

Evolving Recruitment Strategies through the Development of a Research Nurse Residency Program for New Graduates

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1. Background

Research is an integral element in the care of patients and the mission of MD Anderson Cancer Center (MDACC). Last year, more than 10,800 patients were enrolled in 1,250 plus active clinical trials across the institution. The clinical research nurse (CRN) plays a pivotal role in managing the trials, including assisting the Principal Investigator in reviewing eligibility criteria, coordinating care, and monitoring the patient to identify any safety concerns and reporting those concerns according to regulations. Recognizing the growing challenge of recruiting and retaining CRNs and its potential to impact the ability to conduct trials, interprofessional leaders worked collaboratively to address this concern and identify evidence based, and innovative solutions. As a result, design and implementation of the Research Nurse Residency (RNR) program for nurses with less than one-year experience, was identified and implemented as one solution.

2. Goals

The goals of the RNR program were to develop an additional means of recruitment of CRNs to reduce the vacancy rate and improve retention of CRNs throughout the institution by providing a strong foundation and orientation program that would enable the institution to foster a robust, experienced CRN workforce.

3. Solutions and Methods

The RNR program for the CRN was developed to be complementary to the institution's existing Clinical Nurse Residency Program as well as with current onboarding CRN practices. The RNR curriculum consists of a four-week orientation followed by monthly residency classes over a twelve-month period. Orientation concentrates on the role of clinical research using a variety of educational methods. In the assigned department, the participant is paired with an experienced CRN for department specific orientation. Monthly residency classes expand on clinical research topics, including simulation exercises, oncology content, transition to practice, and education specific to the MDACC institutional role of a CRN. Support from a dedicated clinical research educator is also provided.

4. Outcomes and Future Directions

The first cohort of four RNR participants started in October 2016. More than 875 applications have been received for the program. Forty residents have started the program with 26 graduates resulting in an increase in the CRN workforce. Five residents have left the institution for varying reasons. Retention rates correlate with those outside of the program. Outcomes will also be measured utilizing the Casey-Fink Graduate Nurse Experience survey including questions based upon recognized Oncology Trials Nurse Competencies. Feedback has been overwhelmingly positive from both residents and research departments, with departments participating in multiple cohorts. An unanticipated benefit of the

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program has been increased interdepartmental communication and collaborations across the institution resulting in sharing of best practices and other new initiatives.

Preceptors who are engaged and empower the CRN residents to become competent CRNs prove to be essential to success. In addition, a robust department orientation is key to provide the CRNs with a strong foundation of learning the role with the accompanied educator support to provide added opportunities and resources. Currently, the initial four-week orientation is only provided to CRNs in the residency program. Future plans include expanding this intensive orientation to all new CRN hires.