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Changing the Landscape: Volunteer Retired Nurses Add Innovation to Patient Care

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Introduction

A formal volunteer retired nurse (VRN) program was formed to utilize the expertise from retired nurses in a practice partnership to enhance the onboarding process of newly graduated nurses.

Evidence suggests that a practice environment coupling experienced retired nurses with newly graduated nurses supports the socialization of new nurses and assists them in role clarity and self-efficacy, as well as knowledge of organizational culture.^{1,2,4,6,7,8,9}

Qualitative studies show multiple benefits to volunteering in a formal volunteer program.^{1,2,3,4,5,6,7,8,9,10}

For the volunteer, formal volunteering enhanced self-worth, provided intellectual stimulation, increased functioning and life satisfaction, eased the transition to retirement and reduced social isolation and self-rated depression.^{1,3,4,6,7,8,9,10}

The newly graduated nurses learned valuable lessons from the retirees' lifetimes of experience; not only did they gain tacit knowledge and skills, the retirees became a resource for networking and setting professional goals, career development and work/life balance.^{2,3,5}

As mentors on the unit, retirees provide support and guidance through workplace adversities and stressors, foster a sense of trust and provide a positive professional role model.

Objective(s)/Purpose

To develop a new role for the retired RN, sharing knowledge with newly graduated RNs to enrich both the experience of the new nurse and the retirement experience of a treasured resource (the experienced nurse).

Method



VRN candidates were interviewed to determine an appropriate fit for a service area.

An 8-hour orientation was mandatory and included speakers and discussions on hospital protocols and expectations.

Accepted VRN candidates are given reference lists of "Can Do" and "Cannot Do" tasks to minimize miscommunication or confusion between staff and VRN.

Once the VRN is assigned to a unit they receive a tour of the unit and an orientation to unit-specific protocols and work flows.

VRNs work with Charge RN to set day's expectations and goals.

VRNs act as mentor and assist newly graduated nurses or function in a patient liaison capacity.

Feedback from Volunteer RNs

"I got into nursing because I wanted to care for patients and be nurturing, give direct patient care, and provide compassion. I am so happy that in my retirement I am still able to give this to patients and their families."

"The patients really appreciate the extra I can do for them. I'm so happy and satisfied to know I'm helping others and appreciated by patients, family, and staff."

"I never thought that I would feel so fulfilled after I retired in the way that I did when I first became a nurse."

Summary

Baby boomer generation nurses are expected to start retiring in large numbers and reducing the nursing workforce substantially while newly graduated nurses are entering the profession with higher patient acuties and more exacting expectations than ever before.

A formal volunteer program for retired nurses provides:

- Mentorship
- Role modeling and support for new nurses
- Evidence-based health benefits for the retirees
- A more flexible, blended acculturation process for both the new nurse and the volunteer
- Benefits the patient experience
- Keeps years of invaluable nursing knowledge and experience within the profession

Special thanks to all of the MMC volunteer retired nurses

References

- 1.Brown, J. W., Chen, S., Mefford, L., Brown, A., Callen, B., & McArthur, P. (2011). Becoming an older volunteer: A grounded theory study. Nursing Research and Practice, Article ID 361250, 8 pages, doi:10.1155/2011/361250.
- 2.Clauson, M., Wejr, P., Frost, L., McRaed, C. & Straight, H. (2010). Legacy mentors: Translating the wisdom of our senior nurses. Nurse Education in Practice, 11(2), 153-158.
- 3.Cocca-Bates, K. & Neal-Boylan, L.(2011). Retired RNs: Perception of volunteering. Geriatric Nursing, 32(2), 96-105.
- 4.Joongbaeck, K. & Pai, M. (2010). Volunteering and trajectories of depression. Journal of Aging Health, 22(1), 84-105.
- 5.McDonald, G., Mohan, S., Jackson, D., Vickers, M., & Wilkes, L. (2010). Continuing connections: The experiences of retired and senior working nurse mentors. Journal of Clinical Nursing, 19(23-24), 3547-3554.
- 6.Morrow-Howell, N. (2010). Volunteering in later life: Research frontiers. Journal of Gerontology, 65B(4), 461-469.
- 7.Parkinson, L., Warburton, J., Sibbritta, D., & Byles, J. (2010). Volunteering and older women: Psychosocial and health predictors of participation. Aging and Mental Health, 14(8), 917-927.
- 8.Sarid, O., Melzer, I., Kurz, I., Shehar, D., & Willibald, R. (2010). The effect of helping behavior and physical activity on mood states and depressive symptoms of elderly people. Clinical Gerontologist, 33(4), 270-282.
- 9.Tang, F. (2009). Late-life volunteering and trajectories of physical health. Journal of Applied Gerontology, 28(4), 524-533.
- 10.Von Bonsdorff, M. & Rantanen, T. (2011). Benefits of formal voluntary work among older people. A review. Aging Clinical and Experimental Research, 23(3), 162-169.