Challenges of the Novices Nurses working in tertiary care cardiac hospital of Karachi Pakistan

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Abstract- Almost every new inexperienced professional during initial months of clinical practice have certain level of anxiety and face enormous challenges to adopt new working environment. This study was designed to identify the perceived challenges faced by novice Nurses. **Objectives:**The aim of this study was to find out challenges of novices nurses and to help them in adopting to the environment in the initial days of their career and also to determine the need for developing or improving the orientation program.

   Methods: A descriptive cross sectional study was conducted by using convenience non-probability sampling technique to recruit 26 study participants. Data was obtained through a self-administeredquestionnaire after pilot testing from 10 % of the participants and analyzed through SPSS version 19.0.

   Results: Different challenges of the novice nurses were identified to be different for various procedures, policies and skills. The study revealed that novice nurses faced different challenges during the first year of their career including work load, lack of confidence, lack of communication skills, and little knowledge about different procedures, time management and low competency level in performing certain clinical skills. **Conclusion:** There is need of improving the existing orientation programs in the organizations to help the novice nurses in overcoming their challenges and improving incompetence.

Index Terms- Novice nurses, competencies, challenges

I. INTRODUCTION

Novice nurses are prone to face multiple challenges while beginning as practical nurses which resulted in work incompetence, high level of burn out and depersonalization among them as compare to their experienced counter partners. (Watson, Macdonald & Brown, 2013)**.**

   The challenges face by the novice nurses are career transition, stressful work environment and inadequate support (Vanwyngeeren & Stuart, 2012). New graduates often feel incompetent, overwhelmed and under prepare for their professional role which is reflected by their lack of confidence, intense stress and conflict with their working environment, which may lead to the early termination of a nurse career (Goodridge 2003) According to Johnson & Rae (2009, as cited in Berry, Gillespie, Gates & Schafer, 2012), approximately one in every three novice nurses quit their jobs, due to the problems they face during initial years of their careers. About 30% of new graduate

nurses leave their jobs during first year of their careers. This high turnover of novice nurses increase workload on nursing team as they have to manage their work with less staff and may reduce the standards of nursing care provided by the organization (Hillman and Foster, 2011) and shortage of staff has resulted in reducing the standard of patient care by increasing workload and mandatory overtime for the nurses. This high turnover ratio not only impacts nurses' careers but also the organization because hiring new nurses can be very expensive for them (Jewell, 2013). The turnover cost for an organization was calculated to be $44,000 per nurse for one year Therefore, Organizations must be acquainted of the transition required of new graduate nurses entering into professional practice and implement strategies to support their transition, which can result in increased retention rates (Baggot, 2005).

   This study will likely help novice nurses to reflect on their challenges and may help as a basic guideline for researchers for further studies on the same problem and accomplish a comprehensive orientation program for the novice nurses.

II. METHODS

   The setting of the study was a tertiary care cardiac hospital of Karachi. The study was conducted through descriptive study design by using convenience non-probability sampling to recruit 26 study participants working in Intensive Care Unit (ICU), High Dependency, Step down Unit, Cardiac Emergency, General wards, Private ward and Day Care Units. The inclusion criteria for the participants was nurses how have completed their basic diploma and are working as staff nurses in different departments having less than one year working experience. An informed consent was presented to all participants and data was obtained through a self-administered questionnaire after pilot testing from 10 % of the participants and analyzed through SPSS version 19.0. It was mainly focused on determining competency level of the novice nurses, gaps in the current knowledge & skills and challenges during the first year of their career.

III. RESULTS

   The study shows that novice nurses face different challenges mainly related to deficits in knowledge and skills and also lack of orientation to different policies. The knowledge deficits were related to many procedures and policies of the hospital. 50 % of the participants had little or no knowledge of black code, 46.1 % had limited or no knowledge about red code, 69.2 % had limited

or no knowledge about ventilator, 53.9 % had no or little knowledge about Central Venous Pressure line (CVP), 39.1 % had no knowledge about arterial line, 69.3 % had limited or no knowledge about Intra-aortic balloon pump (IABP) see table 1. On the other hand, result related to competencies in skills' performance and following standards steps of procedure (SOPs) shows that most of the staffs were rating themselves either excellent or good in performing standards steps of procedures.

See table 2. 80.8 % of the study participants are facing job related challenges. Those findings suggested that knowledge deficits about medications, difficulty in communication with patients and their relatives, stressful working environment, lack of support, workload, staffing shortage, and communication gap between staff are the main challenges faced by them (See table 3).

S no.	Variables	Excellent	Good (enough knowledge)	Average (Limited knowledge)	Fair (No knowledge)
1	Knowledge about Blue code	26.9 %	57.5 %	15.4 %	0 %
2	Knowledge about black code	15.4 %	34.6 %	**19.2 %**	**30.8 %**
3	Knowledge about Red code	19.2 %	34.6 %	**19.2 %**	**26.9 %**
4	Knowledge about code alpha 10	19.2 %	34.6 %	**26.9 %**	**19.2 %**
5	Knowledge about policy of IV cannulation	46.2 %	46.2 %	3.8 %	3.8 %
6	Knowledge about policy of blood transfusion	61.5 %	26.9 %	7.7 %	3.8 %
7	Knowledge about Documentation	61.5 %	30.8 %	7.7 %	0 %
8	Knowledge about Blood sampling	53.8 %	38.5 %	3.8 %	3.8 %
9	Knowledge about Medication administration	61.5 %	30.8 %	7.7 %	0 %
10	Knowledge about shifting of patients to the other wards	53.8 %	38.5 %	3.8 %	3.8 %
11	Knowledge about own responsibilities	38.5 %	57.7 %	3.8 %	0 %
12	Knowledge about Team members responsibilities	34.6 %	50.0 %	11.5 %	3.8 %
13	Knowledge about angiography	15.4 %	53.8 %	30.8 %	0 %
14	Knowledge about angioplasty	19.2 %	53.8 %	23.1 %	3.8 %
15	Knowledge about ECG interpretation	19.2 %	30.8 %	46.2 %	3.8 %
16	Knowledge about drugs used in your department	23.1 %	53.8 %	23.1 %	0 %
17	Knowledge about Ventilator	3.8 %	26.9 %	**53.8 %**	**15.4 %**
18	Knowledge about CVP care	0 %	46.2 %	**38.5 %**	**15.4 %**
19	Knowledge about Arterial line	15.4 %	34.6 %	**30.8 %**	**19.2 %**
20	Knowledge about ABG interpretation	26.9 %	34.6 %	26.9 %	11.5 %
21	Knowledge about IABP (Intra-aortic balloon pump)	3.8 %	26.9 %	**46.2 %**	**23.1 %**
22	Knowledge about hierarchy of organization	15.4 %	57.7 %	15.4 %	11.5 %
23	Knowledge about Nosocomial infections	19.2 %	46.2 %	30.8 %	3.8 %
24	Knowledge about strategies for the prevention Nosocomial infections	26.9 %	42.3 %	26.9 %	3.8 %

Table 1. Knowledge about different procedures and policies of the Hospital

**Table 2. Follow the standard of procedures of different Nursing skills:**

S.No.	Variables	Responses (%)			
		Excellent	Good	Average	Fair
1	Follow Standard of procedure (SOP) for IV Cannulation	42.3 %	50.0 %	7.7 %	0 %
2	Follow Standard of procedure (SOP) for NG tube insertion	46.2 %	46.2 %	3.8 %	3.8 %
3	Follow Standard of procedure (SOP) for suctioning	50.0 %	34.6 %	15.4 %	0 %
4	Follow Standard of procedure (SOP) for	50.0 %	50.0 %	0 %	0 %

	Medication preparation				
5	Follow Standard of procedure (SOP) for Medication Administration	57.7 %	34.6 %	7.7 %	0 %
6	Follow Standard of procedure (SOP) for Documentation	50.0 %	42.3 %	7.7 %	0 %
7	Follow Standard of procedure (SOP) for pre and post care of PCI (Percutaneous coronary intervention)	50 %	19.2 %	23.1 %	7.7 %
8	Follow Standard of procedure (SOP) for surgical care	34.6 %	38.5 %	7.7 %	19.2 %

Table3. Challenges faced by the novice nurses

Knowledge related challenges

1. Knowledge about medications
2. Communication with patients
3. Communication with attendants
4. New procedures
5. Lack of knowledge about hospital policies

Skills related challenges

1. Ventilator management
2. Swan ganz catheter management
3. CVP monitoring
4. Medication administration
5. Blue code
6. Assisting during pt.'s intubation

Other challenges

1. Workload
2. Uncooperativeness
3. Favourism
4. Absence of doctors
5. Medication receiving from pharmacy
6. Stressful environment
7. Staffing shortage
8. Overcrowding of patients
9. Assign patient in the early days of job
10. Communication gap between staff
11. Personal Stress

Fig.1: Types of challenges
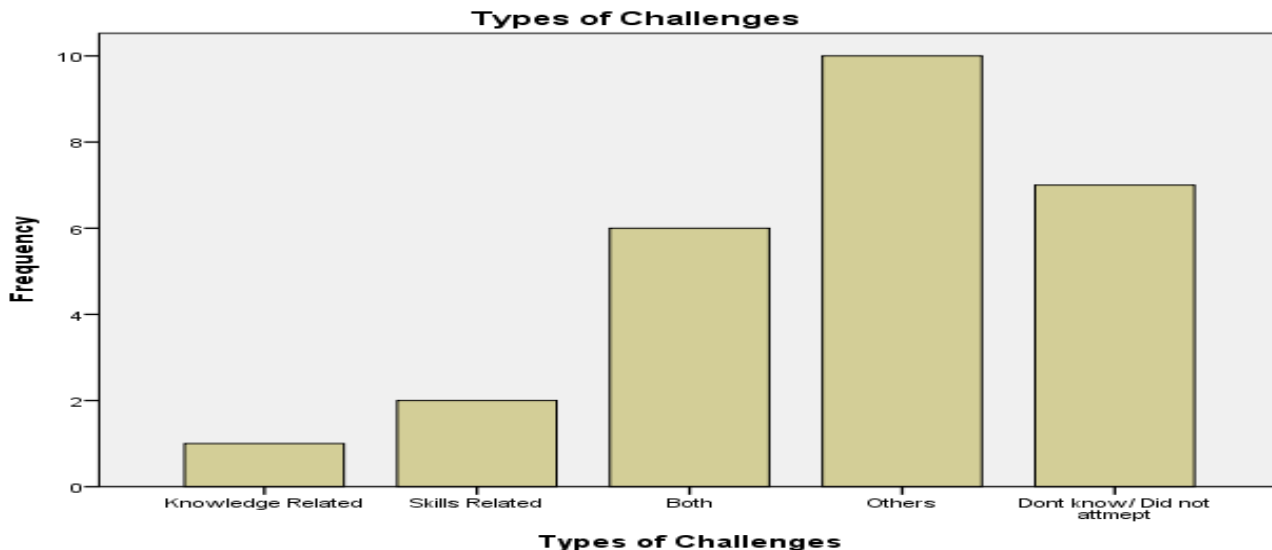
IV. DISCUSSION

In the rapidly evolving health care system, competency remains a major constituent of providing standard nursing care worldwide. Competency is defined by the Australian Nursing and Midwifery Council (2005, as cited in Levett-Jones, Gersbach, Arthur & Roche, 2011), as the sum of knowledge, skills, attitudes and values that accentuate effective performance in clinical practices. As the career of a nurse evolves, she becomes more competent and critical thinker. Benner Model explains that how competency develops over the years as the result of experience. According to Benner model of clinical competency (1984, as cited in Saver, Habel, & Alfaro-LeFevre, 2013) new graduates' passes through 5 stages to become expert nurses that are, novice, advance beginner, competent, proficient

and expert. In this model, first stage is novice, which refers to new staff, having no experience of the situation where they are projected to perform and mostly rely on others for their acts and decisions (Saver, Habel, & Alfaro-LeFevre, 2013). The journey from novice to expert occurs in a stepwise manner with time and experience. However, the development to an advanced level needs certain knowledge and skills, which if not provided, may cause one to stagnate at a level and hinder their development (Saver, Habel, & Alfaro-LeFevre 2013). Furthermore, Chandler (2012) stated that the being a novice is the most stressful, perplexing and appalling period of a novice nurse career. During this critical period of professional development novice nurses face many challenges due to gaps in knowledge and skills, which may lead to early termination of their nursing careers.

As stated by Jewell (2013) that new graduates confronted self-doubt and inadequacy while transition from student to a professional nurse or shifting to new work environment. In addition, Duchscher (2008, as cited in Jewell, 2013) described that feeling of discouragement and exhaustion that may lead to burnout, is the most prominent feature of novice nurses in the first year of their career. Thus, support and guidance is required to novice nurses as per their legitimate needs in order to make them learn how to apply theoretical knowledge into the clinical practices and providing safe patient care. According to Saver, Habel & Alfaro-LeFevre (2013), Benner model of clinical competency is the most widely used framework for addressing nurses' needs at different stages of professional development, which helps the nurses to comprehend how expertise develops, resulting in creating a supportive work environment. Jewell (2013) has described three (3) phases through which a novice nurse passes during their transition period and each phase is characterized by various challenges and difficulties. The first 3 to 4 months is the "honey moon" phase, during which main aim is to complete the tasks on time and do as directed. In this phase the novices realize that they are underprepared for their clinical practices (Barton et al., 2005 as cited in Jewell, 2013). This stage is considered as the most stressful period of a novice nurse's career and may results in quitting the job which may have a negative impact on both nursing profession and health care. The next four to five months is the "being stage" during which they realize overwhelmed but feeling more comfortable to work independently if equipped with support & guidance. After successful completion of the first two stages, a novice nurse enters into the third stage termed as "knowing phase", which lasts for the final three to four months of their first year and now they become more independent and confident in their clinical practices (Duchscher, 2008 as cited in Jewell, 2013). Besides, the challenges experiences by the novice nurses, the advent of technologies, increasing patient awareness and a shortage of health care providers has made working in the health care environment more challenging and stressful. In this challenging working environment the novices often feel isolated from nursing team as everyone remain busy in their own work and novice nurses are often ignored which may place the patient at risk.

V. CONCLUSION

It is evident that before entering into the clinical practices the novice nurses must be well prepared through a comprehensive orientation program, which will help in building a strong foundation for their professional growth. It will not only provide opportunities to the novice nurses for professional growth & learning and enhancing their competency but will also results in nurses' retention besides strengthening nursing profession by ensuring the provision of safe and quality nursing care.

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