placements as part of the training curricu-

lum, it was only when working as a quali-

fied nurse that the realities of what was 

required became apparent. Mooney (2007) 
suggested these negative experiences had a 

profound influence on whether newly qual-

ified nurses remained in the profession. 

A major cause of anxiety during the tran-

sition was drug administration (Maben and 

McLeod Clark, 1998). Before qualifying, stu-

dent nurses had carried this procedure out 

only under rigorous supervision but were 

expected to practise unsupervised fol-

lowing qualification. These concerns sug-

gest this area of practice is not adequately 

directed during the education and prepa-

ration of nurses (Mooney, 2007; Ross and 

Clifford, 2002; Whitehead, 2001). 

Jasper (1996) suggested that, despite an 
obvious lack of support, newly qualified 
nurses learnt to cope with the change in 

status from supernumerary student to indepen-
dent practitioner as an aspect of their new role, which resulted in their con-

fidence levels increasing. 

**Support**

The environment where newly qualified 
nurses first work is crucial to a smooth 
transition. The majority of newly qualified 
nurses experienced a lack of support (Mooney, 2007; Whitehead, 2001).

A period of preceptorship has been rec-

ommended during the transition (NMC 

2006), although evidence suggests prac-
tice is variable. 

Whitehead (2001) found staff shortages 

were a major contributor to the lack of sup-

port given to newly qualified nurses once 

in post, rather than unwillingness from 
established members of staff. This should 

be a concern for ward managers who 
decide what constitutes adequate staffing 
levels, as this will directly affect the policy 
of a mandatory preceptorship programme. 

Ross and Clifford (2002) and Baillie (1999) 

identified that, due to pressures of a busy 
ward environment, soon-to-be qualified 

students said they were treated as part of 
the workforce and their learning needs were 

not a priority. These negative experiences 
exacerbated their feelings of stress and 

affected their perceptions of qualification. 

This was reflected in studies by Mooney 

(2007) and Maben and McLeod Clark (1998), 

which said preceptorships were beneficial 

because they eased transition. These find-

ings are consistent with international lit-

erature (Morrow, 2009; Pellico et al, 2009; 

Kelly and Ahern, 2008).

The challenge is how to improve these 
circumstances for future newly qualified 
nurses. Whitehead (2009) recommended 

that a clinical supervisor should be avail-
able full time to support and give guidance 

to newly qualified nurses while on shift. 

This could alleviate much of the anxiety 

felt by these nurses as they could seek 

advice at any time without putting extra 

pressure on other staff. 

**Coping strategies**

As a direct result of not feeling adequately 
supported, some newly qualified nurses 

learnt to cope with being “thrown in at the 
depth end”; this in itself was often a signifi-
Table 1 Summary of research papers

<table>
<thead>
<tr>
<th>Analysis</th>
<th>Findings</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analysis of interview verbatim and questionnaires</td>
<td>Anxieties and stress related to management identified</td>
<td>Small groups, not representative</td>
</tr>
<tr>
<td>Comparative data analysis</td>
<td>Stressful aspects, individual accountability, managerial responsibilities, clinical skills, communication problems, preregistration education</td>
<td>Original study; small sample size, not representative Present study; slightly larger scale, still not representative</td>
</tr>
<tr>
<td>Verbatim transcribed and coded into themes</td>
<td>Coming out of school, living in the real world, effect of the label, learning to cope, us and them</td>
<td>Small sample size. Previous experience of interviewer may have influenced the questions used</td>
</tr>
<tr>
<td>Taped interviews, transcribed using codes</td>
<td>Emotional highs and lows, stigma and negative staff attitudes, resistance to change, responsibilities and support issues, skills deficit</td>
<td>Small-scale study, not representative</td>
</tr>
<tr>
<td>Taped verbatim, coded to generate theory of experiences</td>
<td>Unexpected reality: consisting of great expectations, no time for nursing, and facing the trepidations Relatively small sample size, use of two cohorts allows more comprehensive analysis. Limited time frame</td>
<td></td>
</tr>
<tr>
<td>Generated both qualitative and quantitative data, focus on qualitative used to identify categories</td>
<td>Transition period remains stressful, suggestions by participants given to improve the transition Weak sampling method used, small scale, not representative</td>
<td></td>
</tr>
<tr>
<td>Taped interviews, transcribed, verbatim coded</td>
<td>Uncertainty, responsibility and accountability, support, preparation Small-scale study, weak sampling method, not representative</td>
<td></td>
</tr>
</tbody>
</table>

Small-scale research has limitations so we were cautious when attempting to generalise, but the themes from the literature of approximately 200 participants suggested common experiences shared by newly qualified nurses. These findings should be considered by nurse educationalists preparing students for registration. More importantly, the findings should be taken into account by those employing newly qualified nurses when designing preceptorship programmes to support their transition from student to staff nurse.

Ross and Clifford (2002) found participants suggested specific changes to the way clinical placements were selected during nurse training that could potentially be useful to nurse educationalists. They suggest allowing students to choose their final placement area would have been particularly beneficial, especially if it was an area in which they wanted to work once qualified. Adopting this system could better prepare them for the role and identify their learning needs before the final transition to becoming newly qualified nurses.

Introducing a mandatory preceptorship programme would assist with a smoother transition and we recommend this long-awaited modification, after which further research is essential to assess its effectiveness.

References


Corbett E (2011) Response to Your Query: Ref: DE2000005870 – Funding for the Preceptorship of Newly Qualified Nurses. Email from DHMail@dh.gsi.gov.uk to Bill Whitehead, 23 November 2011.


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However, it could be argued that they were able to survive the transition through their own strength of character, not necessarily because of appropriate preparation.

Conclusion

The literature described several common themes suggesting newly qualified nurses did not feel adequately prepared for their roles in practice.