



A study to assess the transitional shock among newly qualified staff nurses at selected hospitals in Mangalore, Karnataka, India

Mrs. Lolita S.M.D'Souza

Professor, S.C.S College of Nursing Sciences, Mangalore

Mrs. Joicy John

Lecturer, S.C.S College of Nursing Sciences, Mangalore

Ms. Prabha Anand

Assistant Lecturer, S.C.S College of Nursing Sciences, Mangalore

ABSTRACT

Newly qualified nurses feel inadequately prepared for their role. Transition period remains very stressful. This may affect the quality of patient care. The objectives of the study were to assess the transitional shock among newly qualified staff nurses and to find the association between transitional shock and selected demographic variables. A descriptive research design was used for the study. Purposive sampling technique was used. Rating scale was used to assess the transitional shock. The results show that 5% of the newly qualified staff nurses didn't experience transitional shock, 93% experienced mild transitional shock, 2% had moderate shock, and none of them had severe transitional shock. There was no association found between transitional shock and selected demographic variables. Feeling unprepared for the role can cause stress. So, supportive measures are needed to reduce stress during the transition period.

KEYWORDS : Transitional shock, newly qualified staff nurses.

Introduction

The transition from student to registered nurse has been discussed and debated over the years and is seen as complex and multidimensional (Delaney, 2003). This period of transition can be both challenging and exciting. Many factors need to be considered when examining the transition period, such as the stressful nature of the process, feelings of preparedness, confidence in clinical skills, decision making, and the need for support and socialization into the role¹.

Although the phenomenon of reality shock has been acknowledged as part of the new graduate nurse transition for decades, there is evidence to suggest that the problems with the transition into practice are more serious today².

Judy Duchscher elaborated on the concept of new graduate nurse shock by describing the transition process as a nonlinear "Process of Becoming" a nurse. This process has three stages: doing, being, and knowing. Graduate nurses' transition begins with the "doing" stage and orientation to the role. In this stage, graduate nurses can experience a wide range of emotions, including an initial elation over passing the licensure exam and acquiring a staff position, as well as an unexpected grief due to losses associated with changes, such as loss of contact with school friends, as well as familiar routines, and faculty support. Discovering the new practice environment as well as nursing culture to be different from what was experienced at school results in "transition shock," prompting graduate nurses to learn new skills and engage in behavior adaptation by "acting like a nurse," focusing upon nursing skill acquisition, such as successful task performance and time management³. The key to the development of a new employee is the relationship, skill, and support provided by the preceptor⁴. Having a recognized preceptorship programme in place would foster a supportive work environment for newly graduated nurse which influence their satisfaction, retention and improve patient care.¹

Objectives

1. To assess the transitional shock among newly qualified nurses.
2. To associate transitional shock with selected demographic variables.

Methodology

Descriptive research design was adopted for the study. The study was conducted in selected hospitals in Mangalore. 100 newly qualified staff nurses (less than one year experience) were selected by non probability purposive sampling. The tool consists of two parts. Part 1: Demographic data and Part 2: Rating scale to assess the transitional shock. Data was collected during a period of 6 months after obtaining the permission from the concerned authority and consent from the participants was also obtained. The data obtained from the study was

analyzed by both descriptive and inferential statistics.

Results:

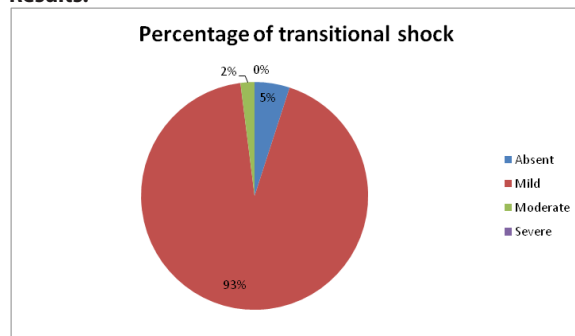


Figure (1): Assessment of Transitional shock

In order to find out the level transitional shock among newly qualified staff nurses, a five-point rating scale was used. Categorization of the transitional shock on the basis of the score was done as follows: 5% of the newly qualified staff nurses didn't experience transitional shock, 93% of the staff nurse's experienced mild transitional shock, 2% had moderate shock, and none of them had severe transitional shock.

Table (1): Over all mean, standard and percentage of transitional shock among newly qualified staff nurses.

Transitional shock	Maximum Possible Score	Mean	SD	Median	Mean%
	108	86.13	9.01363	87	79.75%

The overall mean and standard of transitional shock among newly qualified staff nurses was 86.13 ± 9.01363 . Chi-square test was used to find the association and it was tested at $p < 0.05$. There was no association found between transitional shock and selected demographic variables such as age, gender, monthly income, religion, educational qualifications, type of institution graduated from, internship experience apart from the course, work experience and area of work.

Discussion:

The most stressful issues appear to be the increased responsibility and accountability that the nurses face; fear of failure; unrealistic expectations from other staff; and nurses' own perceptions of their lack of clinical skills.

Percentage distribution of demographic variables among newly qualified staff nurses shows that 75% of staff nurses were in the age

group of 22-24years, 85% of the staff were females, 48% of them had a monthly income of Rs 5000-7000, 43% were Christians, 47% were with BSc Nursing qualification, 67% had their education in a private institution, 53% did not have internship experience apart from the course, 46% had 5-9 months of experience, 42% were working in medical surgical wards. Analysis of transitional shock among newly qualified staff nurses revealed that, 93% of them experienced mild transitional shock. There was no association found between transitional shock and selected demographic variables.

New nurses often identify their initial professional adjustment in terms of the feelings of anxiety, insecurity, inadequacy and instability it produces. Transition shock is an enormous frustration inherent in being unable to practice as fully functioning professionals within the hospital system that is underlying the current job dissatisfaction of nurse graduate and driving these energetic and motivated young nurses out of acute care and out of the nursing profession altogether. This study has demonstrated that there is a need for support during the transition phase from student to newly qualified staff nurse.

Conclusions:

It is clear that many nurse graduates experience albeit at varying intensities, role performance stress, moral distress, discouragement and disillusionment during the initial months of their introduction to professional nursing practice. Therefore connections need to be drawn between the challenges faced by the new nurse graduates practicing in hospitals and the broader professional issues being cultivated within the current context of nursing practice. A support system has to be provided by the hospital to facilitate the nurse graduate transition.

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