



CONFERENCE ABSTRACT

Interventions Supporting New Graduate Nurse Transition into Critical Care: A Systematic Review

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Background: New graduate nurses have reported feelings of disorientation, discouragement, overwhelm and lack of confidence as they transition from nursing school to the practice environment. These feelings and a poor transition to practice can lead to burnout and turnover. New graduate nurses generally have a high turnover risk. Given the demands of specialty nursing practice environments like the intensive care unit, new graduates transitioning to critical care may be at an even higher risk of a poor transition to practice and risk of turnover.

Aims: To present preliminary findings from a systematic review that aimed to identify, describe and report on the effectiveness of interventions that support new graduate nurse transition into critical care settings.

Methods: A systematic review modelled on Joanna Briggs Institute methodology was designed. A systematic, peer-reviewed search was conducted in the following databases: OvidMEDLINE ALL, Embase Classic+ Embase, PsychINFO on OVID, CINAHL and Education Source on Ebsco, Nursing and Allied Health and ERIC databases, in addition to a grey literature search. For inclusion, the population of interest was new graduate nurses and all forms of intervention about transitioning new graduate nurses into critical care clinical practice were considered. Contexts of care encompassed all critical care settings as well as emergency departments.

Findings: At this stage of the review, twenty-six articles met inclusion criteria encompassing interventions implemented in four countries: USA, Canada, China and Australia. Findings related to intensive care units as well as emergency departments were reported. All interventions were unique in nature resulting in a significantly heterogeneous sample. Where qualitative designs were used, four synthesized themes were generated.

Conclusions: Preliminary review findings suggest that, to date, interventions implemented to support new graduate nurse transition into intensive care unit and



emergency department contexts are unique and thus heterogeneous in nature. Despite the heterogeneity, common intervention elements are discernable and provide some direction regarding practices that support new graduate transition into critical care.