

Transition to Intensive Care Nursing: Establishing a Starting Point

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Abstract

Introduction: A supported transition to intensive care (IC) nursing has been identified as a key strategy for recruitment and retention. In 2004 a discussion document relating to transition of IC nurses was presented to the New South Wales (NSW) Chief Nursing Officer (CNO). A workshop was held with key stakeholders and a Steering Group was established to develop a state-wide transition to IC nursing program.

Aims: A Working Party was tasked with developing definitions, goals, learning objectives and clinical competencies relating to transition to IC nursing practice on which to base a transition program.

Methods: A draft document of definitions, target group, goals, learning objectives and clinical competencies for IC transition was distributed to the nursing manager of 43 NSW IC units with an invitation to participate. Responders were asked to indicate (a) agreement; (b) modify content; (c) delete content; (d) suggest modifications and additions.

Results: From June 2005 and February 2006, 29 units responded (67%). The sections "Definitions", "Target Group", "Transition Goal", and "Transition Core Competency Statements" were accepted, with minor editorial change, as there were less than five "modify" responses for each. Based upon responder feedback 19 learning or psychomotor skills objectives were added and 17 existing learning or psychomotor skill objectives modified.

Conclusion: The work confirmed the need to establish valid definitions, goals, learning objectives and clinical competencies that describe transition to intensive care nursing. The work provides a common ground on which, hopefully, an effective NSW state-wide transition program to IC nursing can be built.

Background

RNs in intensive care require specialised knowledge and skills to safely and effectively care for critically ill patients. Individual ICUs in NSW have developed orientation and/or transition programs, however, there are currently no formal mechanisms for sharing information, resources and experience across NSW in relation to transition programs. There is potential for variable content and outcome objectives across programs.

Lack of availability of standardised programs may result in variability in content and outcomes as well as lack of equity to access programs for nurses working in or wishing to work in intensive care.

The NSW Health Nursing and Midwifery Office recognised the need to provide for a transition to intensive care nursing practice program that;

•was portable throughout the state.

•had equity of access.

•was based upon common learning objectives and clinical competency outcomes.

•enabled the sharing of educational resources.

Results

Definitions

Transition Program

Formal program of education and clinical support designed to facilitate the transition to intensive care nursing.

Transition

The period of learning, adjustment and socialisation, when the nurse applies, consolidates and increases their existing knowledge, gaining competence (knowledge, skill, and attitude) that is applicable to the nursing practice of the clinical setting or patient population in which they are expected to perform.

Outcome standard

A registered nurse able to provide safe and effective care for a critically ill patient in ICU and characterised by the range of attributes "supervised" to "independent".

Critically ill patient

A patient with an actual or potentially life threatening condition requiring intervention to support organ function eg, mechanical ventilation support, haemodynamic monitoring/support, renal replacement therapy.

Competence

Competence is considered to have three components, educational outcomes (or knowledge) psychomotor skills and attitude/behaviours.

Intensive Care Transition Target Group

- New employees with little or no intensive care experience.
- New employees with intensive care experience but without formal qualifications.
- Experienced nurses wishing to make a transition to intensive care nursing.
- Nurses returning to intensive care.
- Individual nurse professional development.

The program is targeted at the needs of a registered nurse in a process of transition to intensive care nursing and working in a level 5 or 6 intensive care unit (equivalent to level 2 or 3 of JFICM Guidelines), i.e. a unit that can at least provide mechanical ventilation, extra-corporeal renal support and invasive cardiovascular monitoring for a period of several days.

Intensive Care Transition Program Goal

At the end of the transition program the participant should be able to demonstrate core competencies that are essential for the delivery of safe and effective care to patients in the intensive care unit.

Competency development is a dynamic process involving learning and experience, which occurs over time. It is envisaged that the registered nurse undertaking the transition program will, by the end of the program, exhibit nursing practice that can be characterised as "supervised to independent".

Results (Continued)

Intensive Care Transition Program Core Competency Statements

At the completion of the transition program the participant will be able to;

A	Maintain an environment that contributes to the delivery of safe and effective care.
B	Assess, plan, implement and evaluate interventions that are required because of the patients altered dependency state including response to stress, eye, mouth, pressure area care, positioning, bowel care, and temperature regulation.
C	Assess the adequacy of a patient's ventilation and oxygenation and provide safe and effective care to patients receiving ventilatory and/or oxygenation support.
D	Assess the adequacy of a patient's cardiovascular function and provide safe and effective care to patients requiring haemodynamic monitoring and cardiovascular support.
E	Assess the patient's fluid and electrolyte status and provide safe and effective care to patients requiring fluid and electrolyte management.
F	Assess the patient's gross neurological function and provide safe and effective care of patients with neurological dysfunction.
G	Assess and plan safe and effective care for the critically ill patient suffering from gastrointestinal or metabolic dysfunction.
H	Identify the consequences of critical illness.

A full copy of the educational objects and clinical competencies can be obtained by request to;

email: martin.boyle@sesiahs.health.nsw.gov.au

Discussion

The Queensland Health Transition to Intensive Care Nurse Education Program is an example of a standardised approach to intensive care nursing clinical development.

Where there is a lack of clarity it is perhaps best to go back to first principles: to define the context (patient and place); to define the outcome (safe and effective care); then the scope and elements of practice (knowledge, attributes and clinical competence), the community of practitioners (intensive care nurses) considers to be required. The refining and validation of the definitions, goals, target group, and clinical competencies took this approach. The resulting material provides a starting point, with face validity, from which to develop a NSW State-Wide Transition to Intensive Care Nursing Program. In addition, the work provides a set of common definitions and objectives against which existing hospital based programs can be reviewed.

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