

Doctorate Studies

A comprehensive literature review of guidelines facilitating transition of newly graduated nurses to professional nurses



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ABSTRACT

Literature shows that successful transition of newly graduate nurses to professional nurses is imperative but does not always take place, resulting in difficulty in performance, cognizance or behaviour of a role as a nurse, affecting the quality of patient care negatively. No integrative literature review could be found to summarize available guidelines facilitating transition of final year nursing students to professional nurses. An extensive search of the literature by means of an integrative literature review was conducted in 2014 and updated in June 2017, following a five-step process. All relevant studies were subsequently appraised for rigour and quality using the AGREE II tool by two independent reviewers. Eight (n = 8) guidelines on transitions were independently extracted. After thematic analysis was done, three factors to facilitate transition of final year nursing students to professional nurses were found: 1) support for new graduates, 2) the graduate's need for socialization and belonging, and 3) a positive clinical learning environment. The availability and implementation of guidelines on transition of final year nursing students by educational institutions and healthcare facilities could ease the transition from being final year nursing students to becoming professional nurses as well as improve retention of newly qualified professional nurses.

1. Introduction and background

According to [Duchscher \(2012\)](#), transition usually begins with events that create instability and make change necessary. Graduating as a nurse to becoming a professional nurse is one such event, which can be referred to as situational transition. The author suggests that, in the event that successful transition does not take place, this may lead to difficulty in performance, cognizance or behaviour of a role.

The [Nurses Association of New Brunswick \(NANB\) \(2012\)](#) suggest that nursing graduates enter the profession without a transition phase, finding that newly qualified professional nurses needed support to effectively integrate and safely transfer the competencies they have acquired. The Association emphasizes that professional nurses should mentor, encourage and support new graduates. The role of the mentor or preceptor as a form of support is essential, as they guide students in their clinical learning process and professional growth to be able to independent practitioners ([Kaihlanen et al., 2013](#)). The assistance of a mentor or preceptor is further required in order to enable the newly graduate's confidence as an independent professional, improve skills, values and behaviours essential for good quality nursing care and to remain on their journey of lifelong learning ([National Health Service](#)

[Foundation Trust, 2017](#)). Other benefits for the final year students and new graduates are enhanced confidence, socialization, and future career desires, increased commitment to the organisation, as well as a greater feeling of responsibility. Benefits for mentors/preceptors include developing of assessment, supervision, mentorship and supportive skills, stimulating feelings of adding value to the organisation and supporting their own lifelong learning and future career ambitions, as well as an enhanced commitment to the profession. Benefits to the organisation at large are an enhanced staff satisfaction as well as an enhanced recruitment and retention of staff, a reduced sickness and absence of staff, which results in an increased quality of care provided by students and nursing staff as well as an enhanced service user experience with less complains. Further, through mentorship and preceptorship, individuals can be identified who require extra support ([National Health Service Foundation Trust, 2013](#)).

Apart from the support of a mentor or preceptor, students should feel that they are part of the nursing team ([Gregg et al., 2013](#)). For students to socialize in and belong to the world of nursing, they need to feel accepted and approved of by staff members ([Thomas et al., 2012](#)). Most of all, students need to feel they are part of the team rather than feeling isolated ([Doody et al., 2012](#)). In a study conducted by [Rush et al.](#)

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(2013), the new graduates remarked on the issue of feeling left out and indicated that they often felt secluded in their unit, without support. A strong subjective feedback from new graduates revealed a lack of acceptance, respect and an insensitivity from experienced nurses to the new graduates' needs.

A positive clinical environment or a “healthy” workplace environment with adequate support and emphasis on belonging is a significant factor affecting a new graduate's transition. These environments reduce transition shock, promote transition and enhance retention of qualified nurses (Rush et al., 2013). Understanding the needs for this positive environment may assist to put strategies in place to facilitate the process of transition of final year students into professional nurses (Houghton, 2014).

Currently the military health academic system where the last author is employed has limited, if any, support to facilitate the transition of final year nursing students to newly qualified professional nurses, leading to role confusion and frustration of students and nurses. Although guidelines are developed regarding the transition of final year nursing students to newly qualified professional nurses, no systematic or integrative literature was found that selects, appraises and summarized these guidelines. The aim of this research was therefore to explore and describe the available practice guidelines with regard to the transition of final year nursing students into the role of professional nurses.

2. Research design and methods

An integrative literature review was conducted following a five-step process adopted from Russel (2005): Step 1: Formulation of the review question; Step 2: Literature-searching process; Step 3: Critical appraisal; Step 4: Data extraction process; and Step 5: Data analysis process.

2.1. Formulation of the review question

The review question was formulated as follows: What are the best available guidelines to develop a best practice guideline for the transition of final year nursing students to professional nurses? This study was part of a larger doctoral study (ethics number: H14-HEA-NUR-xxx) that formulated a best practice guideline for transition of nursing students to professional nurses for the context of the military nursing using multiple methods, including qualitative interviews with students and nurse educators, an integrative literature review and the development and review of the best practice guideline. A full dataset and the search strategies used are available from the last author. Consent was not obtained, since this study had no participants.

2.2. Literature-searching process

The literature-searching process (Step 2), was conducted by third and fourth authors under the supervision of the first and second authors who are experienced in systematic and integrative reviews. The researcher also employed the assistance of an experienced librarian in selecting the databases and keywords.

2.2.1. Sources of literature

Databases specializing in best practice guidelines (BPGs) were thoroughly searched and the following search engines were accessed and utilized: CINAHL, Ebscohost, A-Z, Pubmed and Science Direct. A manual search for BPGs was performed using Google Scholar and Google. Articles found in databases and grey literature such as unpublished theses and dissertations responding to the transition of student nurses to professional nurses were also considered.

2.2.2. Key words

With the assistance of an experienced librarian, the combination of key words “transition*” AND “guideline*” AND “student nurs*” OR

“professional nurs*” OR “health*” were used. The combination of keywords were adapted per database, if necessary, to suit the database.

2.2.3. Inclusion and exclusion criteria

BPGs based on systematic reviews which are considered the highest in the hierarchy of evidence (LoBiondo-Wood & Haber, 2010) and BPGs focusing on guidelines on the transition were included in the study. Studies published in English were used as the researcher did not have the capability of reviewing documents in other languages due to translation costs. Literature published between 2008 and 2017 was included as the researcher needed to concentrate on the most recent literature. Literature on transitions relating to other than healthcare professionals was excluded.

2.2.4. Search and selection process

The search was conducted in 2014 and updated in June 2017. All guidelines that fitted the criteria for the study were retrieved and selected based on their relevance to the topic. Guidelines that did not meet the required criteria were excluded. The inclusion and exclusion criteria were applied by both the researcher and the independent reviewer. Consensus regarding the inclusion and exclusion of relevant articles was reached between the fourth author and the third author who served as an independent reviewer. The search and selection process of the included studies is illustrated in Fig. 1.

Fig. 1 shows that 25 guidelines were found in the literature. Eight (n = 8) guidelines were excluded based on the criteria and 17 guidelines were included for critical appraisal.

2.3. Critical appraisal

The AGREE II instrument was utilized to critically appraise the best practice guidelines found (Step 3). The AGREE II consists of 23 items organized within six domains, followed by two global rating items for an overall assessment. Each domain captures a specific aspect of guideline quality. All AGREE II items were rated on a seven-point scale (1- strongly disagree, when no relevant information was given to 7- strongly agree, when the quality of reporting was exceptional and the criterion was fully met) (Brouwers, 2013). The score was assigned depending on the completeness and quality of reporting. Guidelines with a score of 60 per cent were included as they were considered to have more rigor, and to contribute more weight to the discussion and recommendations derived from the review than did guidelines with a lower score. Consensus following conscious deliberation was then reached between the two reviewers being the fourth author as the primary reviewer and third author as the independent reviewer

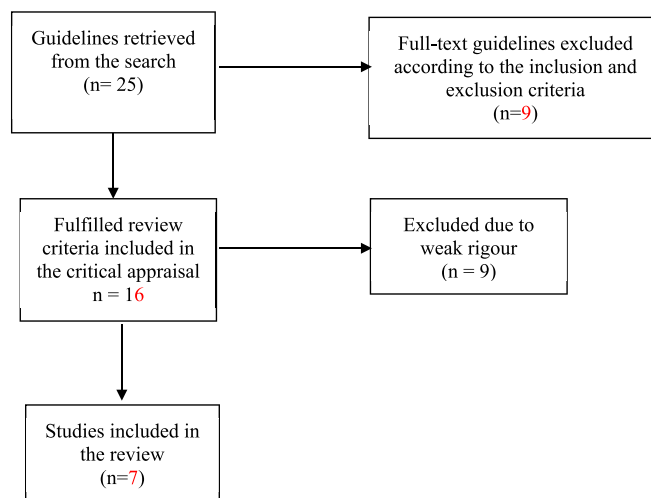


Fig. 1. PRISMA flowchart detailing the search and selection through the review.

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