Transition from Student to Professional: Induction and Professional Development Support of Newly Qualified Professional Nurses

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Disclosure

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Background

• There is poor retention of graduates by the Public Health Sector in all health disciplines in South Africa (SA). Compulsory remunerated community service was introduced to form the first formal work experience for the newly qualified health professionals, including nurses.

• The compulsory community service is served for a period of one year in public healthcare institutions, before the graduate can obtain final registration with the respective health professions council, like the South African Nursing Council (SANC) for nurses and midwives.
Aim

• To share with the audience the findings upon exploring the induction and professional development support given to newly qualified professional nurses during compulsory community service in the public healthcare institutions of SA; as well as to highlight the importance of a smooth transition from student to professional nurse.
Objectives

• Describe the induction and professional development support given to newly qualified professional nurses during the compulsory community service in South Africa.

• Describe the ideal but practical induction and professional development support recommended by operational nurse managers to enhance the role transition of newly qualified professional nurses.
Methodology

- Mixed methods research
  - Qualitative phase
    - Focus groups with operational nurse managers
    - Interviews with coordinators of community service for nurses
  - Quantitative phase
    - survey – newly qualified professional nurses
  - Documents
    - Induction / orientation programs from healthcare institutions
Sampling - focus groups

- nonprobability,
- purposive,
- criterion based and
- homogenous.
Data collection

- Focus groups – 12 groups of 6-8 operational nurse managers from four provinces in South Africa

What are your experiences of the induction and professional development support given to the newly qualified professional nurses during community service?

According to you, what is the required induction and professional development support for these nurses during community service to enhance their competence and retention?
Data analysis

- Coding method: Stevick-Colaizzi-Keen as modified by Creswell (1994)

Themes

✓ Operational nurse managers’ support of the newly qualified professional nurses in terms of induction and professional development

✓ Challenges in relation to induction and professional development support of the newly qualified professional nurses
Experiences of the operational nurse managers regarding the induction and professional development support given to the newly qualified professional nurses

The operational nurse managers described their experiences in giving the induction and professional development support to the newly qualified professional nurses as described in the codes and participant quotations.
“...we have an induction, which is basically done by the staff development department upon arrival, for the duration of one week, then the new nurses come to the wards where we start with the orientation. In that week the newly qualified are familiarised with the activities done in the institution. Say for example, general health policies, the leave aspects and other Human Resource related matters. Actually different departments come to present at the induction. Like the newly appointees will meet with quality assurance, infection control coordinators and so forth. Then in the wards we do the basic orientation as already explained by the others.”
Standardized orientation programs

• F7/P1
  “We do have a standardised orientation program for all the clinics compiled by the previous operational nurse managers of all the clinics.”

• F7/P2
  “orientation is usually three months per area unless if there are problems where we have a crisis and need a person to remain longer or to be moved earlier according to the service needs. But we don’t move a person before mustering an area and we don’t move a person to a new area with a crisis because he or she will just add a number but not being functional as they still need to be taken through that area of work.”
In-service training and short clinical courses

• F6/P3

“We also have in-service training programs and short clinical courses that they attend that is over and above the orientation.”
Informal Mentorship and Team allocation

• “It is not a formal program but the newly qualified professional nurse is linked to a specific senior professional nurse in a team, because they work the shifts together. The operational nurse manager cannot oversee what happens after four, at night or during weekends.”
Time frame - mentorship

• F1/P2

“The newly qualified professional nurses are allocated to the ward for three months, then, they rotate. The mentorship is on a monthly rotation. The experienced professional nurses get a new mentee monthly, so that the NQPNs can get an opportunity of learning from all of us in the ward during the three months.”
Leadership skills development

• F1/P3

“They also rotate weekly on being a coordinator. We call them junior coordinators. They are mentored on ward leadership, problem solving, being in charge of the ward and so forth. I show the leader for the week what do we do when this happens, how do we do this, how do we write the different reports and stats required from the ward daily and monthly. When we are having a bereaved family, how do we handle them and what is the procedure to follow in helping them. I work with her for the week as the operational nurse manager, teaching her how to be a manager for that time. I allow her to do some of the things and I supervise her. That’s what entails being a junior coordinator for the week.”
On the spot teaching / teachable moments

- F3/P4
  “…when the newly qualified professional nurse comes to you, you give her the ward specifics. Every teachable moment we try to use it to guide the new nurse. For instance the ordering of drugs, it’s like an in-service every day.”

- F5/P2
  “…also use teachable moments because there is limited time between patient care and teaching. You check if they can catch up with what is happening at the clinic, like in the area where they are giving immunizations, I must see to it that she is following, she must not just be there as an observer, she must take part so that she can be able to work alone later.”
Professional socialization

• F3/R5
  “We teach them about etiquette as well, how to behave in this profession, because they are still neophytes, professional socialization, you see.”

• F7/P1
  “We also orientate them about the core values of the organization and professionalism. This is to say what is expected from them and how they must conduct themselves during the execution of their duties, what to do in a work place.”
Problems experienced

Experienced P/Ns
• Reluctance of experienced professional nurses to do mentorship as it is informal
• Prioritizing patient care over mentorship

Newly qualified P/Ns
• Getting “eyes to look not hands to work”
• Hiding behind others
• Have more theory and less clinical skills
The ideal but practical induction and professional development support that can be given to the newly qualified P/Ns

- The operational nurse managers described the ideal induction and professional development support that can be given to the newly qualified professional nurses during community service to ease their role transition from student nurse to professional nurse. This is also the induction and professional development support required to enhance the clinical competence of the newly qualified professional nurses. The practicality of the support was also looked at to ensure that it can be achieved.
Findings

- Participating operational nurse managers agreed unanimously that they should create supportive practice environments that facilitate newly qualified professional nurses’ integration into the healthcare institutions to ensure a smooth transition from student to professional.
Recommendations to achieve the ideal induction and professional development support

- Improve the orientation content
- Increase supervision and guidance
- Formalization of the mentorship
- Role modeling of professional behavior
- Comprehensive clinical allocation
- Re-introduction of clinical teaching departments (CTDs) in healthcare institutions
Conclusion

• A formal structured induction and professional development support for newly qualified professional nurses can be a positive professional socialization experience that can lead to confident, competent, independent as well as safe nurse practitioners. It might even reduce the high attrition rate of newly qualified professional nurses that is facing communities globally.
Thank you