Best Fit Orientation
A Novel Strategy for On-Boarding New Nurses

Dulce Torres, BSN, RN-BC; Lee Jeske, MS, RN, GCNS-BC; Sara Marzinski, BSN, RN, CCRN-K; & Mary Hook, PhD, RN-BC
Aurora St. Luke’s Medical Center, Milwaukee, WI
email: dulce.torres@ah.org

Problem
- Premature turnover of newly licensed registered nurses (NLNRN) is a costly problem for hospitals (Nursing Solutions, 2019).
- Orientation programs have changed little overtime (Kennedy, Nichols, Halamek, & Arafel, 2012) with effectiveness in question (Unruh & Nooney, 2011).
- Emerging evidence suggests that nurse practice environments are complex. On-boarding must expose NLNRN to the realities with opportunities to develop skills/confidence to manage challenges with support for choosing "best fit" position.

Best Fit Orientation (BFO)

- **Goal**: To design a novel onboarding approach for new staff utilizing standard on-boarding process with realistic job preview (RJP) on three units to determine the "best fit" position for the NLNRN.
- **Realistic Job Preview (RJP)** is a recruiting tool used to communicate the good and bad aspects of a job (U.S. Office Personal Management, 2018). Important features include establishing role clarity/expectations, coping, honesty, and self-selection to promote fit, satisfaction, commitment & low turnover (Breath & Stark, 2005).

Essential Features
- Specialized hiring process with "realistic job preview": 13 shifts of clinical experience on each of (3) selected units supporting preview of working relationships with unit leaders and co-workers.
- BFO Clinical Education Coordinator (CEC) individualizes orientation plan, matching orientee and their preferences with specific unit characteristics.
- Structured orientation with ongoing self-assessment, evaluation, and challenge management with "Transition Days" (2) and a final "Decision Day”.
- Central cost center to manage orientation expenses until unit choice is made.
- Celebration of Success.

Methods
- "Best Fit Orientation" (BFO) started in 2017 at a large quaternary ST-time Magneto-designated medical center.
- Target population: NLRN who are self-directed, with strong interpersonal skills but undecided regarding patient population.
- Developed tools and process to facilitate progression.

Compare: BFO vs Usual On-Board

<table>
<thead>
<tr>
<th>Features</th>
<th>Orientation</th>
<th>Best Fit Orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hiring process</td>
<td>Interview with unit managers</td>
<td>Panel interview with a unit manager, CNE, &amp; CEC</td>
</tr>
<tr>
<td>Realistic Job Preview</td>
<td>N/A</td>
<td>Self-assessments</td>
</tr>
<tr>
<td>Orientation Facilitation</td>
<td>Unit-based CNS, Nurse Clinician or Educator</td>
<td>BFO Clinical Education Coordinator</td>
</tr>
<tr>
<td>Structured Orientation Plan with Preceptor Support</td>
<td>12 weeks on 1 unit</td>
<td>12 weeks on 3 different units w/ transitions &amp; decision day</td>
</tr>
<tr>
<td>EHR Training</td>
<td>3 days (24 hrs)</td>
<td>Same</td>
</tr>
<tr>
<td>ECG Training</td>
<td>23 hrs with testing</td>
<td>Same</td>
</tr>
<tr>
<td>Supplemental Learning</td>
<td>Varies based on unit preference</td>
<td>Scheduled – typically 16-40 hrs</td>
</tr>
<tr>
<td>Orienteer Expenses</td>
<td>Unit cost center</td>
<td>Central cost center; Expenses transferred to hiring unit when chosen</td>
</tr>
</tbody>
</table>

Results
- All BFO orientees (n=21) completed orientation on time and hired by their chosen units.
- Consistently positive evaluations with high ratings for clinical knowledge, skills, confidence, and knowing how to access resources.
- High (95%) retention rate (July, 2019) with early engagement in professional activities by second year.
- Positive ratings from Unit Leaders and Preceptors.
- Budget neutral with expenses covered by hiring unit.

Conclusions / Implications
- Premature participant outcomes, engagement, and leader feedback is positive with no additional cost.
- Continue to monitor outcomes and employment duration to determine if effects are sustained over time.

References

Acknowledgements
- BFO Nurses
- Theresa Vos, MS, BSN, RN. Aurora St. Luke’s Medical Center (ASLMC), Vice President of Nursing and Chief Nursing Officer
- Mary Beth Kingston, PhD, RN, NEA-BC, Advocate Aurora Health Chief Nurse Executive
- Renee Oleson, BSN, RN, ASLMC Clinical Education Coordinator
- ASLMC Unit Managers, Clinical Nurse Specialists, & Nurse Clinicians, Staff from the ASLMC Advance Practice Nursing Department and the Center for Nursing Research & Practice

Aurora St. Luke’s Medical Center is proud to be Magneto recognized by the American Nurses Credentialing Center.