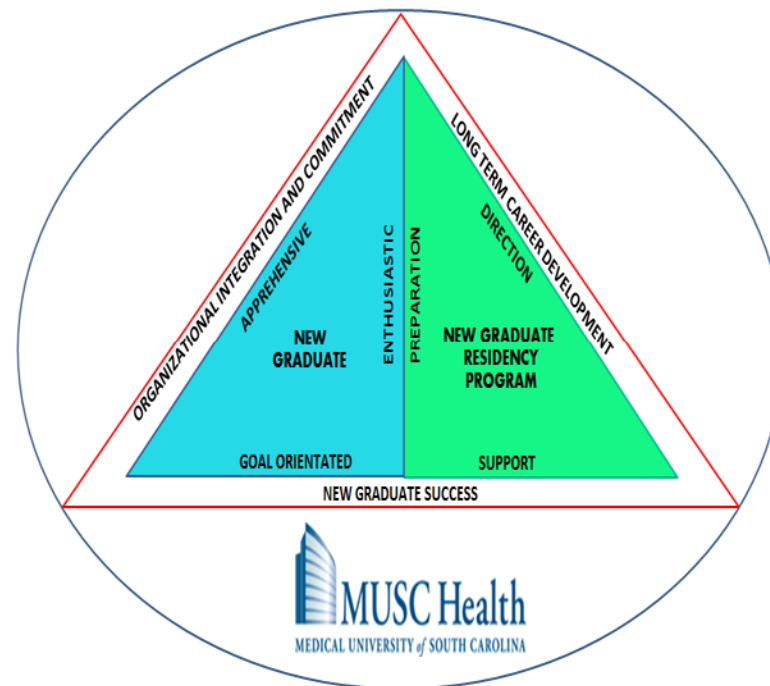


Brochure for Prospective Nurse Residency Candidates



Medical University
Of
South Carolina
and
University HealthSystem Consortium
Presents
**Nurse Residency
Program**

AN OUTCOME ORIENTED NURSE RESIDENCY PROGRAM FOR NEW GRADUATES AT MUSC



Contact Information:

MUSC Nurse Residency Program
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Overview

MUSC and Vizient have prepared a Nurse Residency Program (NRP) for the RN that is less than one year past graduation. “The program is intended for nurses with direct care roles in the acute care hospital setting. Transition experiences emphasize the development of the clinical and leadership skills necessary for the advanced beginner nurse to be successful as a full partner on the health care team.

At the conclusion of the residency the graduate nurse will:

- Make the transition from advanced beginner nurse to competent professional nurse in the clinical environment
- Develop effective decision-making skills related to clinical judgment and performance
- Provide clinical nursing leadership at the point of care
- Strengthen his or her commitment to nursing as a professional career choice
- Formulate an individual development plan for his or her new clinical role
- Incorporate research-based evidence linked to practice outcomes into the care he or she provides

Benefits

The benefits for the new nurse who participates in the NRP will be:

- Guidance from dedicated, trained preceptors during the orientation phase of the residency program
- Mentored clinical relationships supporting their development as professionals throughout the 1-year program
- Structured educational experiences designed to develop competence in clinical nursing practice
- Membership in a supportive cohort that allows for professional growth in a safe, protected environment
- The opportunity to gain experience in clinical practice in an environment committed to learning
- Salary compensation and a defined benefit package as determined by the hiring unit”¹

1.Guidelines adapted from the University HealthSystem Consortium Nurse Residency Program.

Criteria for Participation

Participants must:

1. must be hired as an RN I at MUSC either in a specific patient care area or into the MeduFlex Resource Staffing Pool
2. be a graduate from an accredited generic nursing program with less than 1 year RN experience.
3. have licensure to work in the state of South Carolina as a registered nurse
4. willingness to commit to the 1-year residency program
5. commit to working full-time during the first year
6. participate in general and specialized learning experiences

(Applicants can be interviewed and hired by individual units as new graduates or by the MUSC Resource Staffing Unit (MeduFlex). Either portal of entry into MUSC as a new graduate requires participation and attendance in the Nurse Residency Program.)

History of MUSC

A Brief History of MUSC

The Medical University of South Carolina has served the citizens of South Carolina since 1824. It has expanded from a small private college for the training of physicians to a state university with a medical center and six colleges for the education of a broad range of health professionals, biomedical scientists and other health related personnel. The colleges are: nursing, medicine, dentistry, pharmacy, health professions and graduate studies.

Growth in the Past 25 Years

In 2009, MUSC had 1,315 Full-time faculty members.

Expansion in enrollments and programs has been made possible by ambitious programs of physical plant development that have seen the institution grow from one building in 1913 to an 82-acre medical complex, with 93 buildings. Since 1985, eight new buildings have been constructed: East Wing and Children's Hospital (1986), Institute of Psychiatry (1988), North Tower (1993), Harper Student Center (1993), Holling Cancer Center (1993), The Strom Thurmond Biomedical Research Center and the Gazes Cardiac Institute (1997) in cooperation with the VA Hospital, Basic Science Mechanical Expansion Building (2004), Charles P. Darby Children's Research Institute (2005), and Ashley-Rutledge Parking Garage (2005), and the Ashley River Tower (2008). In addition there have been major renovation/addition projects including Storm Eye Institute expansion (1998), Rutledge Tower Ambulatory Care Facility renovation (1998), College of Health Professions Complex (2005), Hollings Cancer Center Tower expansion (2005), Colcock Hall (2005-2006), Central Energy Plant (2006) supports phase I of the replacement hospital and additional phases. Recently completed projects include the new James B. Edwards College of Dental Medicine Clinical Education Building, and a new Bee Street Parking Garage. The recently completed Drug Discovery Building and the Bioengineering Building were built in collaboration with the University of South Carolina and Clemson University.

Among our newest buildings is the Ashley River Tower (ART), Phase I Replacement Hospital with 156 beds, focusing on delivering quality heart, vascular, oncologic surgical and digestive disease services. This brings the total number of beds to 709. The first of its kind on many levels in the Southeast, ART added 641,000 square feet of clinical space and feature a diagnostic and treatment building, patient hospitality tower, and a conservatory designed to connect the two spaces while offering a comfortable gathering place for patients, families and employees.

Curriculum

The MUSC NRP Plan consists of a 12-month program with each cohort being comprised of new graduates hired biannually. Cohorts meet monthly with classes beginning at 07:30 and lasting between 4-8 hours. A variety of structured and informal instructional methods are used to create an interactive open learning environment. The curriculum is designed to facilitate application of evidence-based practice into the new graduates' professional practice.

Cohort Distribution:

- Cohorts will be broken down by *Clinical Zones* to allow each presenter to use clinically relevant examples when discussing topics. Depending on participants, proposed division is as follows:
 - o Children's & Women's (may be divided into 2 cohorts depending on number of residents)
 - Peds Med/Surg
 - Peds ICU
 - Peds ED
 - NICU & Special Care Nurseries
 - Women's
 - o Adult Specialty (may be divided into 2 cohorts depending on number of residents)
 - Adult Med/Surg
 - ICU
 - ED
 - Periop
 - PACU
 - IOP
- Cohorts will be further divided into *Clinical Practice Areas* for topic debriefing and small group discussion. Debriefings will be lead by the NPDS or CPE of the respective clinical practice area.

Example:

- Cohort: Children's & Women's
- Global Topic Presentation: Palliative Care & Ethical Issues
- Debrief & Small Group Discussion: Lead by NDPS/CPE for each area
 - o Peds (may be further divided)
 - o NICU
 - o Women's

Curriculum Outline:

Class	Content
1	Welcome Diversity & Inclusion Program Overview and Expectations Identifying Personal Strengths – Myer’s Briggs Personality Profile
2	ANA Scope & Standards SC Nurse Practice Act Delegating & RN/PCT relationship TJC/CMS & DHEC Debrief and Small Group Discussion
3	Skill Day (Validation of Skill and Documentation in Epic) <ul style="list-style-type: none"> - Interpretation of & Response to: <ul style="list-style-type: none"> o Important Lab Values o Respiratory Changes o Hemodynamic Changes - IV Medication Administration - Central Line Care and Access - Sterile Gloving and Sterile Field
4	Recognizing & Responding to Patient Emergencies Sepsis Debrief and Small Group Discussion
5	Interactive Patient Engagement Patient & Family Centered Care De-escalation of the combative situation Debrief and Small Group Discussion
6	Bullying & Lateral Violence Conflict Resolution Debrief and Small Group Discussion (?)
7	Using Evidence in Practice Facilitator Meeting, Group selection, topic identification
8	Self-Care Compassion Fatigue Yoga and Meditation Facilitator Meeting, Solidifying the EBP
9	Quality Outcomes <ul style="list-style-type: none"> - CAUTI - CLABSI - SSI - Skin & Wound Care - Transfusion Stewardship Debrief and Small Group Discussion (?)

10	Palliative & End of Life Care Ethics Debrief and Small Group Discussion (?)
12	Professional Boundaries HIPPA Value Based Care Facilitator Meeting, Finalizing the EBP
12	RN II & Clinical Ladder Magnet & Shared Governance Career Planning & Resilience Facilitator Meeting, EBP Rehearsal