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With love or authority? Vesting people in their healthcare

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People usually make decisions that impact health when health practitioners are not present. So how can practitioners motivate them to make better health decisions? We investigate whether reminders can improve a person's food choices. If so, what kind of reminders are most effective—those that simply remind people to take care of their health or those that additionally associate an image of authority (e.g., doctor) or of social support (e.g., teddy-bear hug) with the message? A simple health message should be more effective than no message and as effective as a message with an image, if people are rational. A doctor's image may work best if people comply with authority. But if social connection and feeling of belonging improve healthy choices, the reminder with a social connection image could improve social belonging and work best. In study 1, people at a cafe were randomly assigned a lottery ticket with one of the four messages (i.e., no message, health message, health message+doctors image, health message+teddy bear). We found those assigned a social connection health reminder added significantly less sugar to their coffee and chose low calorie options more often. In study 2 (n=457), diabetic patients at a hospital were provided one of the four reminders (fridge-magnet) before they went home. Again, the social connection magnet significantly improved health outcomes of the patients as measured by their blood sugar levels one month and three months later but especially if they initially indicated they have few friends.

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The start of a pilot nurse residency program

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New nurses often identify feelings of anxiety, shock and role stress during role transition from student to professional nurse. Short orientation programs do little to ease the transition. Transitional problems cause 35 to 60 percent of RNs to leave their first employer within one year after hire. Research has demonstrated significantly fewer errors; improved patient outcomes; and a reduction of first year turnover (from 35-61% to 6-13%) among participants in nurse residency programs. A quality improvement project was completed which reports the outcomes of a piloted 1 year nurse residency program aimed to ease the transition of graduate nurses (GNs) to registered nurses (RNs). The pilot program was initiated through a partnership with a university and an acute care hospital located in the southeastern United States. The pilot program was designed on the framework of Benner's theory of developmental stages of a nurse from novice to expert and through recommendations of the Institute of Medicine. A pre-post intervention design was administered using the Casey-Fink Graduate Nurse Experience Survey. The tool assessed feelings of comfort and confidence during the student, graduate and novice nurse phases.

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