

Making Strides: Dedicated Trauma Nurse Lead Program Improves Overall Nursing Experience

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Abstract

The aim of this study was to assess whether the trauma nurse lead (TNL) roles as a quality educator, nursing resource, expert provider and proponent of program advancement would have a positive impact on the nurses who provide the primary, bedside care for the trauma patient including reduction in emotional stress, increase in confidence in the care they provide and to ensure adequate support from their colleagues. A Likert scale survey was randomly distributed to nurses working in a Level 2 trauma center within the Emergency Department, Intensive Care Unit and Step-Down units. Linear regression models illustrated the strongest associations for passion for education, providing excellent care, availability, seen as experts in trauma and providing a sufficient report between the TNL's and improvement of overall nursing, self-reported experience. This information can help guide future research endeavors and to help implement similar programs within trauma centers to help improve not only patient outcomes, but also reduce emotional exhaustion and burnout in the nurses providing the front line care.

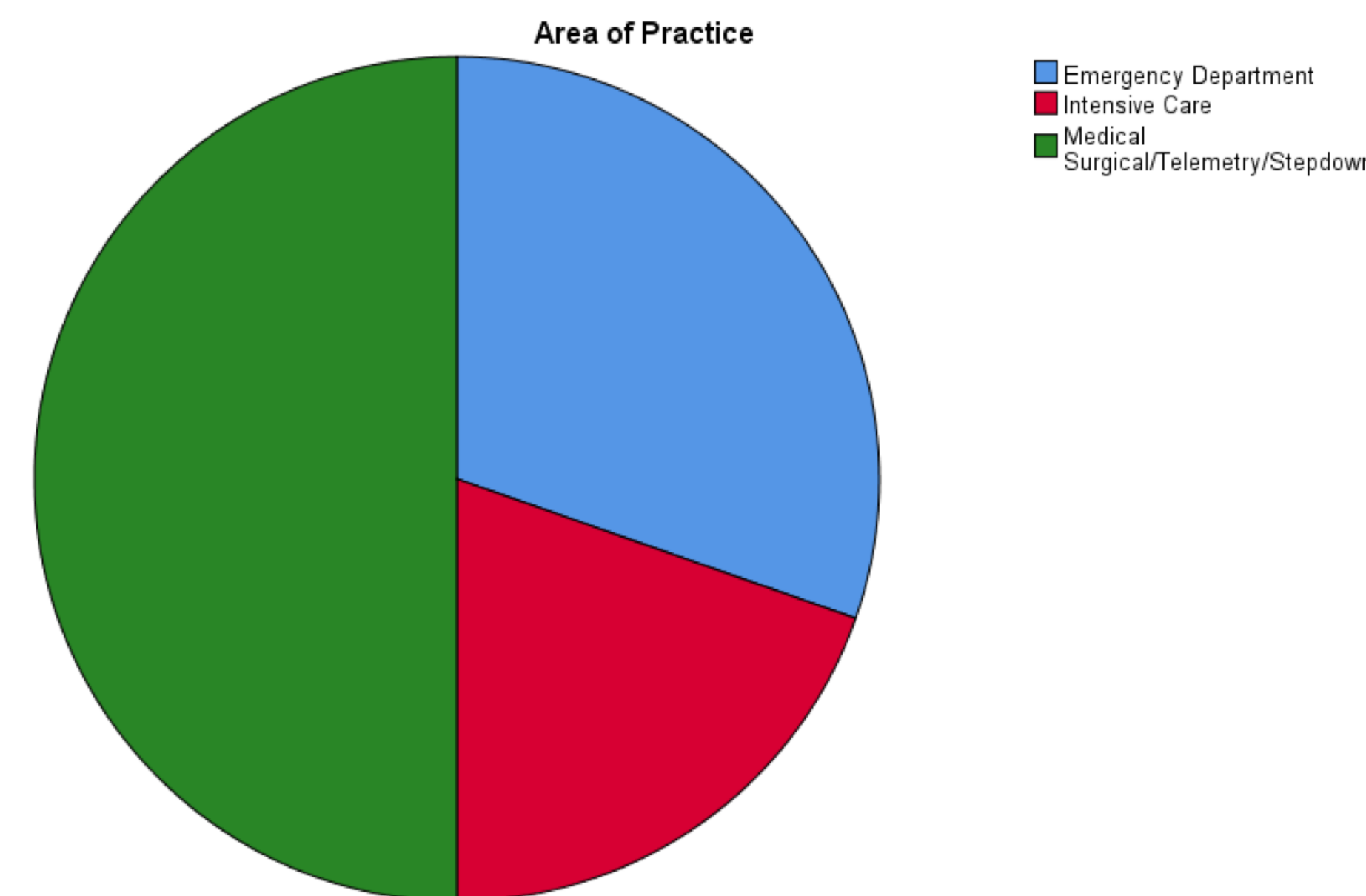
Introduction

Historically, trauma nurses experience more emotional exhaustion, post traumatic stress and perceived burnout in comparison to their counterparts. Multiple research studies have shown potential causes of this disparity. Despite this fact, little research has been done to examine possible solutions. Numerous trauma centers nationwide have undergone the initiative of instating a dedicated trauma nurse lead (TNL) program. The TNL works directly with the trauma surgeons and providers in trauma resuscitation, participate in rounds, leads trauma education and assists nurses in all departments of the hospital. The recent development of a TNL program, begs the questions, does a TNL program improve overall nursing experience and reduce burnout in nurses caring for trauma patients through the inpatient setting?

Methodology

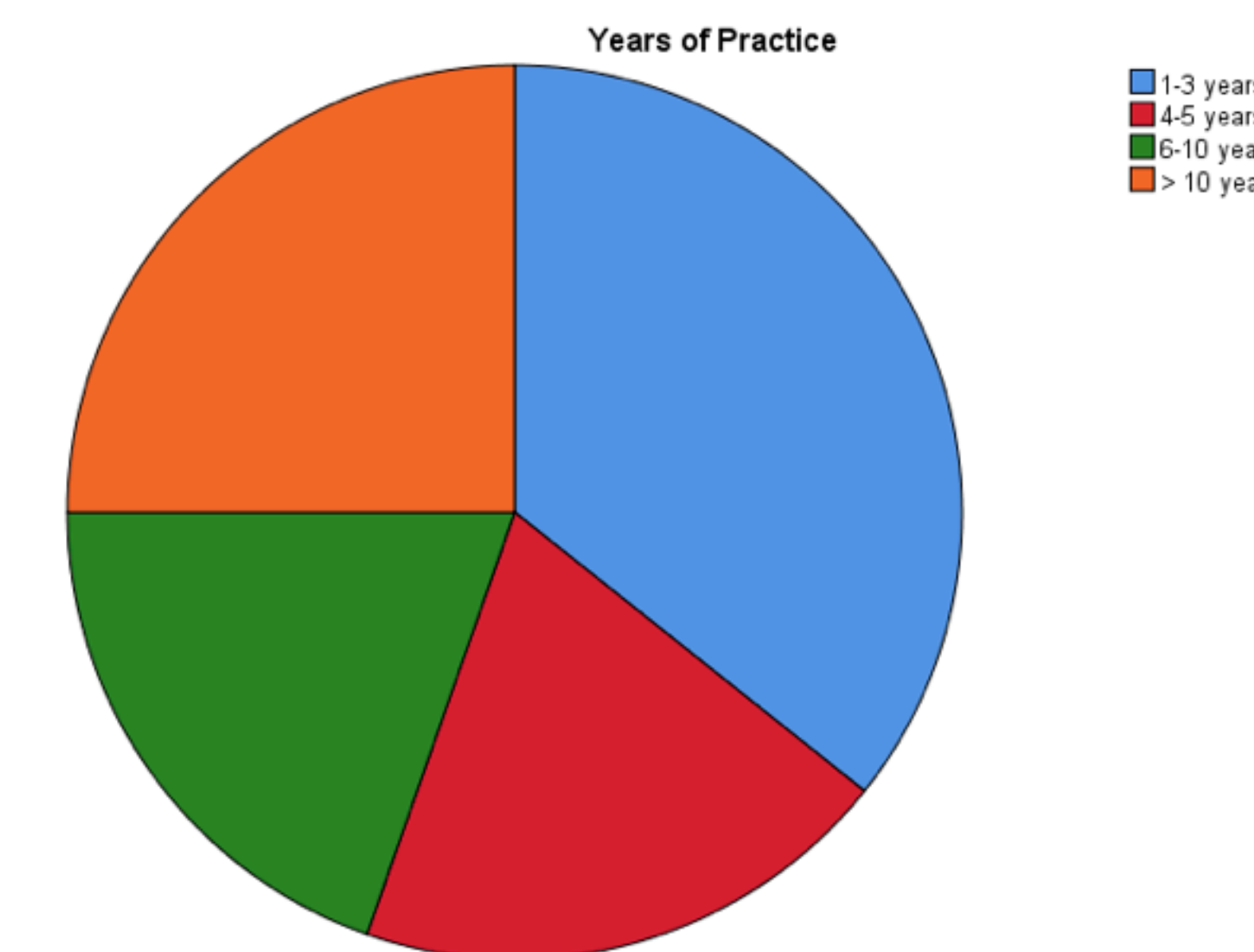
A 25 item questionnaire using a Likert scale was randomly distributed to nursing staff in a level 2 trauma center in the emergency department, critical care unit and med surg/telemetry units that care for trauma patients. A convenience sample of 56 nurses who care for trauma patients were used. Only nurses who were employed continuously at the facility before, during and after instillation of the trauma program were included. All included participants were over the age of 18. A total of 60 surveys were distributed and 56 were returned completed. Questions were designed using a 5 point Likert scale from strongly disagree to strongly agree, minus 3 demographic questions. A linear regression model was then used to analyze data from returned, completed surveys.

Area of Practice		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Emergency Department	17	30.4	30.4	30.4
	Intensive Care	11	19.6	19.6	50.0
	Medical	28	50.0	50.0	100.0
	Surgical/Telemetry/Stepdown				
n					
Total		56	100.0	100.0	

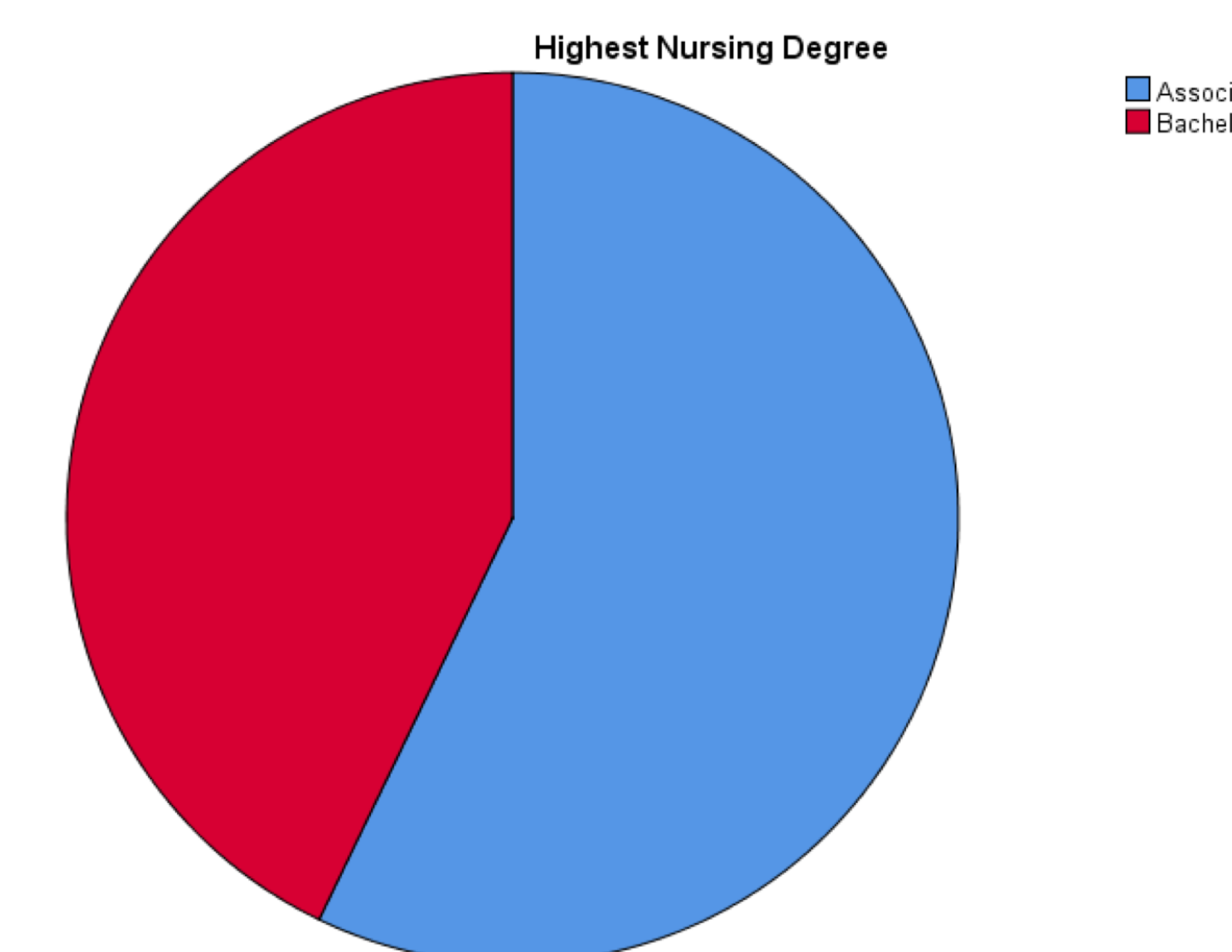


		ANOVA				
		Sum of Squares	df	Mean Square	F	Sig.
Asset	Between Groups	.758	2	.379	1.462	.241
	Within Groups	13.742	53	.259		
	Total	14.500	55			
Contribution	Between Groups	1.046	2	.523	2.669	.079
	Within Groups	10.383	53	.196		
	Total	11.429	55			
Confidence	Between Groups	.645	2	.322	.740	.482
	Within Groups	23.070	53	.435		
	Total	23.714	55			
Satisfied with Care	Between Groups	.405	2	.203	.633	.535
	Within Groups	16.952	53	.320		
	Total	17.357	55			
Better Care	Between Groups	.243	2	.122	.323	.725
	Within Groups	19.971	53	.377		
	Total	20.214	55			
Overall Satisfaction	Between Groups	.482	2	.241	1.021	.367
	Within Groups	12.500	53	.236		
	Total	12.982	55			

Years of Practice		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1-3 years	20	35.7	35.7	35.7
	4-5 years	11	19.6	19.6	55.4
	6-10 years	11	19.6	19.6	75.0
	> 10 years	14	25.0	25.0	100.0
Total		56	100.0	100.0	



Highest Nursing Degree		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Associate	32	57.1	57.1	57.1
	Bachelor	24	42.9	42.9	100.0
Total		56	100.0	100.0	



Results

A linear regression model was obtained using SPSS. The TNL program had statistically significant ($p < 0.05$) impact on improvement in confidence of nursing abilities with the strongest associations in passion for education ($t = 5.121$), excellence of care ($t = 4.164$), availability ($t = 3.883$), experts of trauma ($t = 2.828$) and patient handoff report ($t = 2.585$). The program also showed significant ($p < 0.05$) impact on increased satisfaction of care provided by nurses with strong associations of experts of care ($t = 4.575$), knowledge and skills ($t = 4.487$), availability ($t = 3.397$), patient handoff report ($t = 3.184$) and teaching opportunities ($t = 2.323$).

Discussion and Implications

The TNL program showed the most significant impact on bedside trauma nurses by helping boost the confidence in their abilities and increasing the satisfaction of the care provided. Lack of confidence, doubt and loss of job satisfaction are all known indicators of increased emotional exhaustion, burnout and post traumatic stress experienced by nurses caring for the critically injured patient. This study demonstrates a successful TNL program which adheres to the roles as education proponent, nursing resource, excellent provider of trauma nursing care and passion for the progression and success of a trauma program can positively effect the disparity experienced by those trauma nurses. Future research should be directed to include nurses within the operating room and a larger sample size from multiple trauma centers located in different settings such as urban and rural environments.

Contact Information

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