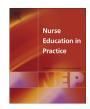
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Taken-for-granted assumptions about the clinical experience of newly graduated registered nurses from their pre-registration paid employment: A narrative inquiry



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ABSTRACT

Paid employment within clinical setting, such as externships for undergraduate student, are used locally and globally to better prepare and retain new graduates for actual practice and facilitate their transition into becoming registered nurses. However, the influence of paid employment on the post-registration experience of such nurses remains unclear. Through the use of narrative inquiry, this study explores how the experience of pre-registration paid employment shapes the post-registration experience of newly graduated registered nurses. Repeated individual interviews were conducted with 18 new graduates, and focus group interviews were conducted with 11 preceptors and 10 stakeholders recruited from 8 public hospitals in Hong Kong. The data were subjected to narrative and paradigmatic analyses. Takenfor-granted assumptions about the knowledge and performance of graduates who worked in the same unit for their undergraduate paid work experience were uncovered. These assumptions affected the quantity and quality of support and time that other senior nurses provided to these graduates for their further development into competent nurses and patient advocates, which could have implications for patient safety. It is our hope that this narrative inquiry will heighten awareness of taken-for-granted assumptions, so as to help graduates transition to their new role and provide quality patient care.

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1. Introduction

The transition from nursing student to registered nurse (RN) is often plagued by stress, leading to critical challenges in recruiting and retaining new graduates internationally, especially in the context of a nursing shortage (Duchscher, 2009; Jewell, 2013; Kelly and Ahern, 2009). Pre-registration paid employment within clinical settings is one of the various kinds of practice education models and retention strategies used to better prepare new graduates for actual practice and facilitate their stressful transition to becoming an RN (Budgen and Gamroth, 2008; Salt et al., 2008). However, the relationship between such paid employment and post-registration experience in the same setting remains under-researched (Phillips et al., 2014). This study helps to fill this gap in our knowledge by

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employing the methodology of narrative inquiry to explore this issue, which has important implications for clinical education and support.

2. Background

Thus far, most studies on paid employment undertaken by nursing students in clinical settings have been conducted in the US, Australia, the UK, and Canada, and not many in Europe or Asia (Phillips et al., 2014). Such students are employed as unregulated support workers for example healthcare assistants (HCAs). They provide support in carrying out the day-to-day tasks of patient care under the supervision qualified nurses, with some employment models involving preceptorships (Kramer et al., 2013; Tritak et al., 1997). Financial incentives and clinical experience are two main reasons for engaging senior nursing students in paid employment. This model is closely related to the restructuring of nursing education from the previous hospital-based apprenticeship paid model of training to the current unpaid supernumerary clinical structure

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of university education (Kenny et al., 2012; Phillips et al., 2012; Rochford et al., 2009). Similar to the role of HCAs in the UK and assistants in nursing in Australia (Kenny et al., 2012), nursing students in Hong Kong are employed as Temporary Undergraduate Nursing Students (TUNS). TUNS are senior year students from higher-diploma or baccalaureate nursing programmes who are employed by public hospitals on a part-time basis during weekends and holidays, often for periods of one to two years. The TUNS model differs from the American and Canadian models (Kilpatrick and Frunchak, 2006; Lott et al., 2011) in that it is less educationally focused and does not involve any formal preceptor or specific training. Rather, TUNS receive a brief ward orientation and supervision from any available staff nurse. Some externs are allowed a choice of specialty and clinical rotations, whereas this is generally not the case with TUNS. TUNS mainly perform basic nursing care such as monitoring vital signs, bathing, feeding, wound and catheter care, and patient admissions.

Evaluations of paid employment models in the recent decade have largely reported favourable learning and workplace outcomes. Nursing students learn as insiders (Rush et al., 2004), gain clinical experience, confidence, and satisfaction (Lott et al., 2011), socialize with coworkers and clients (Coakley and Ghiloni, 2009; Hoffart et al., 2011), and transition more easily into their new role as professional nurses (Phillips et al., 2012). Nursing colleagues also benefit, from a lessening of their workload and from improved satisfaction, staff morale, and patient care (Gamroth et al., 2006). Paid employment models give rise to opportunities to recruit students for RN positions, and reduce orientation times, and the cost to institutions (Courney, 2005; Dempsey and McKissick, 2006). However, most of the studies reviewed in this paper were conducted prior to professional registration. Only a few were conducted post-registration, and these reported that the experience of pre-registration paid employment can have a potentially negative impact (Cantrell et al., 2005; Steen et al., 2011), although those findings should be interpreted with caution given methodological limitations such as small sample sizes and the absence of a control group. Another study only reported the general perception of the impact of the externship programme on RN transition without specifying whether the former externs worked in the same unit after registration and without exploring their experiences (Gamroth et al., 2006). Alarmingly, most new graduates who remained in the same unit in which they interned reported feeling pressured to perform from both management and other senior RNs, whereas their counterparts who had changed units within the same hospital upon registration did not (Steen et al., 2011). Researchers have also noted that there is a limited understanding of the relationship between the pre-registration paid employment and the post-registration experience of newly graduated nurses (Kramer et al., 2013; Phillips et al., 2014).

The aim of this study is to obtain a better understanding of the transitional experience of newly graduated registered nurses (NGRNs), who have TUNS experience in the same unit. This is the first qualitative study to explore the relationship between pre-registration paid employment and post-registration experiences in the same unit, in order to identify strategies to improve the transition and retention of NGRNs, and the quality of the care that they deliver.

3. Methodology

Narrative inquiry is the study of stories that account for human experiences (Connelly and Clandinin, 2006). It was influenced by Dewey's theory of experience (1938), which emphasizes the inextricable link between experience and education, and the two principles of continuity and interactions (Dewey, 1938). Narrative

inquiry is an interpretive and relational inquiry for generating meanings and challenging taken-for-granted assumptions (Clandinin and Connelly, 2000; Lindsay, 2006). This study is conceptually framed by the three-dimensional space of narrative inquiry, with its dimensions of temporality, personal-social interactions, and place (Clandinin and Connelly, 2000) (Table 1).

3.1. Study design and participants

Four methods were employed to collect data from four sources. Along the temporal dimension of the conceptual framework, three individual unstructured interviews were conducted with newly graduated registered nurses (NGRNs) at 12, 18, and 24 months after registration to understand how their present and future experiences were shaped by their past. This design is also aligned with the duration of the preceptorship programme in Hong Kong's public hospitals (Hospital Authority, 2006) and with the development of practice readiness along the career trajectory (Johnstone et al., 2008; Wolff et al., 2010). Repeated unstructured interviews may produce stories that are important to the participants, and minimize the influence from existing literature and the researchers' knowledge (Clandinin and Connelly, 2000). The NGRNs were also invited to share their ongoing experiences and reflections via emails between interviews. These email conversations facilitated more in-depth discussions of their ongoing experiences and the building of participant-researcher relationships (Seidman, 2006). Although the experience of NGRNs is the central focus of the study, their experiences and perceptions were shaped by others. Preceptors, senior nurses, ward managers (WMs), and doctors, identified as key influences in the NGRNs' transition (Casey et al., 2004; Evans et al., 2008), were invited for focus group interviews. Relevant hospital documents were also analysed.

This study is part of a larger doctoral study undertaken from 2011 to 2012 to understand the meaning of 'mentoring NGRNs for sustaining good work' (Gardner et al., 2001; Miller, 2006). Therefore, the criteria for selecting NGRN participants were those who had been identified as committed to delivering excellent and ethical care (Box 1). Snowball sampling was used by asking participants to refer us to others whom they considered knowledgeable, articulate, and willing to take part in this study (Creswell, 2007).

The study was approved by the ethics committees of the university to which the authors are affiliated and the hospitals where the participants work. Written informed consent to participate voluntarily in this study was obtained from the participants. Process consent was obtained before subsequent interviews with NGRNs. Pseudonyms were used.

3.2. Data collection

Twenty-three newly graduated registered nurses (NGRNs) were identified, and eighteen participated. Interviews began with an open-ended question: 'Tell me about your transition from a nursing student to becoming an RN?' Participants took the lead in telling their own stories. Each interview lasted between one to 3 h. Coincidently, all of them had at least one year of previous Temporary Undergraduate Nursing Student (TUNS) experience and had been invited by their WMs to 'upgrade' to RN in the same unit, except for three who resigned before registration. Nine NGRN participants chose to leave their previous TUNS unit to work in another unit/hospital. Only six NGRN participants 'upgraded' in the same unit after registration, either voluntarily or involuntarily. Their stories were therefore theoretically relevant to the attempt to better understand how their post-registration transitional experience might have been shaped by their pre-registration experience

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