognize the importance of professional development for new and experienced nurses. Our hospital system acknowledges the impact of nurse competency and satisfaction on patient care and outcomes. We strive for nurses to anticipate ongoing professional development throughout their careers and consider lifelong learning to be part of a healthy work environment. Tuition reimbursement and cohort programs with local universities offer continuing education and career advancement opportunities. Our emergency department (ED) service line encourages staff development by offering payment vouchers for nurses to take any exam offered by the Board of Certification for Emergency Nursing and provides the study materials needed for success. Additionally, the ED service line supports nurses achieving certification in other ENA endorsed courses including TNCC and ENPC. Although not required, TNCC certification is important to this ED to be able to effectively serve our community. In our department, 75% of our ED nurses are TNCC certified. This knowledge is critical to ensure optimal patient outcomes.

Pursuing staff development through other certifications is encouraged and supported as well. Currently, five team members maintain dual national nursing specialty certifications and another four team members are Neonatal Resuscitation Providers. In addition, some of our ED team members are ACLS, PALS, and TNCC instructors. In this manner, we are able to offer a dynamic team of ED specialists to care for our patient population.

A Clinical Ladder program offers another strategy to encourage nursing staff development. Nurses receive financial reward for demonstrating professional development in areas of leadership, continuing education, research and evidence-based practice, and engagement. There are four levels available to climb the ladder of professional development; one is the lowest and four is the highest. In our ED, 36% of our nurses are Clinical Ladder nurses and all of them practice at a level III.

Examples of Exemplary, Average, and Poor Narrative Responses



Average – Middle-band Scoring Response:

The process and structure for learning is continually evaluated utilizing Kirkpatrick's Four Level Evaluation Model. Various methods to assess learning, engagement, relevance and skills are used to gauge reaction and learning the first 2 levels in the Kirkpatrick's model. The nurse educators utilize evidence based exams and observe the degree of engagement and inquiry the clinical nurse exhibits to evaluate learning. Level 3 behavior is evaluated during the probationary period when the nurse is independently applying learning. The 4th level is tangible results of the learning process to improve quality and patient safety in the hospital.

A learning needs assessment of continuing education is performed annually for all nurses by the Nursing Education Department. The associated educational plan is developed to provide knowledge, skills and to ensure quality nursing care. During the orientation process, new staff also complete a self-learning tool to identify their own learning needs. Learning needs are also based on new programs, procedures, services, new technology, trends in nurse sensitive indicators and patient satisfaction. Requests for education from the ED staff, unit based council, evidence based council and request obtained through our mentor program in collaboration with the nurse manager are provided to the unit based educator. Learning opportunities are developed and in-services are coordinated. Continuing education and staff development is accomplished by unit based in-services, hospital grand round lectures and continuing education seminars offered at our facility. ED specific education and in-services are provided to the staff on various topics such as therapeutic hypothermia, intraosseous access, noninvasive hemodynamic monitoring, and care of the patient with a Left Ventricular Access Device and any additional skill pertinent to the care of the emergency patient. Collaboration with the unit based pharmacist for medication updates, service line experts i.e. Interventional Cardiologist and other support services are integral for ongoing education.

Examples of Exemplary, Average, and Poor Narrative Responses



Poor - Low Scoring Response:

The ED manager has served this team in this leadership role for just over a year. On the staff's yearly review, the ED manager sat down with each individual and spoke about their evaluations. The evaluation approach was looked at from the standpoint of "continue" and "consider." The ED manager and staff member also talked about where they were in their careers and wanted to work on growth opportunities and development. Many of the team members wanted to focus on pediatric development. We would estimate approximately 20% of staff would like to focus on their job at hand and are comfortable being in their current stage. Some of the reasons had to do with the pandemic and family and work stresses. With that, some staff still initiated board certifications during the pandemic. Everyone has been reassured to know if or when they want to grow; then ED leadership is 100% supportive in their development needs.

Feedback provided to applicant for this Low Scoring Response:

- Staff are encouraged to develop best practice opportunities and individual learning needs assessments are completed.
- Response does not indicate if professional development opportunities are provided by facility.
- Consider mentioning methods/strategies to provide ongoing emergency nursing staff development.
- Consider implementing annual education based on the needs assessment.
- Providing evidence of nurse involvement in committees, career ladder options, leadership skills development, portfolio development, ongoing educational opportunities, etc. would also improve this response.