

Registered Nurse  
Graduate Survey



Department of Nursing Education  
Joliet Junior College  
Nursing Graduates of Fall 2018  
(6 - 9 month follow-up)

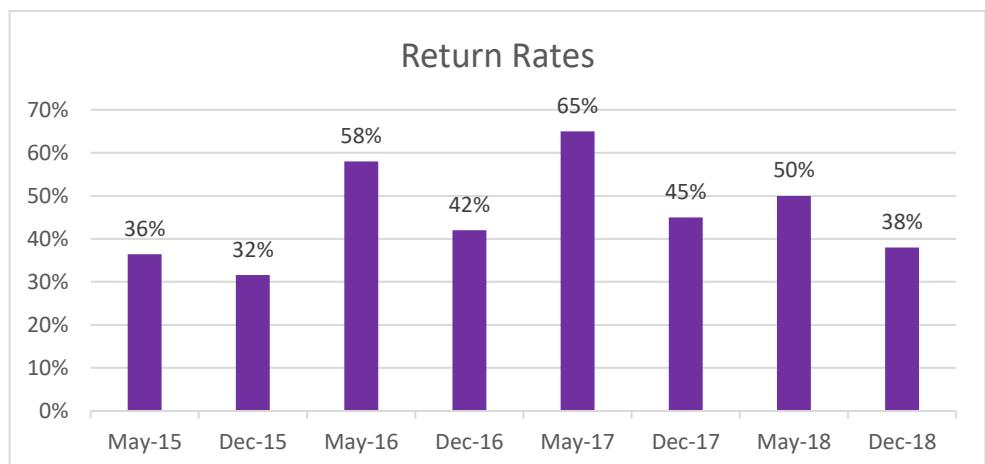
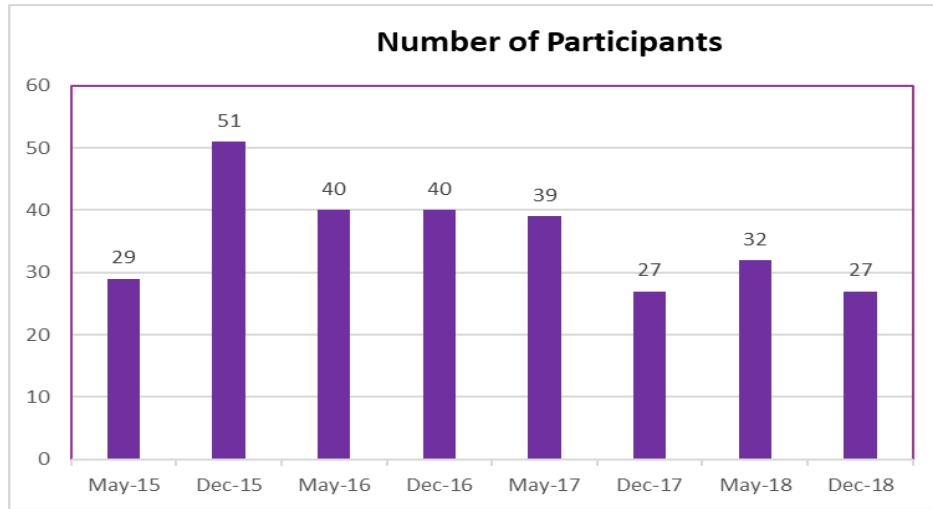


## Introduction

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 between June - September 2019 for the graduating class of December 2018. The survey was sent out to seventy-one (71) graduates on August 13, 2019 via the student's personal e-mail address, which they provided to us prior to graduation. On August 25, 2019, fifteen (15) graduates replied then twelve (12) additional responses were received between August 25 – September 5, 2019. A reminder was sent on August 27, 2019, to gain those additional 12 responses. On September 13, 2019, the survey was closed with twenty-seven (27) graduates participating. The overall response rate for this survey group is 38%.

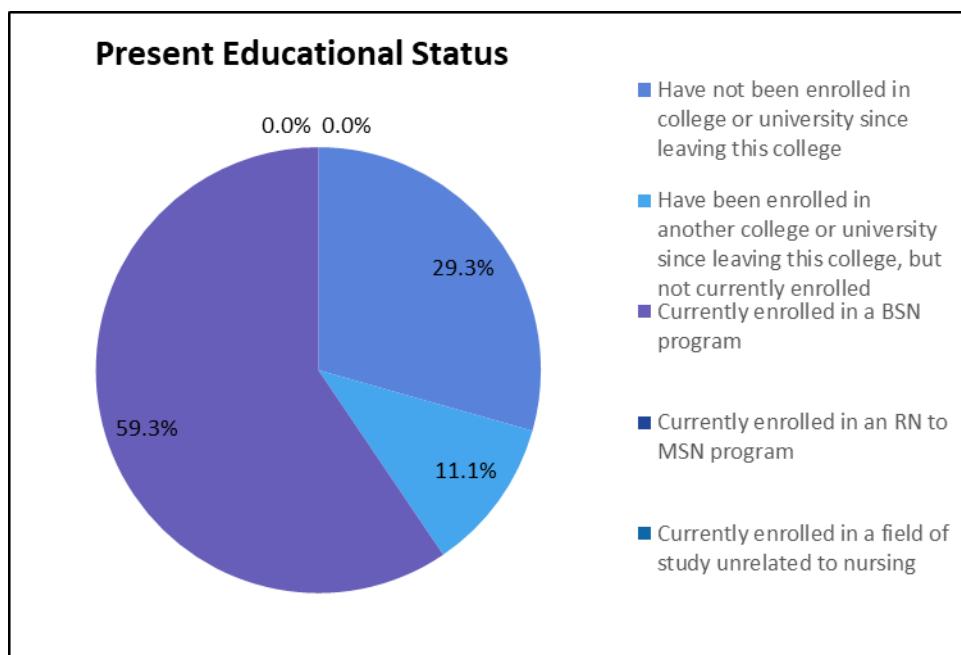
**Please Note: graduate responses in quotations are reprinted as they appeared on the survey, including spelling and grammatical errors..**

## Historical Data Trends:



## Results:

**Educational status** (27 out of 27 responded): 59.3% (n=16) indicated that they are enrolled in a BSN program. 29.3% (n=8) have not been enrolled in college or university since leaving this college. Zero graduates indicated enrollment in a MSN program. Zero (n=0) of responding graduates is currently enrolled in a field of study unrelated to nursing and 11.1% (n=3) have been enrolled in another college or university since leaving this college, but not currently enrolled.



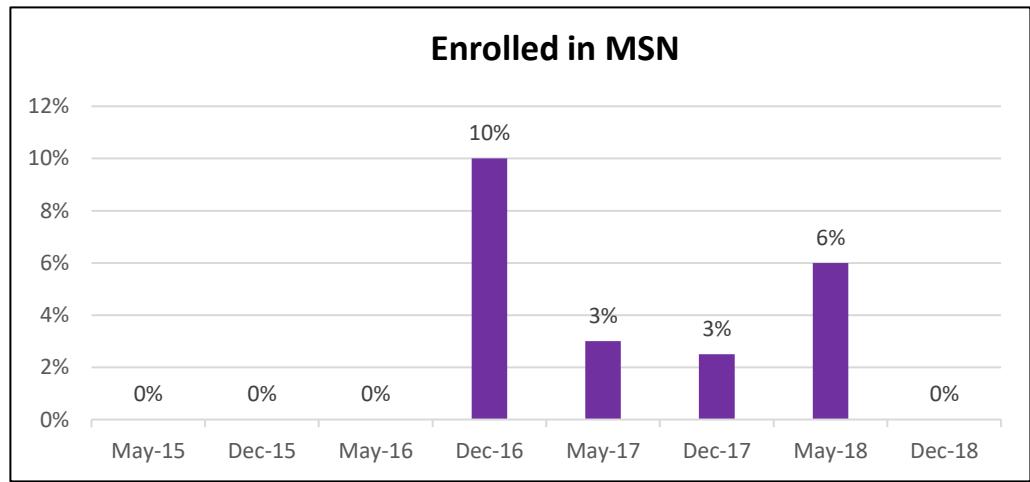
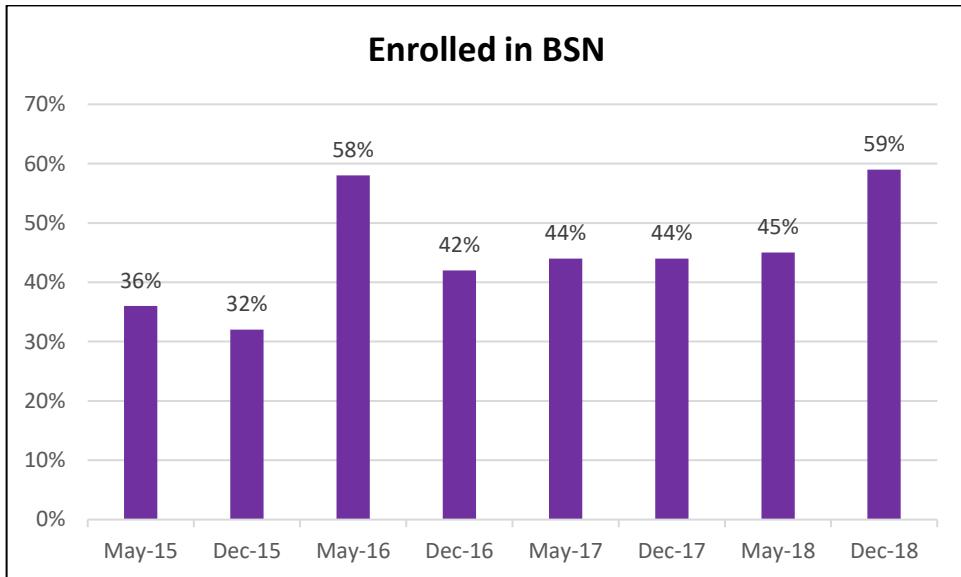
Enrollment in a BSN program by educational institution (20 out of 27 responded): 15% (n=3) were enrolled at Western Governors University/WGU; 5% (n=1) was enrolled at Lewis University; 5% (n=1) enrolled at Governor's State University; 45% (n=9) enrolled at Purdue University Northwest; 5% (n=1) enrolled at Chamberlain College of Nursing; 10% (n=2) enrolled at Indiana Wesleyan University; 5% (n=1) enrolled at University of Alabama. An additional 2 respondents chose not to indicate their College or University at this time.

When asked why they were not enrolled in a BSN program, ten (10) graduates responded. Of the responding students, 50% (n=5) cite too many family responsibilities; 20% (n=2) cannot afford school right now, and an additional two (2) students, or 20%, indicated since it was not required by their

employer they were not enrolled. Some of the respondents indicated the additional reasons added as to why they are not enrolled:

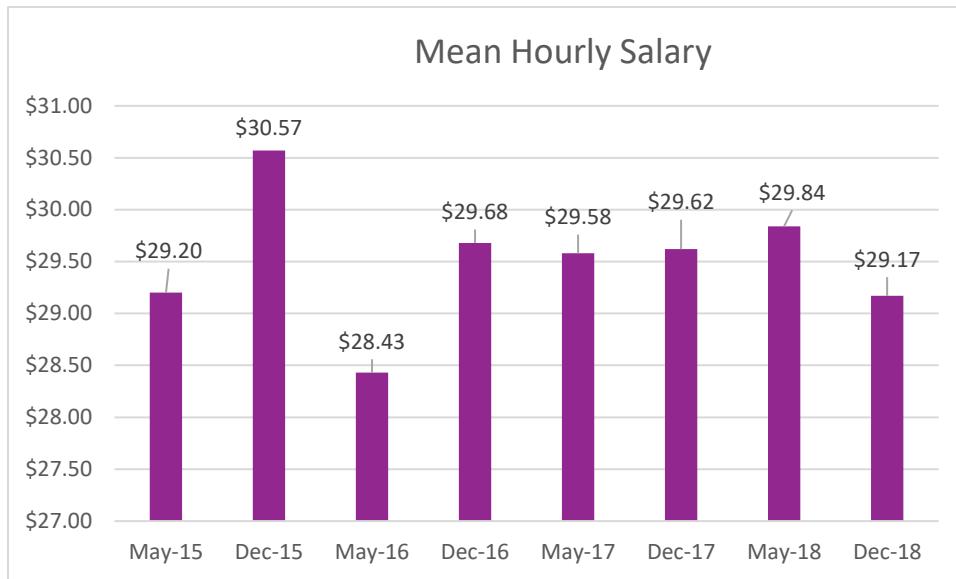
- *“My employer does not pay more for BSN. I plan to begin a program next year, hopefully when I can transfer into a new position within my current hospital.”*
- *“My employer allows tuition reimbursement after several months with the company. Waiting until that benefit kicks in then I will get my BSN degree.”*
- *“Trying to gain solid footing as a RN before adding an additional work load and taking a break.”*

#### Historical Data Trends:

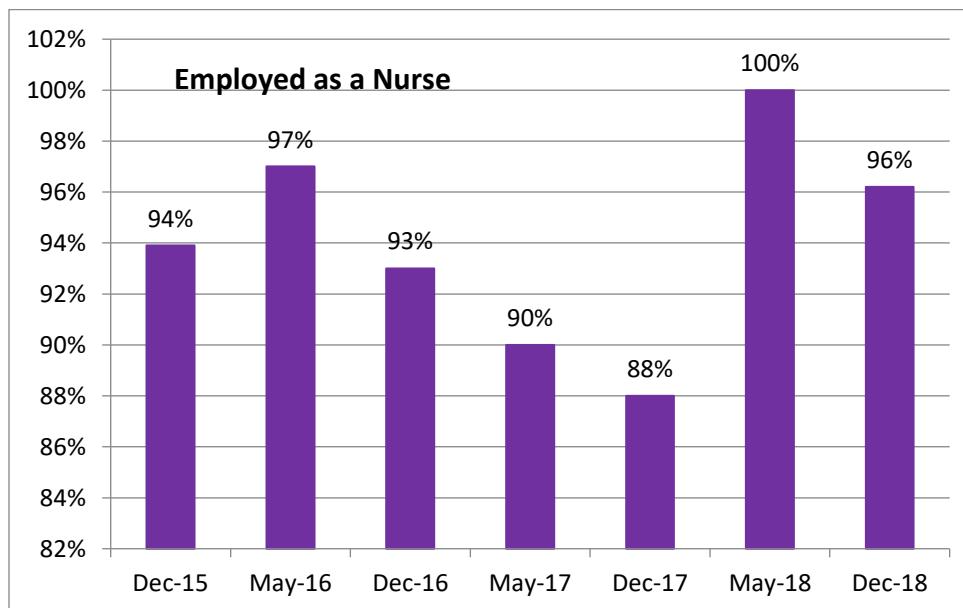


**Hourly salary:** (27 out of 27 responded) before deductions (does not include overtime). Range of responses: \$18.00 to \$38.00 per hour, with an average of \$29.17 per hour.

**Historical Data Trends:**



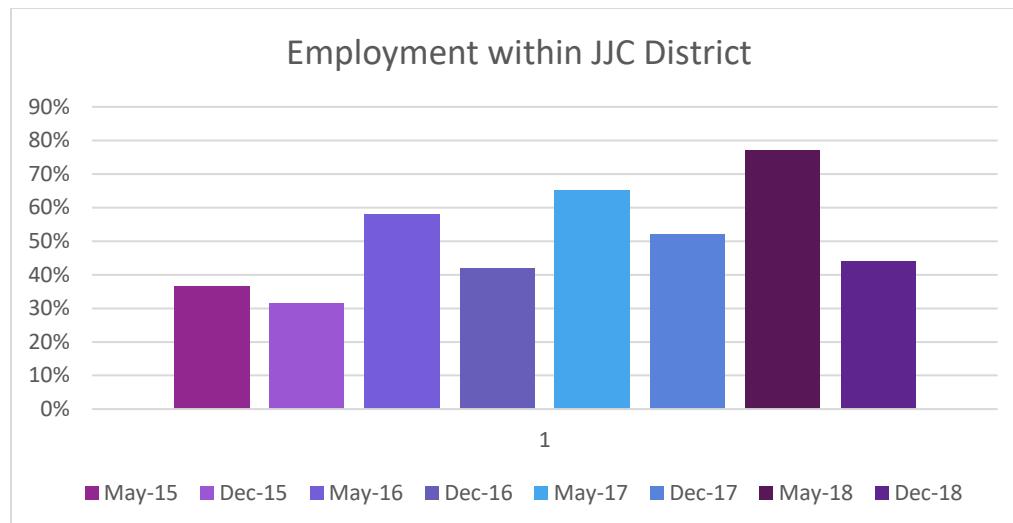
**Employment status** (27 out of 27 responded): 96.2% (n=26) of the graduates were employed as a nurse. One respondent, 3.7%, replied being Unemployed.



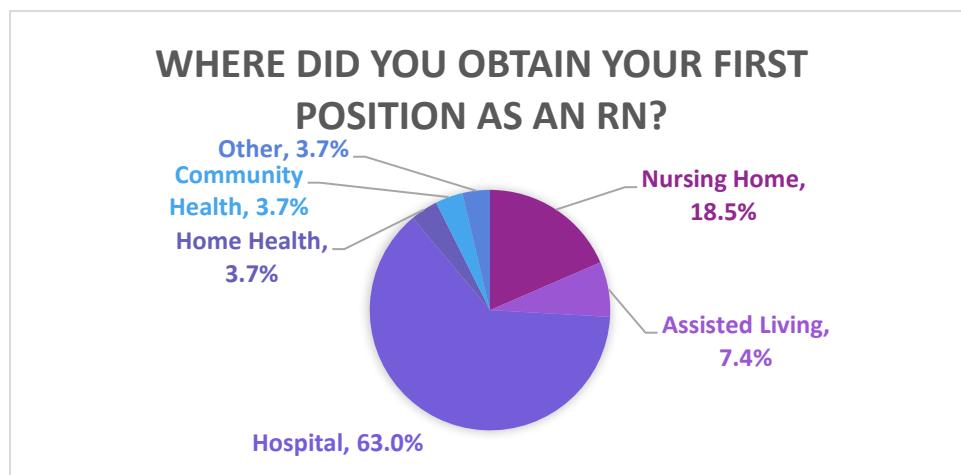
**JJC Community (27 out of 27) responded:** Employment within the JJC community district is

44% (n=12) and 56% (n=15) 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.

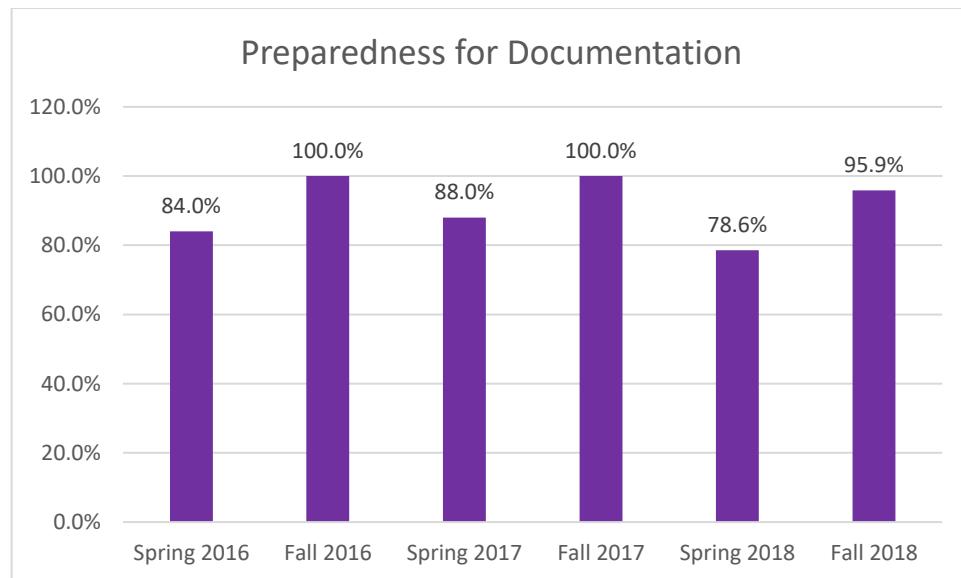
### **Historical Data Trends:**



**First position as a nurse:** Of the twenty-seven (27 out of 27) graduates who answered this question; 63% (n=17) obtained their first RN job in the hospital, 18.5% (n=5) in an extended care facility, 7.4% (n=2) in assisted living facility, 3.7% (n=1) in home health care, 3.7% (n=1) in community health. One additional respondent put “other” as choice, but did not specify.



**How well prepared were you in your job as a registered nurse related to documentation?** (24 out of 27 responded). The nursing faculty identified in past graduate surveys 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 in order to make changes in the program regarding documentation.



As this graph demonstrates, we have reached our expected level of achievement ( $\geq 80\%$ ). 54.2% ( $n=13$ ) of respondents indicated they were very prepared related to documentation and 41.7% ( $n=10$ ) felt somewhat prepared. 4.2% ( $n=1$ ) felt somewhat unprepared in relation to documentation in their job as a registered nurse. Comments given to us by respondents to indicate their choice of level of preparedness included:

- *I think the program should focus a little more on nursing notes and what to write*
- *We were not allowed to document in clinical or preceptorship. The programs are also different. I think if we had a longer preceptorship which allows for us to chart, it would be beneficial.*
- *I didn't feel very prepared because at the hospital I work at we use a different system to chart than I had seen at other hospitals that I did clinical hours at. Even during clinical hours I had never really seen other nurses chart which would have been helpful.*
- *We weren't able to document in the patient records as students*

- Hospitals have different documentation protocols.
- As student nurses, we did not get much time to document in EMRs and had limited access
- Scales or areas of documentation are not exactly clear of what is asked and documentation varies between preceptors
- I felt like a lot of nursing is learned hands on when you start working as a nurse
- Most of training was in regards to paper charting, which is rarely used
- For documentation preparation, it can't be prepared for much in nursing school due to the range of computer programs used. Learning the computer systems like Epic or Cerna is difficult to do as a student.

Update: The nursing faculty has agreed to implement an EHR program through one of the textbook publishers with whom JJC works. There was a selection process that took place and the faculty decided on DocuCare. All new students were required to purchase this program starting in Fall 2018. The graduates of the Spring 2020 semester will be the first set of students to have the EHR documentation tool implemented into the program.

**How well prepared were you in your job as a registered nurse related to the following?** 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.

Graduates (24 out of 27) ( 3 skipped this question) responded:

	Very Prepared	Somewhat Prepared	Somewhat Unprepared	Very Unprepared	Rating of Very Prepared & Somewhat Prepared
Nursing Skills (catheterization, IV, IM, suctioning, etc.)	12	9	3	0	87.5%
Utilization of the nursing process	16	7	1	0	95.8%
Delegation skills	16	7	1	0	95.8%
Patient/family physical assessment skills	20	4	0	0	100%

Patient/family psychosocial assessment skills	16	7	1	0	95.8%
Nursing care prioritization	18	5	1	0	90.8%
Cultural competence	19	5	0	0	100%
Using evidenced based practice in patient care	15	8	1	0	95.8%
Critical thinking skills	15	7	2	0	92.2%
Nursing care prioritization	18	5	1	0	90.8%
Patient communication skills	19	4	1	0	95.8%
Legal/ethical issues	12	9	3	0	87.5%
Clinical decision making skills	16	7	1	0	95.8%
Patient/family teaching skills	18	5	1	0	90.8%
Collaboration with other healthcare members	18	5	1	0	90.8%
Medication knowledge/skills	19	4	1	0	95.8%
Patient safety issues	19	4	1	0	95.8%

#### Comments from graduates on preparedness:

- *There are so many things to remember, it's completely terrifying. Things that were not my strong suit, such as ethics are still hard for me. I work nights and do not need to deal with those problems as often.*

- *JJC prepared me a lot and I am very thankful for my experience in the nursing program at jjc. However, I really do feel you learn so much more once you actually begin your career as a nurse.*
- *Clinical experience was hit or miss based on instructors.*

#### **Historical Data Trends:**

	May 2015	Dec 2015	May 2016	Dec 2016	May 2017	Dec 2017	May 2018	Dec 2018
Nursing Skills (catheterization, IV, IM, Suctioning, etc)	92%	97%	100%	93%	90%	100%	96.4%	87.5%
Utilization of the nursing process	100%	100%	100%	100%	97%	100%	100%	95.8%
Delegation skills	90%	92%	94%	96%	90%	100%	96.4%	95.8%
Patient/family physical assessment skills	100%	100%	100%	96%	100%	100%	100%	100%
Patient/family psychosocial assessment skills	100%	100%	97%	96%	97%	100%	100%	95.8%
Patient/family spiritual assessment skills	92%	92%	100%	89%	94%	100%	96.4%	90.8%
Nursing care prioritization	92%	100%	100%	96%	97%	100%	100%	100%
Cultural competence	100%	100%	100%	96%	94%	100%	100%	95.8%
Using evidenced based practice in patient care	92%	100%	97%	96%	94%	100%	96.4%	92.2%
Critical thinking skills	96%	100%	97%	96%	90%	100%	96.4%	90.8%
Patient communication skills	100%	97%	100%	100%	*N/A	100%	100%	95.8%
Legal/ethical issues	92%	95%	97%	93%	*N/A	100%	100%	87.5%
Clinical decision making skills	88%	100%	97%	100%	*N/A	100%	100%	95.8%
Patient/family teaching skills	100%	100%	100%	93%	*N/A	100%	96.4%	90.8%
Collaboration with other healthcare members	92%	97%	97%	86%	*N/A	100%	96.4%	90.8%

Medication knowledge/skills	92%	100%	97%	93%	*N/A	100%	96.4%	95.8%
Patient safety issues	100%	100%	100%	100%	*N/A	100%	100%	95.8%

**\*NOTE:** In the May 2017 graduate survey, the final 7 categories were inadvertently omitted in the survey data collection (as indicated by N/A). This was rectified for the Fall 2017 graduate survey report.

**Comments made by graduates of ideas/suggestions not addressed in the survey are noted below  
(6/27 responses)**

- *Students need more hands on experience. They need to know how to give and receive bedside report*
- *I think I was 80-85% prepared, aside from my fear. We were not allowed start IVs, and I am a horrible stick still. I think MOST other nursing skills I am competent with, but would still defer to another nurse if I am unsure if I can accomplish it by myself.*
- *I suggest taking out ATI from the nursing program. It literally did nothing to prepare me for the NCLEX or becoming a nurse. It only stressed me out more and I felt it tested on a lot of information that wasn't even taught throughout school.*
- *Nurse bullying is prevalent where I work. It would have been helpful to have a course or some short educational session on how to deal with this realistically and professionally.*
- *Most people that I have worked with including managers are shocked to learn I have only been a nurse since January. I would say the program has prepared me well for the nursing field.*
- *I felt so comfortable in my nursing role knowing that I received my education from JJC. What a wonderful program!*