New nurses in the Magnet setting: Negotiating nursing values

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Methods

- IRB approval obtained from UNC and Magnet hospital
- Informed consent
- 21 Participants= Informants
  - 7 Key Informants (new BSN nurses, less than 16 months)
  - 14 General Informants (nurse educators, managers, etc)
- Setting= Magnet hospital in New Jersey
- Research Enablers within Ethnonursing methodology
  - Observation-Phases of Ethnonursing Data Analysis Enabler
  - Data gathered with research enablers through
    - Personal interviews with open-ended interview guide
    - Field notes.

Background and Significance

The purpose of the study was to discover, describe and analyze the culture care beliefs, values and practices of new baccalaureate-prepared registered nurses regarding the primacy of an ethical commitment to the patient, as they transitioned into practice within a Magnet hospital.

Theoretical Framework

Madeleine Leininger’s (2006) Theory of Culture Care Universality and Diversity served as a framework to examine how new nurses negotiated culture care beliefs, values and practices in the Magnet setting. Leininger’s theory was founded on comparing cultures; she emphasized that both care and culture are nursing metaparadigm concepts. Leininger’s theory, guides or research enablers, and her research methodology, the ethnonursing research method, served as a basis for this study.

Research Purpose

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Themes

Theme 1: Striving to enact a primary commitment to the patient

Pattern 1: Taking on a position of lifeguard in dangerous waters

“My shift was over and I hadn’t even seen all my patients. I was very upset… they were my responsibility”

“as the nurse, everything falls on you…”

Pattern 2: Sink or swim

“Then all six patients are asking for 10 different things… the charge nurses are great to help, like if you’re starting to sink…”

“In the beginning it was like I was drowning… are you kidding me? How can I do this?”

Pattern 3: Administrative support as facilitator or barrier to putting the patient first

“I am the lifeguard, but will I sink or swim?”

Developing a voice: What do I know?

Do I have the tools to do my job?

Technology Staffing Leadership

Significance of findings to nursing practice:

• Increase in enactment of professional values among nurses noted since previous study (Kramer, 1974)
• Magnet model supportive of shared governance and transformational leadership
• Support for developing nurse leaders in practice
• Communication and culture of healthcare important to ethical practice
• Healthy interprofessional communication among healthcare professionals
• Need for nursing involvement in political/legal/economic factors impacting practice

Significance of findings to nursing education:

• Application of leadership concepts across curriculum
• Understanding of healthcare system economics and politics to be incorporated into clinical education
• Educational climate: Modeling civil behavior
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Selected References: