



Original research

Educating new graduate nurses in their first year of practice: The perspective and experiences of the new graduate nurses and the director of nursing[☆]



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ABSTRACT

New graduate nurses are the future of nursing and the education they receive as they transition into the workforce as a newly registered nurse is critical for building a suitably qualified nursing workforce that will adequately serve the future population. Variation exists in education programmes for new graduate nurses in their first year of practice which is known to impact on transition experience.

A qualitative study using focus groups and semi-structured interviews was undertaken to explore the experiences and perceptions of New Graduate Nurses undertaking a new graduate programme and Directors of Nursing supporting them to complete the programme which may or may not have been inclusive of a postgraduate course (Masters Level). The findings of this study are in line with previous research and support the value of new graduate programmes but did reveal a lack of consensus in regards to the structure and content of such programmes. This study revealed some commonalities and challenges between the differing programmes but has identified the need for further research to establish the impact of postgraduate education in the first year of practice and how this impacts on nursing practice and patient care.

There are numerous terms in the literature with reference to new graduate programmes; transition to practice programme, nurse entry to practice programme, first year of clinical practice programme, new graduate programme and early career nursing programme. For the purpose of this article the term Nurse Entry to Practice (NETP) will be used in reference to any form of new graduate programme.

1. Introduction

The initial nursing experience of new graduates most often occurs in the context of the clinical setting and the experiences and performance of graduate nurses suggest that the educational preparation is as significant an influence on transition as the workplace environment (McDonald et al., 2009; Missen et al., 2014). New graduate programmes have long been recognised as a method of aiding and supporting this transition (Dyess and Sherman, 2009; Anderson et al., 2012; McDonald et al., 2009).

2. Background

The transition of new graduate nurses into the workforce is known to be challenging and has been extensively researched (Strauss, 2009; Mason, 2011). Missen et al. (2014) completed a systematic review investigating the impact of various new graduate training programmes and how these impacted on new graduates' confidence and transition

challenges. The key findings of this review indicated that effective transition programmes, irrespective of content and duration, resulted in increased confidence and lower attrition. While the design and implementation of programmes varied, all programmes consisted of two main elements, classroom teaching and preceptor support.

McDonald et al. (2009) gave some insight into the perceptions and experiences of new graduates undertaking PG study in their first year of practice; the findings were similar to those already identified in the literature around new graduates' transition to practice. These included challenges associated with time management, role adjustment and work/life balance, but overall respondents found it a positive experience and expressed the intent to continue postgraduate studies in the future.

The past five years have seen some new graduate programmes delivered in collaboration with a university, such as that described by (McKillop et al., 2014; Cadmus et al., 2014a). Nurses completing such programmes have been shown to be more likely to advocate for patients by questioning treatment decisions (Pelletier et al., 2003; Wildman

[☆] I can confirm that the work is original and has not previously been published elsewhere or in the process of being considered for publication in another journal.

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et al., 1999) and to demonstrate emerging leadership skills (Cadmus et al., 2014a, 2014b). Additionally, a postgraduate nursing qualification has been associated with fewer medication errors, more effective triaging of patients, and overall improved clinical outcomes (Aitken et al., 2003; Covell, 2009). Formal education, leading to postgraduate university qualifications, has been shown to support nurses' personal and professional development (Cooley, 2008; Covell, 2009) and is expected to enhance critical thinking and the implementation of evidence into practice (Cragg and Andrusyszyn, 2004; Pelletier et al., 1998, 2003).

New Zealand (NZ) adopted a National Nurse Entry to Practice (NETP) programme in 2006 which required District Health Boards (DHB) to support new graduates to practise safely, effectively and confidently as registered nurses, improve the quality of care through nursing skills development, and achieve improved recruitment and retention of new graduates (Ministry of Health, 2004). Thus all New Zealand nursing graduates entering the workforce employed through a DHB have to complete a Nurse Entry to Practice Programme (NETP), in their first year of clinical practice (FYCP), which meets the Ministry of Health (MOH) specifications (Health Workforce New Zealand, 2015). The specification describes the resources, processes and outcomes required for the NETP programme; inclusion of a postgraduate (PG) course being optional. Currently, 14 of the 20 DHBs incorporate a postgraduate course within their NETP programme which is delivered in partnership with an academic provider. It has been a decade since the introduction of NETP in New Zealand (NZ), and still the nursing workforce remains divided as to whether or not a postgraduate (Masters Level) course should be included within NETP. While there is little research on the inclusion of a postgraduate course in NETP, a recent NZ study (McKillop et al., 2016) explored the perceived impact of postgraduate university education for early career nurses in one regional health area of New Zealand. They reported that early career nurses and their preceptors, believed that a postgraduate course improved knowledge and skills of patient assessment, application of critical thinking in clinical practice, improvement in delivery of patient care and outcomes and that it had a positive impact on professional awareness and career planning. In the meantime the Nursing Council of New Zealand (2014) continues to report concerns regarding the recruitment and retention of nurses in New Zealand and the role NETP plays in this is unknown. Postgraduate education is expensive and given limited funding, it is essential that the evidence of impact on the nurses, patient and the wider organisation is sought, (Cooley, 2008; Covell, 2009; Health Workforce New Zealand, 2011).

The current study sought to contribute to the gap in the research on the impact of a postgraduate (Masters level) course in NETP by exploring the experiences and beliefs of nurses undertaking a NETP programme, which either included or did not include a postgraduate course, and the experiences and perceptions of their respective Directors of Nursing.

3. Methods

A qualitative, exploratory design, employing focus groups and individual interviews, was used to explore the experiences and perceptions of new graduate nurses completing NETP and Directors of Nursing supporting their new graduates to complete the programme. Ethics approval (UAHPEC 018036) was gained from the University of Auckland Human Participants Committee and approval to conduct the study given by the relevant District Health Boards' research committees.

Two focus groups each with 8 participants were conducted. Participants in focus group 1 (FG1) had completed a Masters level course within NETP while those in the second (FG2) had not. Semi-structured interviews were held with two Directors of Nursing, one from each site.

3.1. Focus groups

3.1.1. Recruitment

New graduate participants were recruited with the assistance of the new graduate coordinator at each hospital who forwarded an email to potential participants inviting them to contact the researcher if they were interested in the study. The first eight nurses to respond, at each site, were invited to participate. The researcher sent each the participant information sheet and a consent form to complete and return via email.

3.1.2. Process

The focus groups were facilitated by the researcher, on site at the hospitals, and commenced with the researcher reminding the participants of the purpose of the research and reminding them of their rights and obligations as participants. The researcher used open ended questions to facilitate and guide discussions around the strengths/weaknesses/benefits and challenges of NETP. Both discussions concluded after approximately an hour at which point participants were thanked and reminded of their agreement to maintain confidentiality.

3.2. Interviews

3.2.1. Recruitment

The Directors of Nursing at the two research sites received an email from the researcher inviting them to participate in a face to face interview asking them to respond by email if they were interested in participating. Both indicated interest in participating and were sent the participant information sheet and consent form to complete, sign and return via email.

3.2.2. Process

The researcher conducted semi-structured interviews which were held onsite at the hospitals on the same day as the nurses' focus groups. The interviews were of approximately 60 min duration and the researcher commenced the interview reminding the DON of the purpose of the research and then opening with a broad question asking the DON to talk of their experience supporting new graduates through NETP; at times guided discussion was used to ensure information gathered addressed the aims of the study.

On completion of the focus groups and interviews the audio recordings were sent to a professional transcription service that provided verbatim transcripts.

3.3. Data analysis

Following transcription of the focus group and interview recordings, the data were analysed thematically using a general inductive approach. This involved; familiarisation with transcripts, identifying text most relevant to the study's purpose, searching for similarities and patterns. Content of data directed how categories were constructed and the data assigned. Categories that represented similar meaning were assimilated into themes (Thomas, 2006). The data was independently coded by the researchers and then in consultation the categorised data and themes were confirmed.

4. Findings

Four themes emerged from the data; Support, Nursing Environment, Clinical Practice Development and Programme Workload. These were common to both New Graduate Nurses and Directors of Nursing.

4.1. Support

New graduates in both focus groups spoke about the supportive structure of NETP. They believed the programme which enabled them

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