



Does the choice of pre-registration paid employment impact on graduate nurse transition: An Australian study^{☆,☆☆}



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SUMMARY

The process of transition for newly qualified registered nurses in their first year of practice remains a difficult and onerous proposition. Aside from well-documented issues pertaining to orientation, preceptorship, appropriate patient allocation, indifferent communication and feedback from senior nursing staff, other influences can determine how new graduates adjust to the role of beginning registered nurse. The dataset from a large Australian study, that examined the impact of pre-registration paid employment on graduate nurse transition, contained a significant amount of data that indicated that undergraduate work choice might influence how senior colleagues view graduate nurses during their transition to registered nurse practice. Although this issue was beyond the scope of the original study, the volume of data and recurrence of this issue provided a strong rationale for further exploration. A secondary study was designed to explore the research question *does previous undergraduate work choice influence how graduate nurses are viewed by senior colleagues during their transition to registered nurse?* Using secondary analysis, and an interpretive descriptive approach, two qualitative data sets arising from focus groups and open ended questionnaire responses were analysed and three organising themes identified; drawing on prior learning, the burden of employment choice and outside the setting. The global theme “confidence and perceptions” describes graduate nurses’ views about their prior paid employment choice being beneficial to them and perceived to assist them in the process of transition. Findings suggest that depending on the choice of prior paid employment, new graduates (particularly those who were formerly enrolled or second level nurses) are treated differently by their senior colleagues; in terms of the level of support offered in transition, whether prior skills and experiences from previous paid employment are acknowledged, made light of or dismissed. For successful transition to registered nurse practice it is recommended that senior nursing staff treat each new graduate equally, not based on prior paid employment experiences, and that all new graduates regardless of their prior work experiences require a period of adjustment to their new role.

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Introduction

In one of the only studies of its kind, Phillips et al. (2012, 2013) sought the views of newly qualified Australian graduate nurses on undergraduate paid employment choice and its impact on transition to registered nurse (RN) practice. The mixed method study explored the question ‘does any particular pre-registration paid employment choice make a difference to successful transition to registered nurse practice?’ and produced data from 392 questionnaires to eight focus

groups. New graduates indicated that prior employment location [hospitality and retail sector versus health care settings] had little impact on a favourable transition, however, there were benefits for students who had worked versus those who had not.

Whilst this finding was important, there was a wealth of data collected that suggested new graduates were treated differently in the workplace depending on the types of paid employment they pursued during their undergraduate studies. The volume of data that supported this recurring theme, provided a compelling rationale to design a new study, utilising secondary analysis, to explore the research question “does previous undergraduate work choice influence how graduate nurses are viewed by senior colleagues during their transition to registered nurse?”

Transition to Practice

The process of transition to the workplace for new graduate nurses presents challenges and difficulties (Nash et al., 2009) with

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conflicts for new graduates arising between the ideal of patient care and the realities of practice; increasing patient acuity, high patient throughput, staff shortages and skill-mix, struggles for adequate support and socialisation (Pellico et al., 2009; McKenna and Green, 2004; Ellerton and Gregor, 2003). Employers' expectations that graduates "hit-the-ground-running" (Morrow, 2009), heighten the anxiety and conflict.

Despite the Australian transfer of nurse education to universities occurring over 20 years ago, transition remains problematic to new graduates, academics and healthcare institutions (Greenwood, 2000; Levett-Jones and Fitzgerald, 2005). Graduates continue to have difficulty integrating into the role of a registered nurse, commonly plagued by confusion regarding what their role and responsibilities entail (Chang and Hancock, 2003). This leads to role stress and ultimately role overload (Newton and McKenna, 2007). The difficulties encountered by new graduates in the transition phase are not limited to Australia, but have been reported extensively in the United States (Ready et al., 2012; Wu et al., 2012; Hafler, 2011; Messmer et al., 2011), Canada (Rhéaume et al., 2011; Laschinger et al., 2010) and the United Kingdom (Morgan et al., 2012; O'Kane, 2011; Higgins et al., 2010). Almost four decades ago Kramer (1974) described the "reality shock" faced by new graduates, and in 2009, Duchscher, drawing on Kramer's work, coined the term "transition shock". This described the despair new graduates face transitioning from a student into the registered nurse role. Internationally, researchers argue that lack of support for new graduate nurses potentiates the anxieties of beginning practice, escalating job dissatisfaction, fatigue and burnout which results in many exiting the profession within the first year of practice (Laschinger et al., 2010).

One potential strategy to address transition stress is increasing exposure to the healthcare workplace, through undergraduate nursing students engaging in paid employment in addition to the requirements of their studies. Internationally, students come to nursing with a diversity of prior experience. Some come directly from secondary schooling, many have volunteer experience and increasingly the profile of nursing students in a number of countries is changing, with increasing numbers of mature age students entering nursing with a wealth of prior experience (Steele et al., 2005; O'Brien et al., 2009; Copey, 2011; Kenny et al., 2011; Bloomfield and Jones, 2013). Whilst researchers acknowledge the diversity of prior workplace experience amongst students, including those who have never worked, recommendations from a number of countries suggest that students should pursue work in healthcare in addition to their studies to assist their transition to the registered nurse role (Romyn et al., 2009; Kenny et al., 2012).

In spite of high study workloads, researchers across a number of countries state that large numbers of nursing students commence or continue to pursue paid employment in addition to their university studies (Greenbank et al., 2009; Kenny et al., 2012; Robotham, 2012). Whilst some countries, such as the United Kingdom, support nursing students with bursaries (Karstad, 2012; Sturgeon, 2012), researchers indicate that many students engage in part time employment, as bursaries only go some way to meet the ongoing financial burden of living costs (Rochford et al., 2009; Hamshire et al., 2013).

In Australia, approximately 80% of nursing students complete some form of paid employment to financially support themselves through their university studies (Kenny et al., 2012; Rochford et al., 2009; Lee et al., 1999). Most, work in healthcare settings or in hospitality and retail (ABS Education and Work, 2012). In Australia and internationally, there has been increasing interest in healthcare services designing specific paid employment programmes targeted at final year students, underscoring the proposition that paid work in healthcare settings, alongside their university studies, will better prepare them for practice (Phillips et al., 2012).

However, there is a limited body of literature on paid employment for undergraduate nursing students, with the main focus being on employment in healthcare settings (Alsop et al., 2006; Gamroth et al., 2006; Hoffart et al., 2006; Nelson et al., 2004; Olsen et al., 2001). Less attention has been given to students who work in hospitality

and retail (Rochford et al., 2009; Lee et al., 1999; Ferguson and Cerinus, 1996; Ford et al., 1995). Findings from these studies suggest that undergraduate nursing students who work in healthcare settings develop greater proficiency with skills; however the impact on transition is largely anecdotal. Phillips et al. (2013) reported that time management, confidence, and dealing with conflict were acquired from all forms of paid employment and that irrespective of the type of paid employment, new graduates struggle with transition and require support throughout the first year of practice.

Romyn et al. (2009) argue that it is beneficial for new graduates to have engaged in some form of prior work to assist with transition to registered nurse practice (Romyn et al., 2009), recognising that socialisation to practice is challenging, with new graduates desperate to fit in (Malouf and West, 2011). Australian policy makers (Senate Community Affairs Committee, 2002) suggest that undergraduate nursing students should work part time in healthcare settings, in addition to their university requirements, and it would be reasonable to assume that students who have worked in healthcare would assimilate into graduate practice more effectively (Rochford et al., 2009) than their colleagues who pursue other paid employment options.

The treatment of new graduates by work colleagues in the transition period has been well documented; with studies suggesting that relationships can be less than supportive (Teoh et al., 2013; Johnstone et al., 2008; Kelly and Ahern, 2008). Thomka (2001), in a study with new graduate nurses, found that graduates complained of ill-treatment, through being disrespected and belittled, with experienced staff often lacking patience and overtly critical of their performance. Throughout the first year of practice, Australian graduates generally complete three-to-four clinical rotations (medical, surgical and specialty areas namely operating room and intensive care). Each rotation can be stressful for a newly qualified graduate nurse, particularly if there is a limited orientation, new staff and routines, new techniques to learn, and new equipment to manage. Teoh et al. (2013) suggest that the stress for new graduates increases with each rotation, compromising transition.

Stress for new graduates is often exacerbated by the behaviours and attitudes of nursing staff. New graduates struggle for support (Johnstone et al., 2008), are allocated a patient load whose acuity is incongruent with a beginning skill set (Cowin and Hengstberger-Sims, 2006), and are unfamiliar with the culture and what is expected of them. Their adaptation attempts at fitting in are often ignored (Bisholt, 2012), leading to apprehension regarding their performance (Ellerton and Gregor, 2003). Wangenstein et al. (2008) argue that building confidence in newly qualified graduates requires recognition of performance. Behaviours exhibited by senior nursing staff that display spite, malice, rudeness, cruelty and nastiness (Kelly and Ahern, 2008) are continued challenges to new graduates in the process of transition, influencing the decisions of new graduates who consider exiting the profession. Repeated behaviours of bullying and violence towards new graduates (Laschinger et al., 2010) leave them feeling disempowered, and as a consequence, many experience burn out, ultimately contributing to significant graduate nurse turnover (Duchscher, 2009).

Whilst the study by Phillips et al. (2013) explored whether undergraduate employment choice supports a successful transition to practice, there is a dearth of knowledge on whether undergraduate employment choice influences how graduate nurses are perceived by senior colleagues in the transition period. This study addresses this gap.

Study Aim

The aim of this study was to explore whether previous undergraduate work choice influences how graduate nurses are viewed by senior colleagues during their transition to registered nurse.

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