

Retaining Institutional Wisdom: Using an Evidence-Informed Approach to Transfer Knowledge from Experienced Nurses to New Nursing Staff

La sagesse d'un établissement : le transfert des connaissances des infirmières chevronnées aux nouvelles recrues au moyen d'une stratégie de rétention éclairée par des données probantes

by CANADIAN HEALTH SERVICES RESEARCH FOUNDATION

Abstract

The Baie-des-Chaleurs Health and Social Services Centre in Quebec has developed an evidence-informed approach to capture the knowledge of experienced nurses and transfer it to new staff. By drawing on the expertise of senior staff, and through the development of tools such as a training video, the centre has been able to reduce attrition rates and enhance job satisfaction. This innovative initiative was recently featured in *Promising Practices in Research Use*, a series produced by the Canadian Health Services Research Foundation highlighting organizations that have invested their time,

energy and resources to improve their ability to use research in the delivery of health services. Additional issues from the series can be found at http://www.chsrf.ca/promising/index_e.php.

Résumé

Le Centre de santé et de services sociaux de Baie-des-Chaleurs au Québec s'est inspiré de données probantes pour concevoir un mode de relevé et de transfert des connaissances des infirmières chevronnées aux nouvelles recrues. Grâce à l'expertise des cadres supérieurs et au développement de nouveaux outils tels qu'une bande vidéo de formation, le centre a réduit les taux d'attrition et a amélioré la satisfaction au travail. Récemment, cette initiative novatrice a fait l'objet d'un numéro de *Pratiques prometteuses dans l'utilisation de la recherche*, publication de la Fondation canadienne de la recherche, qui présente des organismes qui ont investi temps, énergie et ressources pour améliorer leur capacité à utiliser la recherche dans la prestation de services de santé. Il est possible de consulter d'autres numéros au http://www.chsrf.ca/pratiques/index_f.php.

Key Messages

- The nursing service of a Quebec-based health and social services centre has developed an evidence-informed approach to capture knowledge – especially tacit knowledge – from experienced nurses, and transfer it to new nursing staff.
- A key element in the creation of organizational knowledge is the active participation of staff members who are directly involved in care delivery, combined with best practices.
- The project has increased the success rate of new nurse orientations and retention, and has reduced reliance on supplemental nursing resources. This project, grounded in a philosophy of continuous quality improvement, has helped to reduce the occurrence of adverse events.

MANY HEALTHCARE ORGANIZATIONS ARE GRAPPLING WITH THE CONSEQUENCES of high attrition rates. To address this problem, and as part of the process of becoming a learning organization, the Baie-des-Chaleurs Health and Social Services Centre in Quebec has developed an evidence-informed approach to capture the knowledge of experienced nurses and transfer it to new staff.

“It really started with our continuous improvement committee,” says Christine Arsenault, department head and learning organization project adviser. She explains

that the committee had been developing procedures and best practices to help eliminate nursing errors, but encountered problems in implementing the procedures effectively. Committee members finally realized that something important was missing: the direct involvement of nurses in the process.

In 2005, a nurse committee was established to review existing literature on knowledge creation and transfer. The committee's research revealed many key concepts, including the importance of formalizing tacit or implicit knowledge and the benefits of supporting professional skills development within an organization.

Armed with the evidence, the committee mapped out a new process to identify, formalize and transfer knowledge at the Centre. However, Arsenault says, the committee quickly saw that it needed a specific project that would allow them to apply the key concepts "hands on" and yield tangible outcomes.

At the time, the Centre was facing high retirement rates among nurses. "We were concerned," explains Jean-Luc Gendron, coordinator of quality and risk management and communications, "about the influx of new, inexperienced nurses, the loss of institutional knowledge from those retiring, and the impacts these could have on the quality of care." The maternity department – which had a high number of new, inexperienced nurses – was selected for a pilot project.

After a preliminary phase of knowledge capitalization and research on best practices, senior nursing staff, in collaboration with new nurses, identified the various skills and competencies required by nurses in the maternity unit. They then developed strategies to transfer this knowledge. Initiatives included clinical monitoring by an experienced nurse mentor, a "tricks of the trade and expert advice" summary from experienced nurses and a tool to help new nurses reflect upon their clinical experiences and transfer the knowledge to other situations.

However, says Arsenault, it was the video that really captured people's attention. A video was produced that followed an experienced nurse as she provided care in the maternity unit, from admission to the delivery to the post-partum period, with a voice-over explaining the rationale for each action taken by the nurse. The committee knew from its research that video technology had been proven to be an effective way to capture and transfer tacit knowledge – knowledge that is difficult to transfer because it is acquired over years of experience. Videos are also especially helpful for nurses in remote areas, who often do not have experienced colleagues to consult.

The pilot project was effective on several levels. "All of our new maternity nurses in 2007/2008 successfully completed their orientation," reports Arsenault. (In 2005, only 40% succeeded.) Moreover, the use of supplemental staff to compensate for less experienced nurses is down, no adverse events have been reported since the project began and the Centre hasn't lost a single new maternity nurse in the past two years. As an added bonus, the project has built pride and cohesiveness throughout the organization: new nurses feel part of a team, and experienced nurses now recognize the value

of the knowledge they possess and the value of sharing it.

The team won a 3M Innovation Award for the pilot project in eastern Quebec, and the model is currently being implemented elsewhere in the Centre. Another project, dubbed “Virtual Companion,” is now underway to create video clips of various procedures, which nurses can access with an MP3 player. Arsenault says that the number of projects under development is growing at an accelerated pace, and they affect all spheres of activity of the organization. “We hope,” she says, “that our experience will help and inspire others to undertake this type of initiative.”

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Call to Authors

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