

**How do the perceptions and expectations of 4, university prepared
Australian new graduate nurses compare with the reality of
practising as registered nurse clinicians in the first year of practice?**

A Thesis Submitted in partial fulfilment of the requirements of the
Degree Master of Health Management with Honours

at the

Faculty of Education, Health and Professional Studies

University of New England

Armidale NSW

Australia

2005

Statement of Authentication

The work presented in this thesis is, to the best of my knowledge and belief, original except as acknowledged in the text. I hereby declare that it does not contain any material that has been submitted either in whole or part, for a degree at this or any other institution.



Acknowledgements

I wish to acknowledge and thank my husband Brad and my children Nicholas and Abbey for their endless patience and encouragement during the writing of this thesis. I also offer my thanks to my mother Marie who was unwavering in her belief that I could write this story. My heartfelt thanks to my dad Tony who taught me *'you are never too old to learn, if you are not too big to be taught.'* To my parents-in-law Jack and Wendy, thank you, for always believing in me and always encouraging me - we miss you. Finally to Dr Jeanne Madison for keeping me going and getting me over the finish line, you are now and have always been my hero. I thank you all. You have all in your own way inspired me to finish this thesis.

INDEX

Contents

Statement of authentication	i	
Acknowledgements	ii	
Abstract	iii	
List of Tables	iv	
Chapter 1	Introduction	1
	Context of the problem	1
	Statement of the problem	2
	Statement of the research question	3
	Ethics approval of the project	3
	Assumptions and limitations	4
	Rationale for the study	5
	Study objective	5
Chapter 2	Literature Review	7
	Historical perspectives of nursing	7
	The nursing workforce: multigenerational implications for nursing	9
	The aging nurse population	11
	Generation X	14
	Nursing Education	17
	The NSW New Graduate Nurse Recruitment Consortium	21
	Preferred area of clinical placement	22
	Reality shock	27
	Mentorship - <i>Veiled promises</i>	30
	Theory/practice gap - <i>The real world</i>	33
	Socialisation as a nurse - <i>The old girls club</i>	39
	Rites of passage	42
	Learning to be a nurse	43
	Horizontal violence and bullying - <i>Friendly fire</i>	48
	Shiftwork and fatigue - <i>Larks and owls</i>	56
	Conclusion	61

Chapter 3	Methodology	65
	Qualitative research	66
	The framework of the interviews	73
	The selection of the participants	75
	Overview of the study setting	75
	Ethical considerations	76
	The participants	78
	Summary	79
Chapter 4	Experiential learning: Qualitative insights	81
	Reasons for choosing nursing as a career	83
	Area of first clinical placement and Generation X	84
	Expectation of hostility	86
	Reality shock	90
	Socialisation - acceptance into the wider nursing social order	95
	Shiftwork and fatigue	101
	Significant events	104
	Conclusion	112
Chapter 5	The getting of wisdom: 3 months of clinical exposure	114
	Winnona: Departure from the study	115
	Clinical area of placement and Generation X	118
	Confidence, independence and socialisation as a nurse	123
	Clinical rotations in the first graduate year of clinical practice and preconceived notions	129
	Shiftwork and fatigue	133
	Conclusion	137
Chapter 6	Learning, growing, being	140
	Future orientations	141
	University preparedness	148
	Reality shock	150
	Conclusion	161
Chapter 7	Data analysis and conclusions	163
	Nurse education	166
	The NSW New Graduate Nurse Recruitment Consortium	168
	Reality shock	169
	Clinical placement	171

Chapter 7 (continued)

Generation X	172
Socialisation as a nurse	174
Bullying and harassment	178
Conclusion	180
Implications for this research	184
References	189

ABSTRACT

In 1984, nursing education was officially transferred to the university environment in an attempt to upgrade seemingly inferior 'certificate' qualifications to degree standing. As a result, nursing students no longer have clinical role models, nor in the student phase of their evolution are they socialised to be nurses - rather they are socialised as students. The 'live' clinical environment has been to a great extent replaced with classroom simulated learning environments with lecturers who may not have had actual clinical experience in many years.

This research captures the experiences of 4 new graduate Australian nurses, where senior nursing colleagues appoint blame to universities for the education of new graduate nurses who, though well prepared in theory, are unprepared for clinical practice. While the perceived lack of clinical skills of new graduates is a source of criticism by senior nurses, paradoxically there is evidence that senior nurses frequently abdicate responsibility for new graduates in terms of offering supervision, education and mentorship.

Hands on nursing practice can be gained during brief somewhat inadequate student clinical placements. The role of the student as 'the doer' of clinical practice has shifted to the point where the student is 'the observer' of others undertaking clinical practice. The lack of clinical preparation for the role of registered nurse is central to the high attrition rates of new graduate nurses from the profession. The lack of developed clinical skills causes new graduates to incur workplace horizontal violence from their harried, stressed senior colleagues.

Nursing has an aging labour force, but that is not its highest point of

attrition. It also has other generational forces impacting upon its workforce. Generation X is our next generation of nurse. These nurses are typical of their generation in that they will migrate to other careers if their expectations are not met; expectations previously never demanded - preferred hours of work within area of clinical preference. It is this generation of nurse that may well prove to be the most challenging for the future of nursing. The voice of new generation nurses needs to be heeded by nurse leaders, educators and policy makers to ensure nurse education and acquisition of clinical practice are more closely married within a professional and appropriate scope of practice.

List of Tables

4.1	Experiential learning analysis categories	82
5.1	The getting of wisdom analysis categories	118
6.1	Learning, growing, being analysis categories	141