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# Qualitative perspectives of new graduate nurses to educational preparation for patient care

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## Abstract

**Background:** A phenomenological qualitative study were conducted and investigated the perceptions of new Nursing graduates in relation to their educational preparation in caring for patients. Practice readiness and preparedness of new nurses continue to be a challenge in 21<sup>st</sup> century healthcare delivery system. To adapt to the rapidly varying and advancing healthcare settings; nurse educators must regularly assess and review education curricula, teaching-learning strategies and programs adopted to prepare new professional nurses. In Malaysia, Nursing Education Task Force was formed– Ministry of Higher Education (MOHE), 2010. 'Development of Nursing Education in Malaysia towards the year 2020'. The aim of this task force is to improve and transform Nursing Education in Malaysia from Diploma to degree programmes by the year 2020, to prepare New Nurses to practice in all priority areas of nursing care.

**Purpose:** To explore and describe the experiences of new graduate nurses working in hospitals and their perceptions in relation to educational preparation for patient care.

**Method:** Using a Phenomenological Qualitative study, This Study focused on the lived and expressed experiences of the participants. It involved the description and interpretation of human experiences so that the experience could be better understood.

**Results:** Seven Themes were extracted from the significant statements and formulated meanings of the ten respondents who voluntarily participated in this study. Orientation process, Value of preceptor, Solidifying concepts, Knowledge, Role transition, Doctors' behaviour towards new staff and Staff shortage were among the needs of the new graduate Nurses that needs to be addressed.

**Conclusion:** This study was able to provide insights into the lived experiences of ten new nurses and their perceptions in relation to educational preparations for patient care. Recommendations were also made to meet and support the new nurses' needs. These findings, which may have important implications for nursing practice, management, education and to nursing profession as a whole, need further study in a larger scale to explore more on the lived and expressed experiences of the new nurses and to strongly support this research study.

# Keywords: Caring; Educational; Nurses; Patients; Perspectives; Preparation; Qualitative

# INTRODUCTION

A Phenomenological qualitative study was conducted and investigated the perceptions of new nursing graduates with regards to their educational preparation in caring for patients. Caring in nursing requires preparation mentally, physically, and emotionally. The Covid-19 pandemic underscores the urgent need to prepare nurses emotionally, physically, mentally and competently to strengthen the global health workforce. A new report of the World's Nursing, provides an in-depth look at the largest component of the health workforce. Findings identify important gaps in the nursing workforce and priority areas for investment in nursing education, jobs, and leadership to strengthen nursing around the world and improve health for all (World Health Organization, 2020).

Nursing workforce shortage is evident. In Malaysia, according to healthcare authorities, more than 70% of Malaysian hospitals currently do not have adequate nursing staffs (Choi, Goh, Adam, & Tan, 2016). It is further stated that, there are some 80,000 nurses at hospitals and clinics nationwide, but only 80% of the jobs are filled. There are some 9,000 nurses graduating from nursing colleges nationwide and enter the workforce each year. But unfortunately, this number needs to increase by 30% in order to even begin addressing the nation's healthcare needs (Wakefield, Williams, & Le Menestrel, 2021).

According to World Health Organization (WHO), the ratio recommended for nurses to population ratio in a country such as Malaysia is 1:200. The shortage is fuelled by aging populations as their healthcare needs grow, as well as the many registered and experienced nurses that are approaching retirement age. Therefore, new graduate nurses are needed to fill the gaps and hospitals are forced to hire from the pool of new graduates into the nursing units (Nahasaram, Ramoo, & Lee, 2021).

However, there are issues that arise for the new graduate nurses in transitioning from nursing school. Findings from an integrative review revealed that graduate nurses experienced such problems as a shortage of resources, burnout syndrome, work overload and lack of support. Graduate nurses transition from an educational program into a practice setting has been widely recognized as a period of stress, role adjustment, and reality shock (Matlhaba, Pienaar, & Sehularo, 2019). It was determined that graduate nurses felt that they were thrown into the deep end and expected to swim graduate nurses displayed significant levels of stress and disappointment due to the high expectations placed on them (Labrague, McEnroe-Pettite, & Leocadio, 2019).

The work place environment expects the new graduate nurses to perform competently and efficiently in a short period of time. There has been extensive literature on new graduate transition

experiences in nursing, with re-occurring topics including: A phenomenological exploration of graduate nurse transition to professional practice within a transition to practice program (Ankers, Barton, & Parry, 2018). Stress, coping and psychological well-being among new graduate nurses in China (Qiao, Li, & Hu, 2011). The experiences of newly graduated nurses during their first year of practice in the Sultanate of Oman (Al Awaisi, Cooke, & Pryjmachuk, 2015).

Starting out: qualitative perspectives of new graduate nurses and nurse leaders on transition to practice (Regan, Wong, Laschinger, Cummings, Leiter, MacPhee, & Read, 2017; Duchscher, 2009). Transition shock the initial stage of role adaptation for newly graduated Registered Nurses," New Graduate Nurses' Clinical Competence, Clinical Stress, and Intention to Leave A Longitudinal Study (Cheng,Tsai, in Taiwan Chang, & Liou. 2014). Therefore, in order to meet the high quality of nursing care as well as meet the shortage of nurses whereby retaining nursing staffs, nursing and hospital educators need to address the new graduate nurses' needs and understand the appropriate tools, education and support to meet those needs. Theses study has the potential to benefit healthcare delivery system particularly in Malaysia.

# RESEARCH METHOD

Using a Phenomenological qualitative approach, the focused of this study was on the lived and expressed experiences of the participants. It involved the description and interpretation of human experiences so that the experience could be better understood. Phenomenological research seeks to describe experiences as they are lived, to capture the lived experiences of the study participants. Phenomenological research requires that the integrated whole be explored, therefore, it is suitable method for the investigations of phenomena important to nursing. This study looked at the new graduates' unique perspectives as they entered into the real world of nursing profession.

This research study used a small sample of 10 participants who were handpicked because of the important experience they have to tell. This study was directed towards a specific population. The

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participants areal females, aged 22 to 24 years old, newly graduate nurses, comprised of 3 cohorts from a private University college who are now working as staff nurses in private hospitals. These new nurses have been in practice for more than a year. According to Benner's Novice to Expert Theory, It takes at least a year for a nurse to transition to a competent provider of care.

Interview was conducted at five private Hospitals in different units i.e., Paediatric unit, General ward, Intensive Care Unit, Coronary Care Unit, Operation Theatre and Haemodialysis unit. And it lasted for 30 minutes. Research questions: as a new graduate, can you tell me about your perceptions in relation to your educational preparation for patient care and can you tell me your experience as a new graduate nurse working in this unit. Ethical consideration the study was approved by ethical committee and hospital management.

The list of participants was reviewed and identified. Each participant was informed via phone and email through the hospital webmail system. The email described the study and invited participant to participate. Contact information of the researchers were given for any participant's queries or questions. Participants were also informed on how the information will be coded to protect participants' confidentiality. Consent and demographic forms were attached to the email.

The participants were instructed to return the consent and demographic forms via email within a week of the date of the email. Upon receipt of the consent and demographic forms, an identification numbers were assigned to each participant. Subject demographics were entered into a computer file labelled only by identification numbers. Each participant was then contacted and an individual interview session and time was set up at a date and time of the participant's preference. The researchers then advised the participants that the interview will be tape recorded and that it would take approximately 30 minutes to an hour to complete. This study was conducted with an audio taped interview, using open-ended questions to capture the perceptions of the new graduate nurses with regards to their preparation to care for patients.

Study limitations, small group of new graduate nurses (n=10), aged 22 to 24 years, all females, from

five private hospitals in Malaysia were interviewed. Two respondents from each hospital, in different nursing units or areas have been in practice for a minimum of one year. Research implications in this study, the present result can provide concrete data/information regarding new nurse preparations in caring for patients and issues that arise with it. Nurse educators, hospital managers and policy makers can create an environment with a sense of belongingness and provide comprehensive trainings and orientations to newly employed graduate nurses. Recommendations provided by this study is to address unmet needs and issues faced by the new graduate nurses in relation to nursing care and to a profession as a whole.

Data analysis followed Colaizzi's approach. Transcriptions of all the interviews were red to develop a feeling for them and to make sense of them. The tape interviews were listened to, transcribed per verbatim and categorized according to several emerging themes. The purpose of this type of data analysis is to preserve the uniqueness of the participant's lived experiences while permitting an understanding of the phenomenon under investigation

## **RESEARCH RESULTS**

In this study, the researchers recruited 10 interviewees (N=10). All of the interviewees were females aged 22 to 24 years. All of the participants possessed a basic diploma in nursing gualification. Participants had been in service for 1 to 1.5 years (average =1 year). At the time of the study, all participants were working at Paediatric unit, General ward, Intensive care unit, Coronary care unit, Operation theatre and Haemodialysis unit.In analysing the perceptions and experiences of educational preparation for patient care of the new graduate nurses, researchers identified seven themes, namely Orientation process, Value of preceptor, Solidifying concepts, Knowledge, Role transition, Doctors behaviour towards new staff, and staff shortage. These themes described new graduate nurses' experiences from entering the workforce to perceiving a sense of preparedness, knowledge, proper trainings, belongingness and support system.

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Participants (With coded file no.)	Age (Years)	Gender	Completion of Studies	Education	Working Experience (Years)	Unit
SPNU1A	23	F	2013	University College (Diploma)	1.3	Operation Theatre
SPNU2A	22	F	2013	University College (Diploma)	1.3	Paediatric Unit
SPNU3B	23	F	2014	University College (Diploma)	1	Haemodia Iysis Unit
SPNU4B	24	F	2014	University College (Diploma)	1	Intensive Care Unit
SPNU5C	23	F	2013	Universitý College (Diploma)	1.5	Operation Theatre Unit
SPNU6C	23	F	2014	University College (Diploma)	1	Operation Theatre Unit
SPNU7D	24	F	2013	University College (Diploma)	1.5	Coronary Care Unit
SPNU9E	22	F	2014	University College (Diploma)	1	Haemodia Iysis Unit
NursW5C	24	F	2013	University College (Diploma)	1.5	General Ward
NursW8D	23	F	2014	University College (Diploma)	1	General Ward

### Table 1. Characteristics of Participants (N=10)

Exposure and orientation program to hospital departments help and was acceptable, but orientation in the unit especially in special area should be efficient and comprehensive. Respondents commented on how the orientation program was conducted in the hospital, and their views on its importance and benefits in coping or adjusting to new environment. Comments reflected the learning opportunities that can be offered by the hospital by having an efficient & comprehensive orientation program. Majority of the respondents (7 out of 10) commented that orientation program especially in the special nursing units need to be lengthened for them

to adjust to the new environment and allow for more exposures to learn new things.

SPNU1A: "When I start work here, orientasi given to all units, 2 week. They give orientation to all wards, other units, then tell us what the policy is that one is okay. But when we started work, like me they placed me in OT. There is orientation for a week but it is totally different environment. At first, kind I don't want to be in OT because it is totally new for me. Here you need to prepare yourself."SPNU7D: "One week hospital orientation - contact HR, CNO, everything. At the department a week after that, I

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continued to work. Orientation for new staff is really not short enough."

Preceptor is not guiding and supervising the new staff nurse at all. The new nurse needed to follow the senior staff to be guided and to learn. Some units or hospitals don't assign preceptor to new staff nurses. The new nurse feels that's the lacking part, because she needs to learn a lot about hospital. Most of the respondents commented on the importance of proper guidance, supervision, approachable behaviour and consistency of preceptor who should always be available for any clarification, comments and feedback.

NursW8D: "I do have a preceptor, but I don't work with my preceptor. My preceptor way is, she just let me be on my own, and then towards the afternoon, she will just ask me, dressing done? Glucometer done? All is done, done, done." I have to follow senior staff so I will be guided under her'. SPNU9E: "I don't have a preceptor. When we first start working, it is always when we are junior staff, we must have senior staff to guide us, right? But I don't have a preceptor, that's why I think that's what's lacking. Got to learn a lot about the hospital."

Was not able to solidify concepts from Nursing School and apply it into practice because the new nurse was assigned to special nursing unit. General Nursing and Special nursing unit is different. Training is needed for a new nurse to cope to the new task and environment (special nursing unit).

SPNU2A: "What we learn in college and what we learn here is very different. There are different procedures." SPNU3B: "The knowledge we get cannot be applied very much because we learn more on the ward. So, this is a new band."

Majority of respondents commented that they have the basic skills and knowledge in general nursing care. However, when they started working as a new staff nurse, they were assigned to an area in which most of the skills or procedures they are practicing is slightly different from what they have learnt, for example in OT, ICU, CCU etc. therefore, they experienced difficulties in adjusting to the new environment. The new nurse feels lacking in skill.

SPNU4B: "When students all I learn general knowledge in nursing, but not enough. In ICU, I need to know how to care for patients in critical condition." SPNU9E: "I think 3 years is enough to prepare for

work at the hospital. But you have to spend time studying in the skill lab. Theory is enough for students I think, I also lack skills." SPNU2A: "We have to know the procedure first - look back - NCP we have to prepare. Although we learn the theories, the basic knowledge but just enough.' We don't expose much in this area."

Majority of the respondents commented on how fearful and difficult it is to adjust from a student to a staff nurse. They commented that, as students, they were guided and supervised properly and they don't need to worry much. However, becoming a staff nurse is difficult because they are now responsible for their own actions and must learn independently. Participants has difficulty in adjusting to a new role from student Nurse to staff Nurse. Senior staff support and guidance is needed to enhance confidence and adjust easily to a new role.

SPNU1A: "It took months for me to adopt. As a staff, you need to prepare yourself. It was totally different. It needs more confidence. It takes time but then I still manage." SPNU2A: "When we are students, we just follow staff nurse orders. Prepare equipment, prepare for procedure. When you become staff, it's different. Need to do my own. Until now, I'm still adjusting." NURSW8D: "Compared to when I was a student, we have mentors to assist us. Whatever we carried out mentor always help and back-up us, there's nothing much to worry. When I became a staff nurse, the responsibility was on me. So, only then I realized being a staff nurse is really, really tough job."

Respondents commented that: some doctors especially senior doctors are very choosy and refused new nurses to go along with them during patients' rounds. Some doctors are not friendly, cranky, easily irritated and don't even entertain questions by the new nurses. SPNU3B: "Some doctors expect us to know a lot already and some Dr. Easy advance. They don't trust me because I'm a new employee, he's not confident. So, I'm afraid too. I learned by myself, I asked the senior staff." SPNU4B: "Some Doctors are choosy if you are new. Some always easily shout at us. But there are few doctors who are very nice, very kind and tell me to always ask questions. NURSW8D: "I think we really have trouble with the doctor. There are doctors who are cranky and a little aggressive."

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Majority of the respondents commented that understaffing in their unit caused more workload and prompted them to always go on double shift, on-call. These phenomena made them so stressful and tired.SPNU9E: "Not enough staff. Too much work but not enough staff. That's a little boring. For sure we don't have enough staff to double shift always, that's stress." SPNU6C: "we always double shift, on-call is always like that. Because we don't have enough staff."

## DISCUSSION

In this study, the researchers explored experiences related to educational preparation of new graduate nurses, and understand the emotional and behavioural changes that they went through during their adjustment period in the work place environment. A healthy work environment fosters a climate in which nurses are challenged to use their expertise, skills and clinical knowledge. However, Graduate nurses' preparedness has been an area of debate and challenges in nursing education from clinical practice to higher educational institutions (AlMekkawi, & El Khalil, 2020). The primary goal of nursing education remains the same for centuries. To provide guality education and prepare new graduate nurses to meet diverse patients' needs, function as develop personal and professional leaders. characteristics and incorporating advance science as evidence-based practice to benefit patients with the capacity of nursing professionals to deliver safe and quality patient care.

At the same time, nursing education and hospital working environment needs to be transformed in a variety of ways to prepare new graduate nurses to work collaboratively, efficiently and effectively with other healthcare professionals in a complex and evolving health system in 21st century. Newly graduate nurses need to familiarize with the hospital system, policies and procedures in order to fully understand and effectively execute their responsibilities. To meet this needs, proper and comprehensive orientation program and preceptorship should be implemented. Nursing orientation plays a pivotal role in the competency and retention of newly hired registered nurses. Effective orientation and precepting programs produce nurses who provide competent, quality patient care and are enculturated as productive members of the healthcare team (Squillaci, 2015).

Healthcare teams such as, doctors, senior staff nurses, other healthcare professionals and hospital management should understand and meet the needs of graduate nurses to be able to transition smoothly from their academic preparation to a range of practice environments. A positive workplace environment facilitates more effective transition of graduate nurses and significantly influences their competency, self-esteem, knowledge, and job satisfaction. However, a negative experience has been found to result in feelings of heightened work stress, low-self-esteem with contributory factors including poor work environments, poor clinical preceptors and poor nurse-doctor relations (Hussein, Everett, Ramjan, & Salamonson, 2017). Clinical preceptors, who oversee new graduate nurses, play a crucial role in creating a sense of belonging.

Experienced clinical preceptors should help new graduate nurses integrate into their new environment and relieve their stress (Hunter, & Cook, 2018). A sense of belonging is a need for interpersonal connections or relations; it is a crucial factor that decides whether new graduate nurses can adapt to group working life in a clinical setting. New graduate nurses needed to be acknowledged, guided and accepted to have the sense of belongingness, trainings and advanced practice programs to prepare them to assume their roles in acute care, long-term care, other settings as well as specialty practice areas (McKenna, & Newton, 2008). To be competent, they needed support and acceptance in clinical areas to learn more effectively which is detrimental to knowledge, skills and performance enhancement. Educational support, welcoming atmosphere help novice nurses to have a supportive workplace, ease their anxiety, frustration and improve their performance (Najafi, & Nasiri, 2023).

Stress and anxiety brought about by shortage of staffs were also emphasized by the respondents. Nursing shortages are likely to escalate and the challenges experienced by new nurses transitioning into the workforce may persist, and possibly worsen if not addressed (Hallaran, Edge, Almost, & Tregunno, 2023). Nurses leaving their jobs and the profession are an issue of international concern, with supply-demand gaps for nurses reported to be

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widening. WHO reported that there is a global shortage of health workers, in particular nurses and midwives, who represent more than 50% of the current shortage in health workers? The largest needs-based shortages of nurses and midwives are in South East Asia, Malaysia included and Africa. According to the Malaysian Ministry of Health, the country will experience a significant shortage of nurses in the future years.

Malaysia had just 113,787 registered nurses in 2021, resulting in a nurse-to-population ratio of 1:454, and this falls short of the 1:200 nurse-topopulation ratio the World Health Organization suggested. Policy makers, nursing educators and institutions of higher learning should come up with strategies on how to combat nursing shortage (Marć, Bartosiewicz, Burzyńska, Chmiel, & Januszewicz, 2019). There are six proven strategies to increase nurse retention and survive the nursing shortage phenomenon. These strategies include, listening to nurses' concerns, prioritizing workplace culture, adjusting protocols to meet nurses' needs, increasing diversity and representation in nursing, addressing the needs for more nurse educators and supporting nurses leading healthcare innovators.

## CONCLUSION

The findings provide insights into the lived experiences of ten new nurses and their perceptions in relation to educational preparations for patient care. Recommendations were also made to meet and support the new nurses' needs. The transition into practice for new health practitioners has been described as complex and a period of great stress. Increasing clinical and practical experiences during education are required to support new health professionals in the process of closing the gap between learning and practice. Continued professional development activities should be readily available and attendance of these encouraged.

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