EXPERIENCES OF NEW GRADUATE NURSES DURING COVID-19: A Qualitative Study

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INTRODUCTION

- COVID-19 has affected millions of people globally
- Nurses have been left exhausted physically, mentally, and emotionally
  - Previous pandemics and epidemics have indicated a need for psychological support for nurses
- New graduate nurses (NGNs) are an especially vulnerable group
  - "Reality shock" upon entering their first job
  - Higher risk for emotional exhaustion and burnout
What is the lived experience of new graduate bedside nurses who were employed to practice on medical-surgical, telemetry, or step-down units during the COVID-19 pandemic?

Study Aim:

The study aimed to gain understanding of ways to enhance support for NGNs
THEORETICAL FRAMEWORK:
Benner’s From Novice to Expert Model

- 5 stages of competency
  - Novice
  - Advanced beginner
  - Competent
  - Proficient
  - Expert

- NGNs are considered advanced beginners
  - Lacking “aspect recognition”
  - Not yet able to consider the patient as a whole

- NGNs need adequate guidance and support from experienced RNs

(Benner, 2004)
Nurses with less than 2 years of experience accounted for 47.5% of all nurse turnovers in 2019

NGNs reported lowest level of comfort and confidence at the 6 to 12 month period

- Descriptive comparative study that utilized the Casey-Fink Graduate Nurse Experience Survey (n=270)
- Feeling inadequate and incompetent, anxious about making patient care decisions

Many organizations have established new graduate residency programs

- Promote NGN growth and confidence → improve new nurse satisfaction and retention

(NSI Nursing Solutions, 2020; Casey et al., 2004; Urban & Barnes, 2020)
LITERATURE REVIEW:

Nurse Experience During COVID-19 and Previous Pandemics

• Fear and apprehension
• Frustration and anger due to lack of preparedness for a pandemic

Nurses reported coming out of the experience stronger than before

• “like soldiers united to defeat an enemy” (Bahramnezhad & Asgari, 2020, p. 5)

Long-term psychological effects

• Study that surveyed healthcare workers (n=769) in Toronto who provided care during the SARS outbreak
• Reported significantly higher levels of burnout, psychological distress, and posttraumatic distress

(Lapum et al., 2020; Bahramnezhad & Asgari, 2020; Maunder et al., 2006;
METHODOLOGY

◦ Phenomenological qualitative design
◦ One-on-one interviews of new graduate nurse participants
◦ Purposeful sampling
  ◦ Only NGNs who had been oriented during the COVID-19 pandemic
  ◦ In the following nurse residency program cohorts: April 2020 cohort, Sept 2020 cohort, and Jan 2021 cohort
DATA COLLECTION

Demographic data

- Gender
- Nurse residency program cohort
- Assigned unit
- Marital status
- Highest nursing degree
- Age
- Length of orientation period
- Children in household

Semi-structured interview

- Some discussion questions included:
  - Tell me about your experience transitioning as a new graduate nurse during the COVID-19 pandemic?
  - Can you describe some of the struggles you encountered in your transition process?
  - What helped you cope with the stressors you faced?
DATA ANALYSIS

- Demographic data was analyzed using descriptive statistics
- Interview recordings were transcribed
- Transcriptions were analyzed using in vivo coding
- Codes were categorized into common themes
HUMAN SUBJECTS PROTECTION

- Institutional Review Board (IRB) approval was received
- Participants have been informed of risk of some emotional distress during the interview
- Participant letter explained a brief background and significance of the study
  - Assured all information will be kept anonymous and confidential
- Informed consent
- Cost incurred by the researcher was minimal
### Descriptive Statistics of New Graduate Nurse Demographics \( (N = 12) \)

<table>
<thead>
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<th>Demographic Variable</th>
<th>( M )</th>
<th>( SD )</th>
<th>( n )</th>
<th>( % )</th>
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<td>January 2021</td>
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Theme: Staffing

- Floating
  - “Floating in general even now is a little stressful. But as a new grad when you're depending on the people you're familiar with and comfortable asking questions, they're not there anymore.”

- Unsafe Patient Assignments
  - “I always thought it was risky because what if I mess up, I just started out? I can't lose my license.”
  - “I hope it's not going to be me today. I hope I'm not going to get the seven [patients].”
Theme: Orientation

- **Preceptorship**
  - “I think everyone comes in with a lot of anxiety and just feeling super incapable […] I felt so overwhelmed and fearful that I was going to miss something really crucial or forget something.”

- **New Graduate Nurse Residency**
  - “Talking to others in the cohort was helpful because we all understood what we were going through.”

- **Comfort Level Caring for Patients with COVID vs. without COVID**
  - “I only knew COVID, so that was strange. It was like I started right over again […] It took me a long time to get settled in and comfortable.”
Theme: Caring for Patients with COVID-19

- Nurse Moral Injury
  - “[grew] numb to it because at one point, it felt like every single shift, I had at least one comfort care patient.”
  - “It was that extra stress and you know, while you’re at work, you’re so busy you can’t talk about it. So all those feelings are pent in.”

- Fear of Transmission and Supply Levels

- Coping with Stress during COVID-19
  - “I don’t think I really ever learned to cope. I just try to go to sleep.”
  - “My mom is a nurse and she knew what was going on and always asked me how I was.”
Theme: Silver Lining

- "Being in the room with the patients, it felt kind of sacred. I’m the one that gets to be taking care of them. It was such a unique thing to be a part of."

- "I don’t want to get sick but if I get sick because I’m taking care of somebody else, then that is a worthy reason to get sick."
Implications for Nursing Practice and Education

- Preceptorship

- Topic suggestions for NGN classes included:
  - Postmortem care
  - Palliative care discussions
  - Speaking up in the case of an unsafe situation
  - Recognizing the need to ask for help

- NGN Self-Care and Well-being

- Unsafe Practice
  - Ensure adequate staffing and resources for patient and nurse safety
Recommendations for Further Research

- Effective self-care programs for nurses
- Some participants felt undervalued by management
  - Further research on ways hospital organizations could further support nurses
  - Enhance nurse satisfaction and retention
Strengths

- Participants’ level of comfort with researcher
- Opportunity for participants to personally reflect on their experiences during COVID-19

Limitations

- Homogenous sample
- Sample included NGNs from only one hospital
CONCLUSION

◦ NGNs in acute care settings are particularly vulnerable to the stressors inherent in the nursing job
◦ Furthermore, the present COVID-19 pandemic has caused much physical and emotional turmoil in nurses
◦ As a result, NGNs remain high at risk for burnout and job dissatisfaction
◦ Organizations must provide NGNs with additional support during and after the pandemic to decrease burnout and increase nursing satisfaction and retention amongst NGNs


