

Registered Nurse

Graduate Survey



Department of Nursing Education

Joliet Junior College

Nursing Graduates of December 2016

(6 - 9 month follow-up)

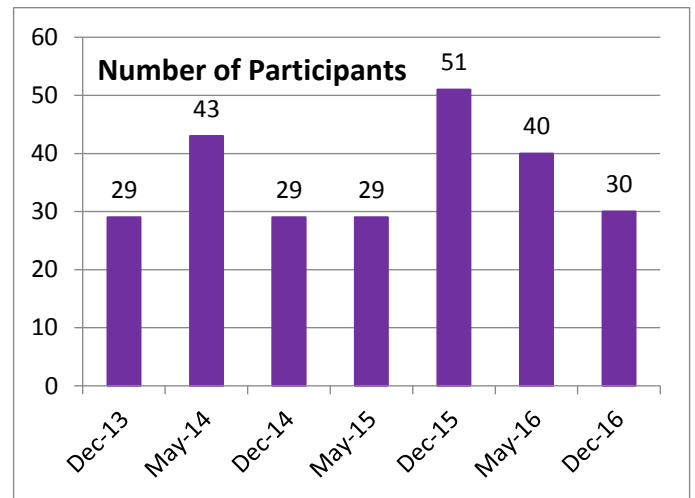
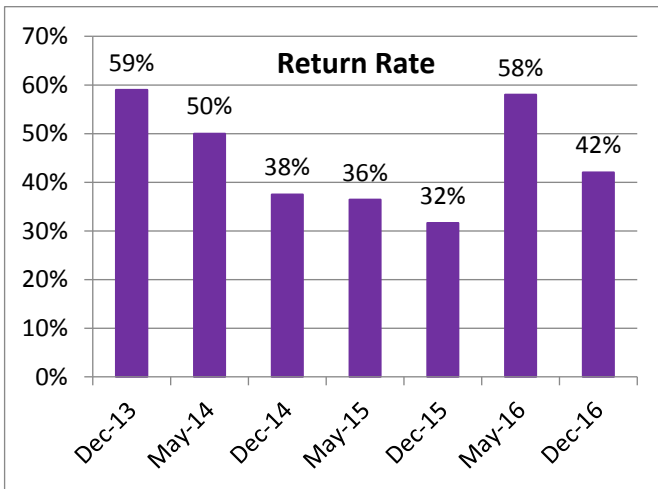


## Introduction

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 Late June 2017 for the graduating class of December 2016. The survey was sent out to seventy-two (72) graduates on June 30, 2017 via the student's personal e-mail address, which they provided to us prior to graduation. On July 9, 2017 ten (10) graduates replied, so a reminder was sent. On July 28, 2017 eighteen (18) responded and a final reminder was sent which indicated a closing date of August 7, 2017. On August 7, 2017 the survey was closed with thirty (30) graduates participating. The overall response rate for this survey group is 42%.

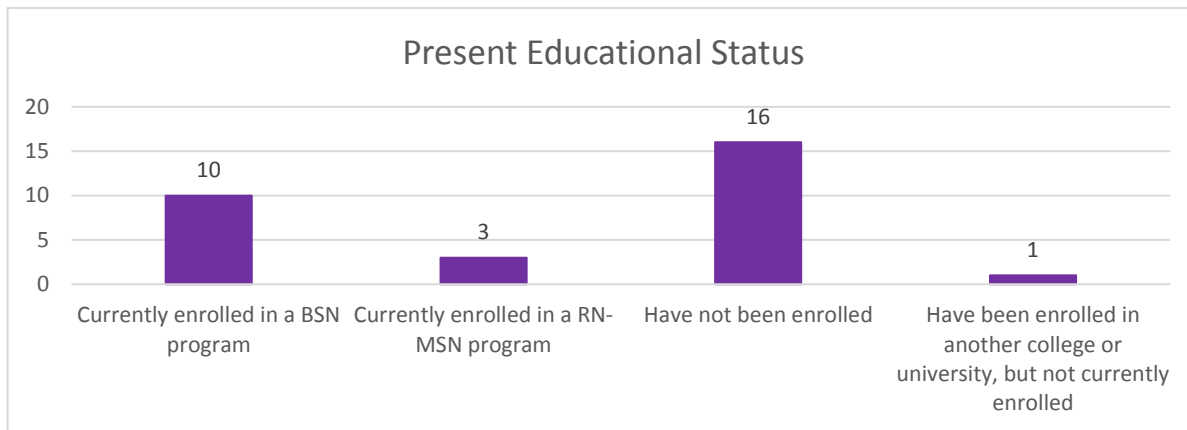
***Please Note: graduate responses in quotations are reprinted as they appeared on the survey, including spelling and grammatical errors.***

## Historical Data Trends:



## Results:

**Educational status** (30 out of 30 responded): 33.3% (n=10) indicated that they are enrolled in a BSN program. 53.3% (n=16) are not enrolled in a BSN program. 10% (n=3) of responding graduates are currently enrolled in a RN-MSN program and 3.3% (n=1) have been enrolled in another college or university since leaving this college, but not currently enrolled.



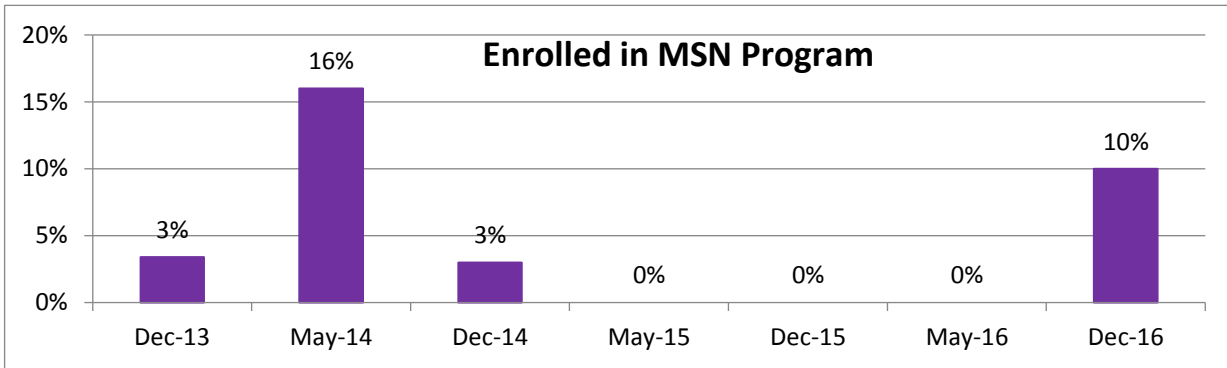
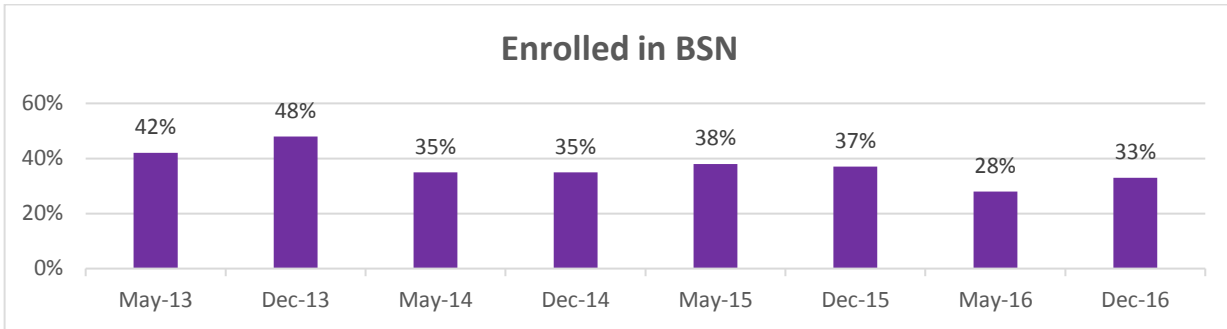
Enrollment in a BSN program or RN-MSN by educational institution (12 out of 13 enrolled responded):

25% (n=3) were enrolled at Chamberlain; 17% (n=2) enrolled at University of Illinois at Chicago; 17% (n=2) enrolled at Purdue University-Northwest; 17% (n=2) enrolled at Western Governors University; 8% (n=1) enrolled at University of St. Francis; 8% (n=1) enrolled at Illinois State University; 8% (n=1) enrolled at Grand Canyon University.

When asked why they were not enrolled in a BSN program, sixteen (16) graduates responded. About 31% (n=5) cite too many family responsibilities; 25% (n=4) cannot afford school right now; 6.3% (n=1) are not motivated to continue education; 6.3% (n=1) indicate that it is not required by their employer; and nearly 44% (n=7) reported “other” stating the following reasons:

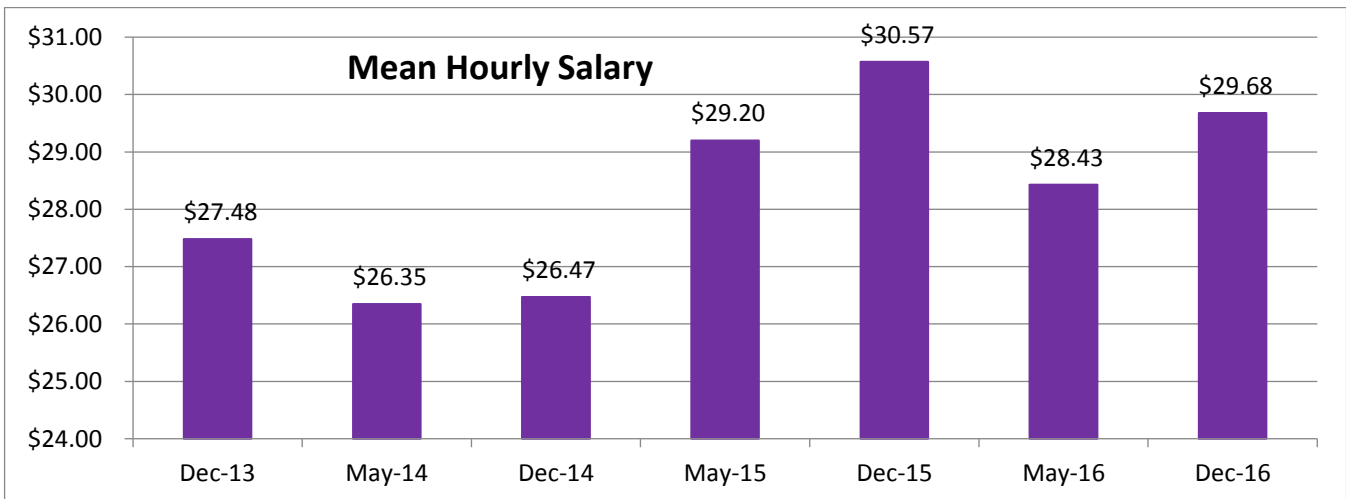
- *“Starting in January”*
- *“I am Too old RN is enough for me”*
- *“Other obligations”*
- *“Trying to adjust to role as RN”*
- *“Taking a year off, adjusting to the new nursing role. Will go back for my RN to BSN next year”*
- *“Planning in the future”*

**Historical Data Trends:**



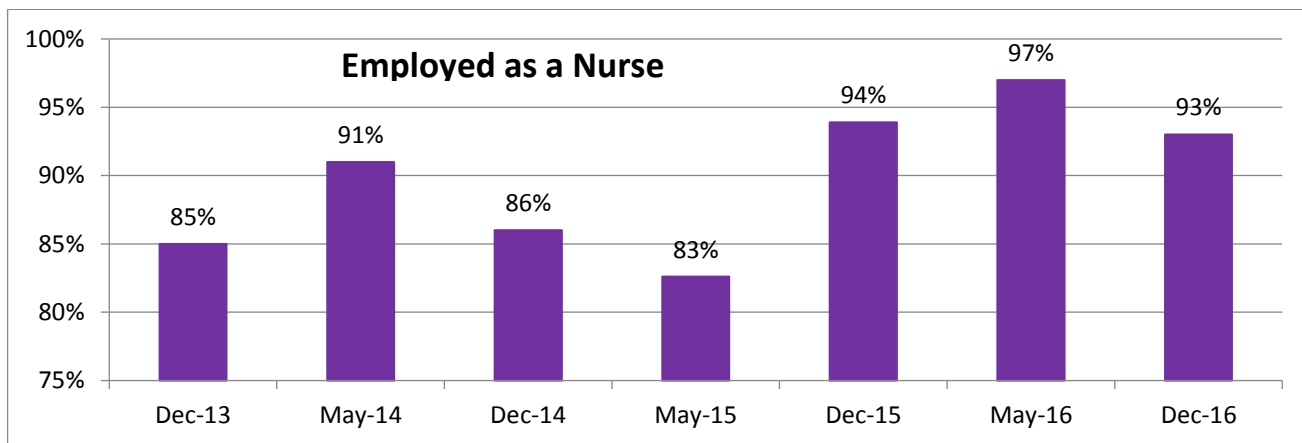
**Hourly salary** (27 out of 30 responded) before deductions (does not include overtime). Range of responses: \$24.00 to \$38.00 per hour, with an average of \$29.68 per hour.

**Historical Data Trends:**



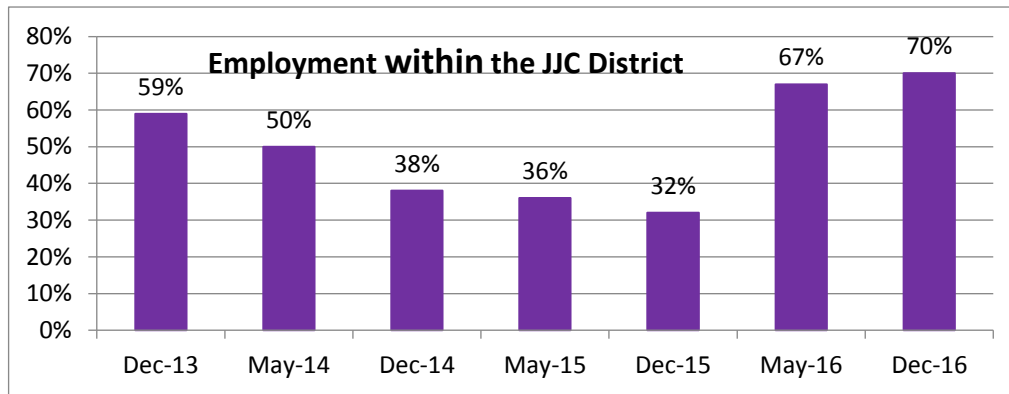
**Employment status** (29 out of 30 responded): 93% (n=27) of the graduates were employed as a nurse, 7% (n=2) of the graduates were employed in a non-nursing area.

One comment was provided by the graduate to state; *“Working in my family buisness currently due to some unexpected circumstances”*.

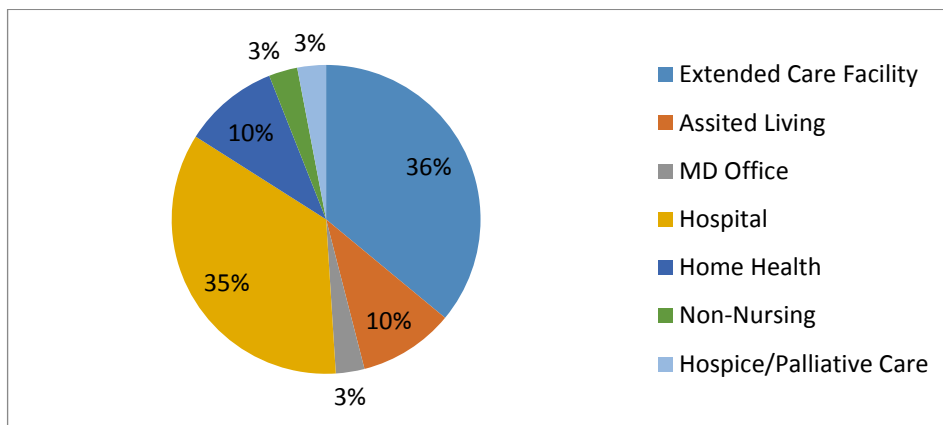


**JJC Community (27 out of 30) responded:** employment within the JJC community district is 70% (n=19) and 30% (n=8) outside the JJC community district. Previously, we asked the graduates if they worked in or out of district. Since the in-district numbers were decreasing, the nursing faculty decided to just ask what city they are employed in. The faculty felt that some students may not be fully aware of how large the JJC district really is, thus they may had thought that they worked out of district if they did not work in the immediate Joliet area. This began in May 2016, which has demonstrated a larger percentage of our students are working in district.

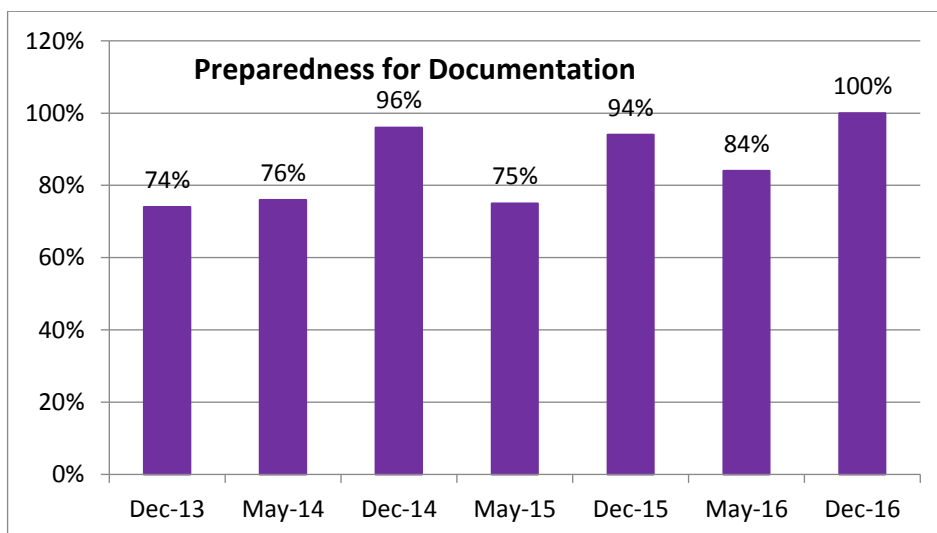
**Historical Data Trends:**



**First position as a nurse:** Of the thirty-seven (29 out of 30) graduates who answered this question; 35% (n=10) obtained their first RN job in the hospital, 36% (n=10) in an extended care facility, 10% (n=3) in assisted living, 10% (n=3) in home health, 3% (n=1) in an MD office, 3% (n=1) in hospice/palliative care, & 3% (n=1) in a non-nursing area.



**How well prepared were you in your job as a registered nurse related to documentation?** (28 out of 30 responded). The nursing faculty identified in recent graduate surveys (3 out of the last 7) that documentation consistently scored at or below our expected level of achievement (ELA) of 80%. The nursing program does provide practice documentation in each semester, but the faculty were not sure why the students 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 the Dec 2015 graduates in order to make changes in the program regarding documentation.



As this graph demonstrates, we have reached our expected level of achievement ( $\geq$  to 80%).

Comments:

- *“I was prepared but school can’t prepare you for every situation and how to chart on it. The instructors gave us some basic ideas for documentation”*
- *“I had a surprisingly few amounts of “deer in the headlights” situation at the new job”*
- *“I feel like there should have been more time devoted to writing narrative notes. Where I work, everything is in the written form and I felt/feel my documentation skills are lacking”*
- *“Lack of experience”*

Update: The nursing faculty in collaboration with CIOS at JJC have created a computerized documentation system which was piloted this past spring 2016 semester and will be slowly integrated into the program- while working out the “bugs” by the start of our new curriculum in Fall 2019. In the meantime, each semester of nursing has agreed to slowly incorporate the documentation system into clinical or simulation experience to identify any gaps or corrections needed in general nursing documentation.

**How well prepared were you in your job as a registered nurse related to the following?** Graduates (28 out of 30) 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)	11	15	1	1	93%
Utilization of the nursing process	20	8	0	0	100%
Delegation skills	16	11	1	0	96%
Patient/family physical assessment skills	20	7	1	0	96%
Patient/family psychosocial assessment skills	14	13	1	0	96%
Patient/family spiritual assessment skills	10	15	3	0	89%
Nursing care prioritization	19	8	1	0	96%
Cultural competence	13	14	1	0	96%
Using evidenced based practice in patient care	19	9	0	0	96%
Critical thinking skills	20	7	1	0	96%
Patient communication skills	21	7	0	0	100%
Legal/ethical issues	11	15	2	0	93%
Clinical decision making skills	18	10	0	0	100%
Patient/family teaching skills	19	7	2	0	93%
Collaboration with other healthcare members	17	7	4	0	86%
Medication knowledge/skills	17	9	2	0	93%
Patient safety issues	22	6	0	0	100%



### **Comments from graduates on preparedness:**

- *“Most of my patients are sedated and intubated, so I don’t get a lot of opportunity for patient teaching“*
- *“I’m sure most of my feelings was due to the lack of confidence and anxiety, but I do wish more time could have been devoted to clinical skills and time with patients. I feel we should have had more clinical days and more simulations. I also wish we could have been allowed to apply our clinical skills to real patients. For example, we were not allowed to start IV’s at the clinical site, nor insert foleys”*
- *“Nursing reality is not the same as nursing school reality”*

### Historical Data Trends:

	May 2013	Decl 2013	May 2014	Dec 2014	May 2015	Dec 2015	May 2016	Dec 2016
Nursing Skills (catheterization, IV, IM, Suctioning, etc)	97%	96%	92%	100%	92%	97%	100%	93%
Utilization of the nursing process	100%	96%	95%	100%	100%	100%	100%	100%
Delegation skills	90%	87%	81%	87%	90%	92%	94%	96%
Patient/family physical assessment skills	97%	96%	97%	100%	100%	100%	100%	96%
Patient/family psychosocial assessment skills	97%	91%	97%	96%	100%	100%	97%	96%
Patient/family spiritual assessment skills	90%	91%	92%	92%	92%	92%	100%	89%
Nursing care prioritization	100%	91%	92%	100%	92%	100%	100%	96%
Cultural competence	93%	91%	92%	100%	100%	100%	100%	96%
Using evidenced based practice in patient care	93%	96%	92%	100%	92%	100%	97%	96%
Critical thinking skills	97%	91%	92%	100%	96%	100%	97%	96%
Patient communication skills	100%	96%	97%	96%	100%	97%	100%	100%
Legal/ethical issues	93%	91%	89%	79%	92%	95%	97%	93%
Clinical decision making skills	90%	96%	92%	100%	88%	100%	97%	100%
Patient/family teaching skills	90%	96%	92%	92%	100%	100%	100%	93%
Collaboration with other healthcare members	90%	87%	89%	96%	92%	97%	97%	86%
Medication knowledge/skills	87%	87%	86%	87%	92%	100%	97%	93%
Patient safety issues	100%	96%	97%	100%	100%	100%	100%	100%

**Comments made by graduates that was not addressed in the survey are noted below (21/30 responses)**

- *“Loved JJC”*
- *“Continue the preceptorship program for the 4<sup>th</sup> semester students”*
- *“Practice inserting IV’s”*
- *“Overall have felt well prepared in my nursing position”*

- *“More preceptorship hours at diverse clinical settings”*
- *“I am very please with the education I received at JJC. I highly recommend it”*
- *“JJC nursing program is the best decision I’ve ever made”*
- *“More simulations would be beneficial”*
- *“Connect the whole picture... what are we looking for if a patient has sepsis or ARDS what labs or test are we looking for, what’s important. What does it mean when lactic acid is elevated or your CK is elevated what do you think might be the problem. Overall I think more emphasis should be put on the mechanism of action for medication and the importance of laboratory results”*
- *“I recommend having a post-graduation liaison who can help students who are having difficulty finding a position or who have questions. I was able to find a job in hospice because I have a background in it. However, I have applied to every hospital in the area and have not received a single call back. Many of my peers are working in hospitals and I’m not sure why I am not getting any responses. I have tried to reach out to former teachers without successt”*
- *“THANK YOU FOR WORKING HARD TO PREPARE US FOR THE REAL WORLD“*
- *“ JJC program made me very prepared for assessing patients”*
- *“Best nursing program out there”*
- *“I appreciate and value each of the instructor’s, and often hear their lessons in my head as I work through certain scenarios. Thank you to each and every one of them!”*
- *“I felt very prepared as a nurse. I was given many compliments by my trainers asserting that I was a very competent new graduate”*
- *“Thank You”*
- *“Keep up the good work. Great teachers”*
- *“I loved the program. All the instructors were extremely helpful and I will definitely recommend the program to anyone who wants to be a nurse. Thank you for everything ☺”*
- *“Program was hard, but in the end it was all worth it”*
- *“JJC nursing program needs to add some positive reinforcement during clinicals teaching not just the negative all the time. A stated, “Good Job” once in a while can change the morale of all students instead of complete negative all the time. Students should not dread going to clinicals because it affects their mental advancement. JJC teachers should take some lessons from Chamberlain nursing school teachers, as they teach with positive reinforcement”*