



Supporting the novice nurse to fly: A literature review



Andrea Jewell ^{a, b, *}

^a The Ottawa Hospital, 1053 Carling Avenue, Ottawa K1Y 4E9, Canada

^b University of Ottawa, Ottawa, Canada

ARTICLE INFO

Article history:
Accepted 8 April 2013

Keywords:
Novice nurse
Transition
Critical thinking
Coach
Mentor

ABSTRACT

The evolution from a newly graduated or novice nurse to a competent nurse can be challenging and difficult. This transition involves a tidal wave of emotions along with time needed to develop critical thinking skills, in order to apply their knowledge to patient situations, make decisions and respond with appropriate actions. The purpose of this paper was to explore the existing literature in the area of supports for novice nurses; by determining who is a novice nurse, what can plague a novice's transition, and how to support their successful transition. These results have been compared with the role of Clinical Nurse Expert at The Ottawa Hospital and overall, the findings suggest that a one year coaching program for novices is an effective strategy for supporting their transition, subsequently increasing their retention rates, as well as having a positive influence on the nursing profession, our patients and the healthcare system.

© 2013 Elsevier Ltd. All rights reserved.

The transition from the safety net of academia to that of independent practice can be a frightening experience. Newly graduated or novice nurses often report feelings of self-doubt and inadequacy as they enter a new work environment (Andersson and Edberg, 2010). In fact, many describe feelings of discouragement and exhaustion with their first position, and according to Duchscher (2008) leading to high levels of burnout within the first 18 months of their career.

Canada, like many countries, is experiencing a nursing shortage. Present demands for full-time nursing positions are higher than the number of new graduates entering the profession (Duchscher, 2008). With high numbers of veteran nurses projected to retire in the next decade, there is an increased need to retain our novice nurses (CIHI, 2010a). Successful orientation has been deemed important by promoting the novice nurses' sense of confidence, competence and satisfaction (Goodwin-Esola et al., 2009). Yet, can a basic orientation completely abolish a novice nurse's sense of anxiety?

The purpose of this paper was to analyze and build on the work that has been completed to date in the area of supports for novice nurses. The aim of this literature review was to identify who is the novice nurse, what can affect the novice's transition and how to support their successful transition. The findings were then compared with the positive outcomes associated with the role of Clinical Nurse Expert at The Ottawa Hospital.

Methodology

A search was conducted to obtain literature on the novice nurse, including details of their transition process and existing supports. Electronic databases, including CINAHL Plus (with full text), ProQuest Nursing, Science Direct and Academic Online were explored utilizing the search terms: *novice nurses, transition, coaching, support, mentoring, retention, and clinical competence* (in the abstract field). Many relevant articles were also obtained through direct searches within specific peer-reviewed journals: Journal of Continuing Education in Nursing, Nurse Education in Practice, Journal of Nursing Education, and the Journal of Advanced Nursing. Inclusion criteria included written in the English language, with publication between 1999 and 2013.

This literature review consists of 23 peer reviewed articles, from a total of eleven journals. The articles were divided into the following categories: what is known about novice nurses, implications that affect their transition, and how to successfully support their transition. They were further subdivided according to themes, such as: emotional response, workforce trends, patient safety, mentoring versus coaching, and existing supportive programs.

What is known about novice nurses

Novice nurses are often described as inexperienced, and are either new to the profession or new to the area of practice (Duchscher, 2008; Goodwin-Esola et al., 2009). These novices generally possess extensive theoretical knowledge yet their ability

* The Ottawa Hospital, 1053 Carling Avenue, Ottawa K1Y 4E9, Canada.
E-mail address: ajewell@toh.on.ca.

to apply this knowledge still needs to be developed. A period of transition is required for each novice nurse lasting roughly one year, which involves both personal and professional growth (Morrow, 2009).

According to Benner, a novice nurse is a beginner who must 'have rules with which to practice, as there is no experience from which to draw conclusions' (as cited in Marble, 2009, p. 311). To transition from a novice to an expert nurse, a newly graduated nurse must move through the stages of novice, advanced beginner, competent, proficient, and expert (Marble, 2009). During this period of transition, a novice nurse requires the guidance of others in order to learn how to apply their theoretical knowledge to real-life clinical experiences (Morrow, 2009).

Similarly, Kramer described three phases that a novice nurse will experience during their first year of practice. The first three to four months of a novice's career is the honeymoon phase (period of *Doing*), a time when they are trying to understand what is expected of them, trying to do it well, and their main objective is to finish their tasks on time (Barton et al., 2005). It is here when many novices realize that they are not as prepared to practice as they thought. The next four to five months is the *Being* stage, when a novice nurse transitions from feeling overwhelmed to becoming more comfortable with his/her roles and responsibilities (Barton et al., 2005; Duchscher, 2008). It is marked by advancement in their knowledge level, thinking and skills, yet they still require validation from their peers (Duchscher, 2008). The final three to four months of their first year (*Knowing* stage) is a time of individuality and integration into their community of nurses (Duchscher, 2008). Here, a novice becomes more comfortable and confident, as though the blinders have been removed allowing them to see the big picture.

Transitional challenges for the novice nurse

Transitions are often complicated and difficult, and can be defined as 'starting with an ending, followed by a period of confusion and distress, and leading to a new beginning' (Delaney, 2003, p. 437). Within nursing, this transition from newly graduated or novice nurse to competent nurse is a common *rite of passage* that begins with orientation and can influence their entire career. It resembles a journey whereby a novice must cope with their new role, while dealing with mixed emotions and challenges with professional integration. The first three months of employment following graduation is the most stressful time in a nurse's career, and in North America approximately 35–60% of newly graduated nurses will change places of employment during the first year of work (Delaney, 2003). Consequently, this can have negative effects on both the nursing profession and the healthcare environment.

Emotional response

A sense of elation, satisfaction, and excitement is often described as the new graduate closes one chapter to move onto the next. However, for newly graduated nurses this sense of excitement is often quickly replaced by uncertainty, self-doubt, anxiety, and fear, as the safety net of the academic environment is gone and they are awakened to the reality of the true healthcare setting (Duchscher, 2008; Delaney, 2003; Goodwin-Esola et al., 2009).

Working in healthcare is challenging and stressful, as the environment is often in flux due to advances in technology, increasing patient acuity, along with a declining number of healthcare providers available to meet these demands (Morrow, 2009). Add this to the challenges experienced by novice nurses of a lack of confidence, role conflict, unrealistic expectations by staff, a lack of support, and tensions within the workplace; and often role ambiguity and role

stress will prevail (Duchscher, 2008; Delaney, 2003). These internal conflicts often develop as novices experience a clash between professional responsibilities and personal values and ideals.

Within the chaos of the healthcare environment, novice nurses often report feeling overwhelmed with their workload and amount of responsibility, and describe a sense of isolation within their nursing colleagues (Dyess and Sherman, 2009). For example, when everyone is running in response to patient care issues, who thinks to stop and ask the novice nurse if they need help or have a practice question? This is really important because often novices *will not* ask for help. *Fitting-in* is vital for them and some will avoid disrupting their colleagues with questions so that they are perceived as competent nurses; all the while feeling alone, unsure and placing a risk to patient safety (Delaney, 2003; Andersson and Edberg, 2010). A unit orientation often helps to reduce a novice's level of anxiety and aids with the transition from student to practicing nurse, yet will it sufficiently help to integrate them into the healthcare team?

Integration into the nursing profession

What occurs during a novice nurse's transition often has lasting effects, and many have stories of unkindness and abuse. *Eating our young* is a real concept within the nursing profession, and is associated with horizontal violence (Dyess and Sherman, 2009). It is unrealistic to expect that a novice will enter this profession as a 100% fully competent practicing nurse, yet some senior nurses do hold them to this standard. When novices encounter these nurses, they describe feeling unsupported and having received unkind or unfair treatment (Dyess and Sherman, 2009). Being chastised by senior nurses or being called after their shift to be told what they had forgotten to do are common experiences reported by novices (Duchscher, 2008). A combination of not knowing who to trust and wanting desperately to fit in can create an internal struggle for novices. With nearly half of all newly graduated nurses leaving their primary place of employment within the first year, the question remains *why*?

Integration into the interprofessional team

Novice nurses need to feel like accepted members of the healthcare team who actively participate and contribute to patient care, based on their level of skill and ability (Henderson and Eaton, 2013). However, they often describe feeling in the way and that their limited knowledge and experience is considered a weakness rather than an expected part of their transition (Miller, 2006; Morrow, 2009). Physician encounters, in particular, can be sources of extreme stress and anxiety for novices due to a lack of professional confidence (Dyess and Sherman, 2009; Andersson and Edberg, 2010). Therefore, the ability to be assertive, communicate effectively and to manage conflict situations are extremely important skills for novice nurses to develop.

Professional identity and self-concept

Novice nurses are desperate to fit in, to demonstrate their knowledge, and to be seen as a professional. They believe that professionalism is influenced by three themes: belonging [being a member of the team], knowing [ability to answer questions from patients and their families], and affirmation [feeling valued for what they do] (Kelly and Courts, 2007).

Nursing education is designed to prepare new graduates to provide holistic patient care through the acquisition of skills and knowledge. However, it is the apprenticeship element of clinical placements and nursing orientation/mentorship that can directly affect a novice's socialization, self-concept and professional

Download English Version:

<https://daneshyari.com/en/article/367380>

Download Persian Version:

<https://daneshyari.com/article/367380>

[Daneshyari.com](https://daneshyari.com)