

Registered Nurse  
Graduate Survey



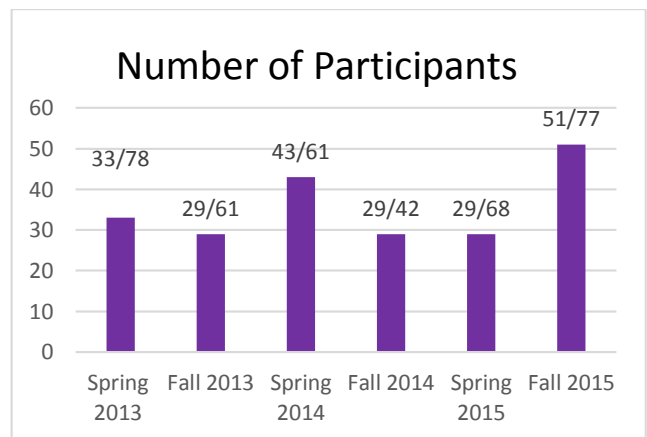
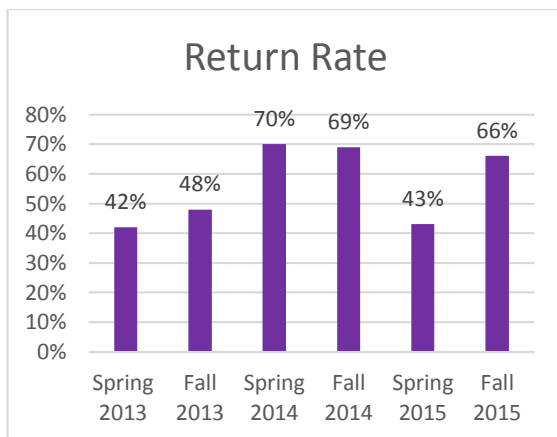
Department of Nursing Education  
Joliet Junior College  
Nursing Graduates of Fall 2015  
(6 - 9 month follow-up)



## Introduction

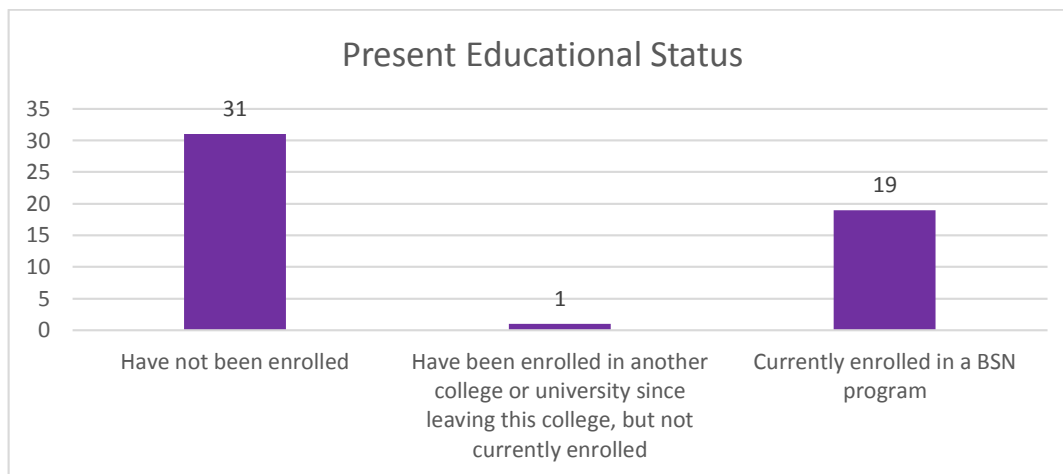
Graduate surveys (obtained via Survey Monkey) are sent approximately six (6) months to nine (9) months after the student graduates, which made the target date in July 2016 for the graduating class of December 2015. The survey was sent out to seventy-seven (77) graduates on July 13, 2016 via the student's personal e-mail address, which they provided to us prior to graduation. On July 18, 2016 twenty-five (25) graduates replied, so a reminder was sent. On July 25, 2016 thirty-seven (37) responded and a final reminder was sent which indicated a closing date of July 29, 2016. On July 29, 2016 the survey was closed with fifty-one (51) graduates participating. The overall response rate for this survey group is 66%.

## Historical Data Trends:



## Results:

**Educational status** (51 out of 51 responded): 37.2% (n=19) indicated that they are enrolled in a BSN program. 60.8% (n=31) are not enrolled in a BSN program. Zero (n=0) of responding graduates is currently enrolled in a RN-MSN program and 1.96% (n=1) have been enrolled in another college or university since leaving this college, but not currently enrolled.



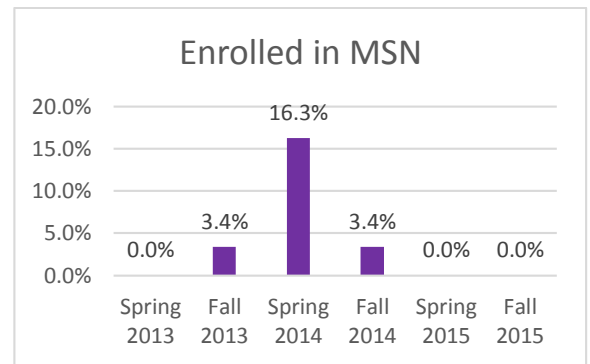
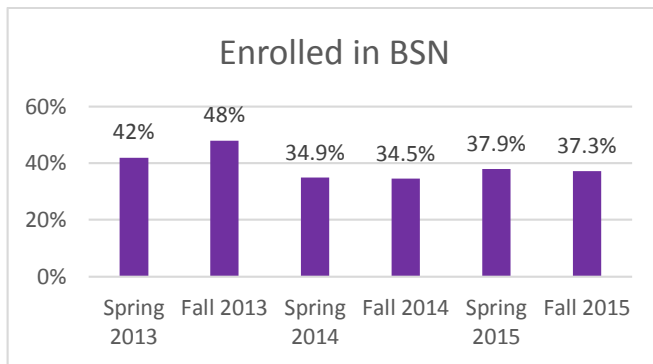
Enrollment in a BSN program by educational institution (18 out of 19 enrolled responded): 50% (n=9) were enrolled at Purdue/Purdue Calumet; 11% (n=2) enrolled at Governors State University; 11% (n=2) enrolled at University of St. Francis; 11% (n=2) enrolled at Aurora University; 11% (n=2) enrolled at Western Governors University; and 5.5% (n=1) enrolled at University of West Florida.

When asked why they were not enrolled in a BSN program, thirty-one (31) graduates responded. Nearly 35.5% (n=11) cite too many family responsibilities; 19.4% (n=6) cannot afford school right now; Just over 16% (n=5) are not motivated to continue education; almost 10% (n=3) indicate that it is not required by their employer; and 38.7% (n=12) reported “other” stating the following reasons:

- *“Trying to find my footing as a new grad RN first, but I fully intend to enroll within the next year”*
- *“In the process of applying into a RN-BSN program. I am planning to start in the fall”*
- *“I plan to start my RN-BSN program next August (2017). I have a college in Indiana that is looking at my transcripts”*
- *“Planning on the spring semester, I wanted to take a full year off”*
- *“Just taking a little break from school. Plan on starting back in the fall or spring”*

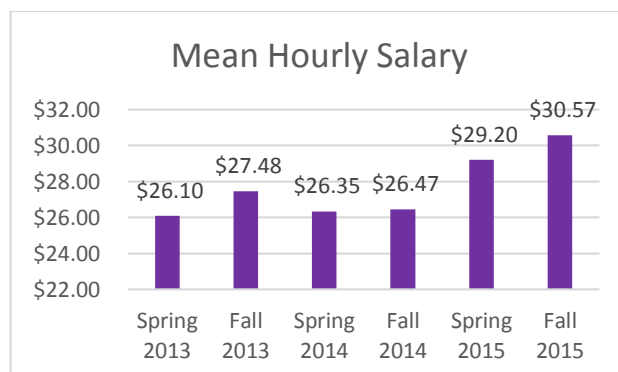
- *“Trying to get settled in at my job and save money for school. Nursing school is draining in every way possible and I need a break before I go back”*
- *“Trying to get my footing as a new grad RN in an acute care setting first”*
- *“Moved out of state and waiting until settled in a new job first. Then will enroll at a local college through my employer”*
- *“Just waiting to take one full year off, starting to apply for spring 2017”*
- *“It was advised by my manager to give it some time while I get my certs and tracings for work out of the way”*
- *“I’m trying to get in the swing of working nights and raising my two toddlers”*
- *“Waiting to get 6 months of nursing experience before I go back to school. Plan to attend in the next spring semester”*

**Historical Data Trends:**

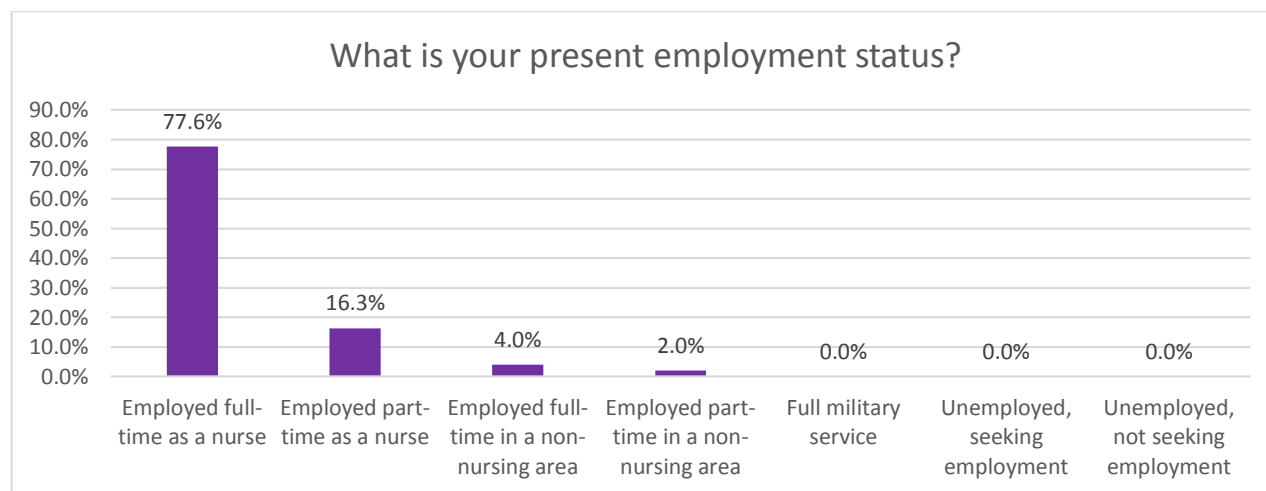
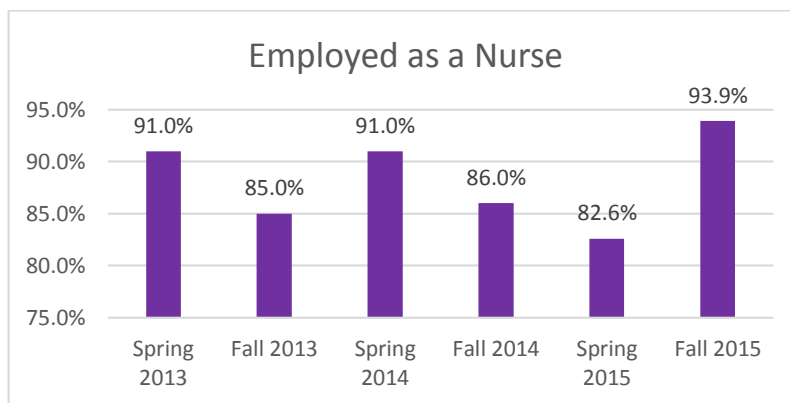


**Hourly salary** (46 out of 51 responded) before deductions (does not include overtime). Range of responses: \$21.81 to \$65.00 per hour, with an average of \$30.57 per hour.

**Historical Data Trends:**

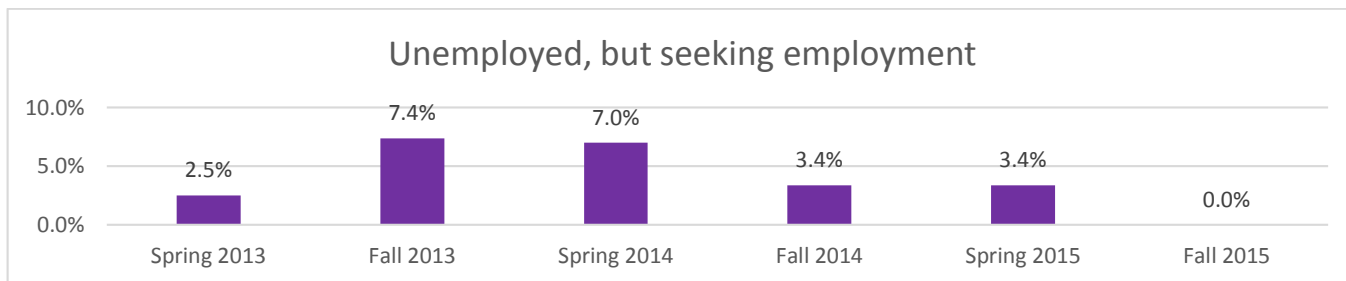


**Employment status** (49 out of 49 responded): 93.9% (n=46) of the graduates were employed as a nurse. With, 77.6% (n=38) full time and 16.3% (n=8) part time. Employment in a non-nursing area was 6.1% (n=3), 0% (n=0) was currently enlisted in full time military service, unemployed seeking employment was 0% (n=0), and unemployed not seeking employment was 0% (n=0). Two comments were provided by the graduates to state; *“Employed 56 hours per 2 weeks & also PRN (as needed) at another facility”*; *“2 jobs as a nurse, one full time and one PRN”*.



**If unemployed not seeking employment.** There are no graduates in this category this reporting cycle.

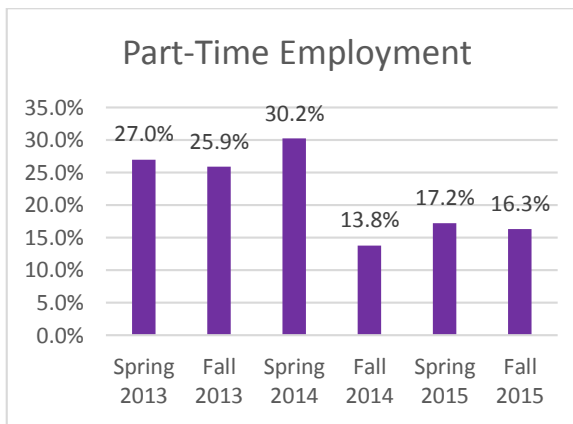
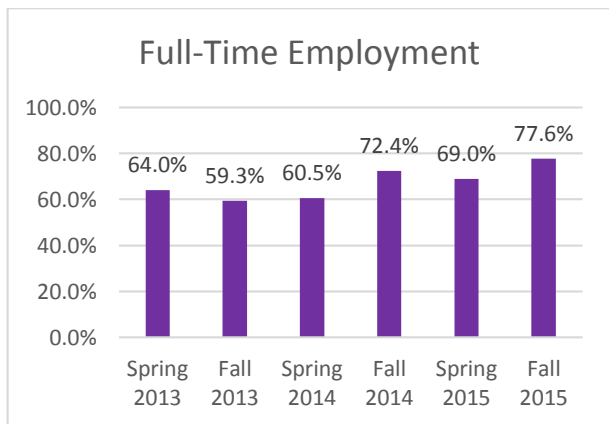
**Historical Data Trends:**



**If employed not related to nursing.** The three (3) graduates who are not employed in the nursing field commented:

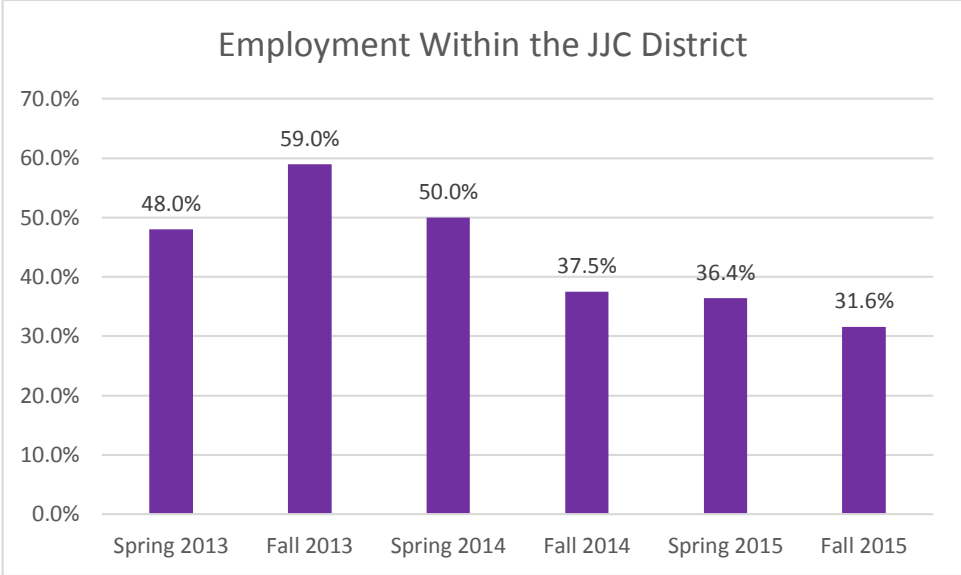
- *“Worked previously in another field, currently applying in nursing”*
- *“Taking time off before starting my career”*
- *“Already have a primary career. Nursing will be a part time job”*

**Historical Data Trends:**

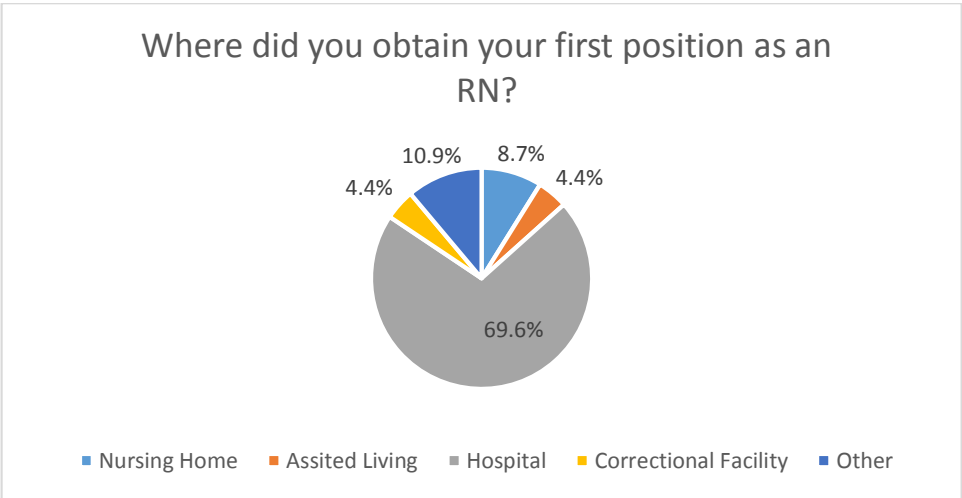


**JJC Community (41 out of 51) responded:** employment within the JJC community district is 31.6% (n=13) and 58.5% (n=24) outside the JJC community district, and 9.8% (n=4) outside of Illinois.

**Historical Data Trends:**



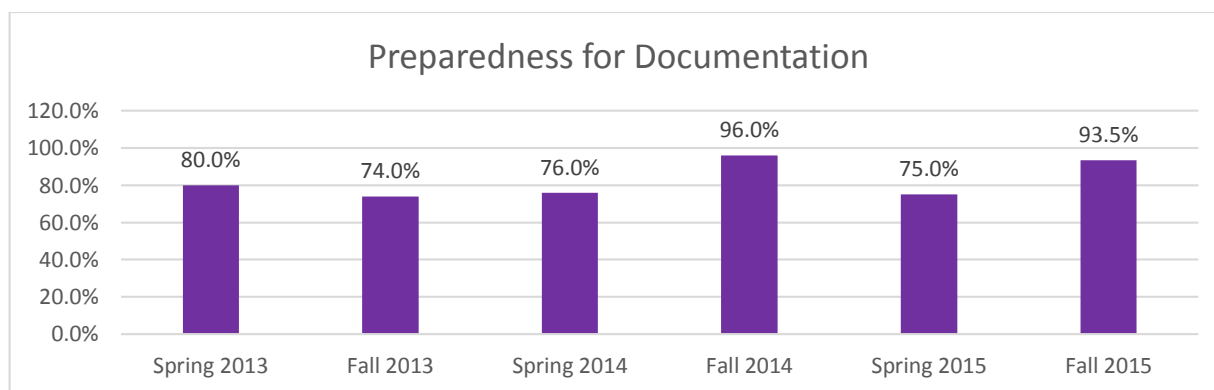
**First position as a nurse:** Of the forty-six (46 out of 51) graduates who answered this question; 69.6% (n=32) obtained their first RN job in the hospital, 8.7% (n=5) in the nursing home, 4.4% (n=2) in assisted living, 4.4% (n=2) in a correctional facility, and 12.9% (6) in other areas (one in MD office, one in home health, one in a rehabilitation center, one in a hospice agency, one in outpatient oncology center, and one in a dialysis center).



**Hospital RN Setting:** Thirty-two (32) graduates responded: 28.1% (n=9) on a medical/surgical unit, 28.1% (n=9) on a telemetry/cardiac unit, 15.6% (n=5) on a Obstetrics/Labor& Delivery unit, 6.3% (n=4) in the infection control area, and 21.8% (n= 7) in other areas (critical care, emergency room, combined pediatric/medical surgical unit, oncology unit, acute rehabilitation unit, orthopedic unit, and a tracheostomy/ventilator unit).

**What specialty in an MD office:** One graduate stated that they were employed in an oncology MD Office.

**How well prepared were you in your job as a registered nurse related to documentation?** (46 out of 51 responded). The nursing faculty identified in recent graduate surveys (3 out of the last 5) that documentation consistently scored below our expected level of achievement (80%). The nursing program does provide practice documentation in each semester, but the faculty were not sure why the students consistently rated this area as “somewhat unprepared” or “ very unprepared”. Thus, the faculty decided to ask a specific question about documentation and provide a commentary section to find out more specific needs/concerns beginning with this survey (fall 2015 graduates) in order to make changes in the program regarding documentation.



As this graph demonstrates, we have reached our expected level of achievement (>= to 80%).

However, 54.4% (n=25) rated preparedness for documentation as “somewhat prepared”).

Comments:

- *“Charting was really only practiced in the last semester of the program. It would have been helpful to have had more practice documenting assessments, wounds, situations before then”*
- *“I’m not sure if there’s much that could have prepared me for the level of multitasking a day shift floor nurse has to do. As charting is such a huge part of the job, I think we should have*



*spent more time practicing it. Other new grads I've spoken with have said their schools use generalized charting software to practice charting and found it really helpful in preparation"*

- *"Very difficult to start in a specialty. So much to learn and the program only touches on it"*
- *"Going into a specialty of obstetrics/labor & delivery there is just so much to learn"*
- *"In school we never really documented much. Every place we went had a different computer system"*
- *"With times comes experience, especially when it comes to computer (or paper) documentation. Learning how to navigate all aspects of the documentation software is still, at times, a challenge"*
- *"It's hard to be very prepared since every position and facilities are so different"*
- *"Charting is such a huge part of nursing and goes hand in hand with time management. I wish there was a way we could have practiced in school. Other new grads have mentioned they used practice charting programs and that they really helped"*
- *"Nothing prepared me for the volume of documentation that must be done. We learned in nursing school how to hand write nurses notes, but everything is computerized. There was definitely a learning curve"*
- *"Not a lot of hands on experience as well as not prepared for charting/full patient load"*
- *"I feel that some of my skills were lacking because of not doing them on patients while I was a student. Although, my director & charge nurse have commented on how well I have done for being a new grad compared to the average new grad"*
- *"I really think we should concentrate on documentation more in school"*

Update: the faculty in collaboration with CIOS at JJC have created a computerized documentation system which was piloted this past spring 2016 semester and will be integrated into the overall program.

**How well prepared were you in your job as a registered nurse related to the following?** Graduates (39 out of 51) responded : Expected level of achievement (ELA) is 80% for each line item for responses “Very Prepared & Somewhat Prepared”. We reached our ELA for each line item.

	Very Prepared	Somewhat Prepared	Somewhat Unprepared	Very Unprepared	Rating of Very Prepared & Somewhat Prepared
Nursing Skills (catheterization, IV, IM, suctioning, etc)	20	18	1	0	97%
Utilization of the nursing process	16	8	0	0	100%
Delegation skills	12	9	2	1	92%
Patient/family physical assessment skills	11	13	0	0	100%
Patient/family psychosocial assessment skills	16	8	0	0	100%
Patient/family spiritual assessment skills	12	10	2	0	92%
Nursing care prioritization	16	6	2	0	100%
Cultural competence	18	6	0	0	100%
Using evidenced based practice in patient care	15	7	2	0	100%
Critical thinking skills	16	7	1	0	100%
Patient communication skills	22	2	0	0	97%
Legal/ethical issues	11	11	2	0	95%
Clinical decision making skills	10	11	3	0	100%
Patient/family teaching skills	15	9	0	0	100%
Collaboration with other healthcare members	14	8	2	0	97%
Medication knowledge/skills	10	12	1	1	100%
Patient safety issues	17	7	0	0	100%

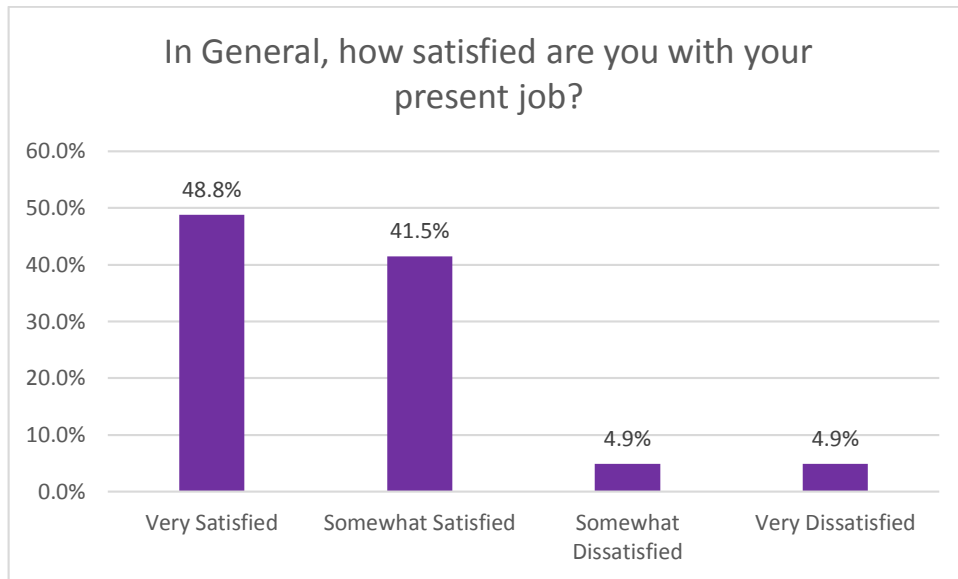
## Comments from graduates on preparedness:

- *“I would’ve liked to experience more critical care skills such as starting an IV. When the opportunity came, the instructor denied my request to attempt because he was a difficult stick. During the preceptorship, when the opportunity came, the preceptor decided best to start the IV herself without the opportunity for me to try. I tried to seek many opportunities when I could without standing in the hallway waiting for something to happen”*
- *“Unprepared due to it being a new job, with unknown expectations. You do not come out of nursing school being a pro. Any job takes time in order to become experienced”*
- *“Real world nursing is very different then the “right way” to do things. I have had a hard time adjusting to doing things the way I learned and working them into the real world”*
- *“The areas that I only felt somewhat prepared in are the areas that are best learned through repetition and time. As I continue to navigate through my nursing career, and healthcare continues to evolve, skills such as medication knowledge and patient/family education are continuously evolving and improving”*
- *“I felt that you can teach more about the Nursing Care Act & delegation in real world situations”*
- *“Not prepared for full patient load, not used to delegating since we had one patient in clinical and did vitals and everything ourselves. Didn’t have a lot of hands on practice with skills during clinicals. Just med passes. No practice with rapid response/codes”*
- *“Navigating through difficult delegation situations”*
- *“I feel prepared to a certain degree, but somewhat ready overall”*
- *“I was somewhat prepared for cultural competence. I feel that this is something that can be learned over time and with experience. JJC had prepared me for some aspects of certain cultures, but not all people may practice the same. This area can be highly individualized”*
- *“SBAR to doctors is very intimidating and it would have been good to practice more of it”*
- *“We were taught skills very well in school, but I don’t believe we received enough clinical time to practice our skills on actual patients. So on paper Anne & Stan at school, I was prepared, but in real life I hadn’t done that many skills prior to starting as an RN”*

### Historical Data Trends:

	Spring 2013	Fall 2013	Spring 2014	Fall 2014	Spring 2015	Fall 2015
Nursing Skills (catheterization, IV, IM, Suctioning, etc)	97%	96%	92%	100%	92%	97%
Utilization of the nursing process	100%	96%	95%	100%	100%	100%
Delegation skills	90%	87%	81%	87%	90%	92%
Patient/family physical assessment skills	97%	96%	97%	100%	100%	100%
Patient/family psychosocial assessment skills	97%	91%	97%	96%	100%	100%
Patient/family spiritual assessment skills	90%	91%	92%	92%	92%	92%
Nursing care prioritization	100%	91%	92%	100%	92%	100%
Cultural competence	93%	91%	92%	100%	100%	100%
Using evidenced based practice in patient care	93%	96%	92%	100%	92%	100%
Critical thinking skills	97%	91%	92%	100%	96%	100%
Patient communication skills	100%	96%	97%	96%	100%	97%
Legal/ethical issues	93%	91%	89%	79%	92%	95%
Clinical decision making skills	90%	96%	92%	100%	88%	100%
Patient/family teaching skills	90%	96%	92%	92%	100%	100%
Collaboration with other healthcare members	90%	87%	89%	96%	92%	97%
Medication knowledge/skills	87%	87%	86%	87%	92%	100%
Patient safety issues	100%	96%	97%	100%	100%	100%

**Job Satisfaction** (41 out of 51 responded): 48.8% (n=20) are very satisfied. 41.5% (n=17) were somewhat satisfied, 4.9% (n=2) were somewhat dissatisfied, and 4.9% (n=2) were very dissatisfied.



**If dissatisfied, please indicate why (8 responses):**

- *“I want to gain clinical experience in a different area without feeling like I’m settling for any position. I often feel that I am passing meds and just trying to keep all patients safe without really knowing the big picture of my particular patients. Often, no time for breaks and staying overtime is regular. I also arrive over 1 hour ahead of shift just to read about my patients and review tasks and labs.”*
- *“With 4-5 patients on such a busy, yet critical unit, I don’t feel comfortable with the pace and lack of time for individual patients. As a new grad, completely new to working in a hospital setting (my fault), I find it difficult to stop, critically think, and put all of the pieces together while managing time appropriately. I’m also not as fond of the schedule as I thought I would be. Still working through a lot of growing pains-none of which I attribute to my education at JJC”*
- *“It’s just a job that has nothing to do with my degree”*
- *“The company I work for does not seem to care about the residents. The expectations are a little ridiculous. We work short of help and yet the workload is the same with no assistance”*
- *“Overwhelmed with the amount of work since we only had to care for 2 patients at the most”*
- *“Too much drama on the unit”*

- *“It’s a very busy and short staffed unit that is pretty rough on new grads. They pay no attention to patient acuity when assigning patient teams. They are more concerned with the location of the rooms and keep each nurses patient teams in close proximity. While this is nice in theory, it’s not realistic for controlling the acuity of patients for new nurses. That said, we are thrust into a lot of unsafe situations. Also, they begin their training on the day shift which is insanely busy on this unit. The problem for us new grads is that we inevitably become so task oriented just trying to complete things that it leaves us very little time to critically think and put pieces together and make connections with diagnosis, treatments, interventions, etc.”*
- *“I’m still learning a lot, but work with a great team, so I continue to grow. It’s just a necessary process to become a more mature nurse”*

**Overall satisfaction with JJC services** (41 out of 51 responded): Expected level of achievement (ELA) is 80% for each line item for responses “Very Satisfied & Somewhat Satisfied”, if students marked N/A in respective areas, that data was excluded- ELA reached in all areas.

	<b>Very Satisfied</b>	<b>Somewhat Satisfied</b>	<b>Somewhat Dissatisfied</b>	<b>Very Dissatisfied</b>	<b>N/A</b>	<b>Very to Somewhat Satisfied</b>
Financial Aid	22	4	1	2	12	90%
Advising	20	8	4	0	9	88%
Career Planning	17	6	2	10	15	82%
Transfer Planning	16	4	2	0	19	91%
Counseling	19	4	2	0	16	92%
Tutoring	18	7	1	0	15	89%
Library	24	7	1	1	8	94%
Student Activities	19	7	0	1	14	96%

**If unsatisfied, please indicate why (2 responses)**

- *“Given incorrect information regarding TEAS and nursing program requirements. It set me back a semester”*
- *“I was dissatisfied with financial aid because I was denied any financial assistance and not offered any alternatives for help to pay for school”*
- *“JJC tutoring I didn’t experience but Terry Kania with the nursing program I did once and she was absolutely amazing”*
- *“Financial aid was very difficult to deal with and sometimes rude”*

- *“The transfer specialists for GSU kept changing, it seemed every semester, so there was a lack of continuity during my process, however it all worked out and my transfer went through fine”*

### Historical Data Trends:

	Spring 2013	Fall 2013	Spring 2014	Fall 2014	Spring 2015	Fall 2015
Financial Aid	95%	89%	100%	89%	100%	90%
Advising	96%	79%	96%	88%	75%	88%
Career Planning	70%	72%	91%	77%	89%	82%
Transfer Planning	95%	73%	89%	92%	79%	91%
Counseling	89%	80%	100%	92%	85%	92%
Tutoring	88%	87%	93%	100%	100%	89%
Library	100%	91%	97%	100%	95%	94%
Student Activities	100%	92%	90%	100%	94%	96%

### Satisfaction with the following items in your nursing program of study (41 out of 51 responded):

Expected level of achievement (ELA) is 80% for each line item for responses “Very Satisfied & Somewhat Satisfied”. ELA was met.

	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	Very Satisfied & Somewhat Satisfied
Content of courses in the nursing program	33	8	0	0	96%
Lectures, lab experiences, group projects	26	14	1	0	96%
Nursing Lab Services- tutoring	29	12	0	0	100%
Nursing Lab Services- skills practice	31	10	0	0	100%
Clinical experiences	22	18	1	0	88%
Equipment, facilities, & materials	35	6	0	0	100%
Simulation experiences	27	12	2	0	88%
ATI (Assessment Technology Institute) testing	27	11	2	1	96%
Preparation for employment as a registered nurse	26	15	0	0	92%
Preparation for further education	30	11	0	0	96%
Information on current employment opportunities/trends	30	11	0	0	92%

**If unsatisfied, please indicate why (5 responses):**

- *“When it came to group projects, there was little information given as far as expectations other than a vague guideline. This led to our group having to do the project twice, or getting unnecessary points deducted. None of us failed, but it led to unnecessary frustration”*
- *“Labs were the worst. Watching one another you learn nothing. It was more overwhelming than helpful”*
- *“ATI is a necessary evil I suppose. However, some of the information supplied in their text contradicted what was in our assigned textbooks. It was confusing at times, given we would be tested on the same material and dependent on which source we studied more thoroughly our testing responses were variable, resulting in either our program testing grade to be affected or our ATI grade to be affected”*
- *“Stop doing group projects. It’s not fair that your grade is dependent upon other people’s work or lack of work”*
- *“I didn’t feel simulation helped”*
- *“I believe I came out prepared to do clinical skills, I just did not get a chance to do them on a live person until I got my first job. Fortunately, I was prepared and successful”*

**Historical Data Trends:**

	Spring 2013	Fall 2013	Spring 2014	Fall 2014	Spring 2015	Fall 2015
Content of courses in the nursing program	100%	100%	100%	100%	96%	100%
Lectures, lab experiences, group projects	97%	100%	95%	100%	96%	98%
Nursing Lab Services- tutoring	94%	92%	95%	100%	100%	100%
Nursing Lab Services- skills practice	87%	88%	84%	100%	100%	100%
Clinical experiences	84%	88%	86%	94%	88%	98%
Equipment, facilities, & materials	94%	100%	95%	100%	100%	100%
Simulation experiences	71%	83%	84%	94%	88%	95%
ATI (Assessment Technology Institute) testing	94%	96%	100%	100%	96%	93%
Preparation for employment as a registered nurse	90%	79%	92%	88%	92%	100%
Preparation for further education	97%	88%	95%	94%	96%	100%
Information on current employment opportunities/trends	74%	67%	78%	88%	92%	100%



**Any comments by graduates that was not addressed in the survey are noted below (21 out of 51 responses):**

- *“Coming back to school, I was worried about the lack of flexibility with missing a clinical or any absence. I was pleasantly surprised with the understanding and flexibility that most instructors gave. I found most instructors to be supportive as well. I really needed the support to keep going and there were a few that really kept me from quitting again. It was really overwhelming to be in school again after a 9 year break. We do a lot of work but feel so insecure at times that it’s the push that keeps us going. I would recommend giving a brief description of clinical sites with possible experiences that could be expected so that one could seek out a specific experience if desired. A broader experience in the community would be beneficial such as occupational nurse, school nurse, nurse educator, rehab nurse, nurse anesthetist, etc. or even visiting the shelters. Patient teaching should be spontaneous, not reading time. Also, trust the student and their knowledge. Praise them for a job well done when it happens, don’t make it obvious that a student is a favorite, it doesn’t look good to the other students. As for the panopto, lecture combo, I thought it was a great idea to learn and to reinforce information. I do think we could all use more practice researching articles and doing evidence based papers. It could be an assignment to find 5 good, appropriate articles showing different points on research topics. Or short informal presentations on different research ideas to help people get more comfortable doing research and presenting their ideas. I have lots of ideas for different learning experiences, just not much time”*
- *“Overall, I had a great experience at JJC in the nursing program. I hadn’t been to college in 14 years and everyone was very helpful. My fellow students became family. Thank You!”*
- *“I could not be happier with the education I received through the JJC nursing program, I feel JJC has prepared me well for my career, although there is always more to learn. Thank You!”*
- *“Overall, JJC was an incredibly great program and I feel it prepared me very well for my current job. I recommend this program to others looking to become a Registered Nurse”*
- *“I feel I received a fantastic education at JJC and graduated more than prepared for my job position”*
- *“I believe at the Associate’s level, the focus should be more on trying to master the assessment and hands on skills. We spent only short time in first semester doing/learning hands-on. I saw students asking for assistance in performing manual blood pressures (the machines were out of service) in 4<sup>th</sup> semester. I also believe a semester long, college level, medical terminology*

*course should be a prerequisite. Additionally, time should be devoted to working “code blue” simulations in the sim lab. Perhaps work it into the cardiology/ECG instruction.*

- *“JJC faculty are so caring and knowledgeable”*
- *“Great teachers! Great experience. I’m so glad I went to JJC!”*
- *“Maybe less shadowing time in the fourth semester and more clinical time with multiple patients”*
- *“Simulations are nothing like real life. I didn’t find them helpful. Clinical didn’t do much to prepare us for real life. The best clinical experience I had was because I was one on one with the nurse and was responsible for all the nursing care. We need more opportunities like that. You should find a way to have the nursing program over the summer as well so it’s year round”*
- *“I felt like clinicals were terrifying and nerve racking. Not the best environment for learning. I would have liked more hands on experience to prepare me. Never got to do foleys, injections other than subcutaneous, trach care/suctioning”*
- *“JJC does a phenomenal job preparing their students for the real world. I work with students from Loyola and Olivet BSN schools whose knowledge does not compare to what we received at JJC. There are 3 JJC students in our ICU and we have to complete several testing as a new grad. JJC students have always scored higher on the exams over the BSN new grads. Preceptors acknowledged JJC grads level of competency over BSN students. Real proud and happy to be a JJC Alumni”*
- *“JJC staff were excellent in preparing me for nursing. Each semester was a beneficial segment to learning”*
- *“During my participation in the nursing program, there was a lack of substitute instructors that would have made my experience better. There were emergency circumstances, however that should not destruct the learning experience”*
- *“Overall, I thought JJC was an excellent program! I recommend it to anyone that I come across wanting to go to school to be an RN. It was close by, cheaper than a lot of other schools, and has high success rates!”*
- *“More clinical days would be helpful”*
- *“JJC’s program really provided the backbone I needed to be successful as a nurse. I am grateful for the experience. I see my coworkers who attended other programs and you can see some deficiencies in certain areas. We are really given a great all around education and clinical experience. Additionally, although JJC doesn’t provide BSN education credits, I am*

*finding, as I work towards my BSN, that many classes I am currently taking were covered at my time at JJC and in more detail than what I am receiving now, Kudos JJC for fully preparing me, not only for the field, but for my continuing education as well”*

- *“I know it is an issue for JJC to find hospitals/facilities for clinical time, but I really think students should receive more clinical time in order to feel more comfortable caring for patients. Many other schools get much more clinical experience than JJC students”*
- *“The program is very hard and stressful, but in the end it was well worth it”*
- *“Biggest suggestion is to allow more time for students to practice skills. The preceptorship was the best experience and wish I had that throughout the entire nursing program. Learned a lot through that experience”*