

Alumni Make an Impact through Roswell Park Nurse Residency Program

BY TERRA OSTERLING

Roswell Park Comprehensive Cancer Center, Buffalo's 120-year-old internationally recognized innovator in multidisciplinary approaches to cancer care, is making more advances in both nurse and patient experience thanks to their Nurse Residency Program.

The program, created in 2017 with an oncology-specific curriculum, is Western New York's only Accredited Practice Transition Program with Distinction recognized by the American Nurses Credentialing Center (ANCC). The retention initiative supports new graduate oncology nurses as they transition into their first year of professional practice; one program requirement has participants complete evidence-based projects. Two projects recently completed by University at Buffalo School of Nursing alumni have made a lasting impact.

“Having the opportunity to challenge my skills and critical thinking while being a part of saving a patient is an extremely rewarding feeling, and I wish Joe and his family the best.”

“For new nurses, the requirement to do a research project at work can sometimes come as a shock, but we’ve found those who come to us from UB are very prepared for this,” said Heather Huizinga, MSN, RN, OCN, Roswell Park’s director of nursing professional development practice and research (formerly the program coordinator for the Nurse Residency Program (NRP)).

During each year-long cohort, the nurses in the NRP meet four hours monthly, spending time on clinical reflections and relationship-building, developing skills using game-based didactic methods, learning from speakers presenting on critical oncologic topics, and conducting their evidence-based projects.

The projects, Huizinga said, are part of a shift in the nursing landscape – research in the clinical setting has always been emphasized for doctors, but historically not for nurses.

“Providers dedicate time and research to evidence as part of their professional growth, and nurses deserve this, too,” Huizinga said. She also noted that new graduates arrive with an abundance of fresh ideas to share. “Our Nurse Residency Program gives them a voice and space to be respected as professionals who can, should and will continue to grow,” she said.

Helping New Nurses Transition to Practice

It was the experience of being a new nurse that informed the evidence-based project topic advanced by Jasmine Silvagnoli, BS, RN, and her project team. As a May 2020 graduate of UB School of Nursing, Silvagnoli, who had her last student clinical rotation at Roswell Park and was elated to be back, and her peers were transitioning from school to careers while enduring the unique pressures of the early months of the COVID-19 pandemic.

This inspired Silvagnoli and her colleagues to turn the lens on themselves and their fellow new nurses. Because, while healthy coping mechanisms are formally taught, the struggle to transition from school to clinical practice is rarely discussed, she said.

“The first thing we’re taught in nursing school is that to take care of people, you first have to take care of yourself,” Silvagnoli said. “Being a new nurse comes with a roller coaster of feelings.”

Stress, anxiety, feeling judged and even instances of bullying can blight a new nurse’s introduction into their career. “For my project, I thought about [what I wanted] as a brand-new nurse,” Silvagnoli said.

First, her team devised and circulated a survey among nurses in their first two years of clinical practice. Their data served to better understand the stressors that may mentally, emotionally and physically burn out new

nurses. Their findings showed that more than half of the respondents felt overwhelmed or judged at work, and nearly half felt anxiety before their workday began.

The second part of Silvagnoli’s project was to implement a specific supportive strategy: mentorship. Silvagnoli, along with her colleagues, each took on one to two new nurses to mentor during their orientation period. (To avoid bias, they mentored nurses from units outside their own.) Participants later reported that overall, the program was beneficial to their transition in a new oncology environment, and the exit survey showed reductions in feelings of judgement, being overwhelmed and anxiety.

“It is really important to show the true numbers of how new nurses struggle,” Huizinga said. “Especially in oncology, which can be extremely difficult emotionally and physically.”

Roswell Park, she said, has taken the findings of Silvagnoli’s project and formalized a mentorship program. The move is aligned with the institution’s pursuit of Magnet status, as preparing nurses for work in oncology and improving job satisfaction for nurses (and, in turn, improving retention rates) contributes to higher levels of care.

Implementing the program has been comprehensive. On the mentor side, Roswell Park designed an online course to teach the mentors their role and responsibilities. On the mentee side, new nurses voluntarily access an app that displays mentor profiles so that they can choose someone with similar interests or goals.

Improving Communication Strategies for Better Patient Care

Implementing a simple change for a high return on investment – for both patients and nurses – was also at the center of the evidence-based project completed by Paul Carbrey, BS, RN, and his team. The idea germinated while Carbrey, also a 2020 graduate of UB School of Nursing, was still a

student working as a nurse’s aide at Roswell Park: how communication across a unit can impact patient experience.

“For example, patients with a tracheotomy aren’t able to answer back after pressing the call button,” he said. Nurses answering the call board might not know of their speech limitation, often leading to patient frustration. Notes might be posted on the board, but there was no consistent or formal process for communication from shift to shift about which patients had particular needs or challenges.

Carbrey also noted other impacts of uneven communication, resulting in fevered sprints to find from which room a bed alarm may be sounding, and varying levels of awareness about which patients may be on comfort care or have a DNR/DNI. For their study, Carbrey’s team implemented posting a daily guide sheet in their unit in hopes of advancing the transfer of this type of patient care information. The

sheet, which included noting patients with tracheotomies and those on bed alarms or at high-risk for falls, became a charge task.

The results of his group’s project were astounding. Not only did 83% of staff find the sheet helpful, the unit’s average number of falls per month plummeted, dropping to 0.66 during the study from 2.16 measured over six months prior.

“It was the largest difference in fall rates we had ever seen,” Huizinga said. “The projects don’t need to be complicated ideas, but they do need to be evidenced-based, and Paul’s project worked precisely because of the insightful observance of a new nurse.”

“What made my project easier to accomplish were all the evidence-based courses I had taken at UB,” Carbrey said. “I felt very prepared for both the workplace and the nurse residency program.”

Like Silvagnoli’s project, Carbrey’s is now in regular practice at Roswell Park. The sheet has been replaced by a white board posted next to the call system, and a mid-shift huddle (part of the project’s initial recommendations) has been added to increase verbal communication. Plans to duplicate the tool across units are in the works.

In addition to the compelling evidence presented in each project, both shared other key factors that led to adoption by Roswell Park – simplicity to implement, enthusiastic buy-in from fellow nurses, and garnering the praise of management when presented at the program-end ceremony attended by Roswell Park nurses, nursing students, managers and the chief nursing officer.

Ultimately, each project also centered patients. “We have people’s lives in our hands,” Silvagnoli said. “It’s the reason behind everything we do.”



Jasmine Silvagnoli



Paul Carbrey