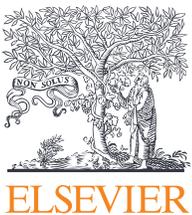


Transition to Practice

The pressures of crisis on new nurses Leading through uncertainty



Kandi Helminiak, RN, BSN
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The struggles created by global medical emergencies and other crises create an unprecedented demand on the mental and physical well-being of healthcare professionals, complications that can lead to staggering nurse burnout rates, emotional conflict, and overwhelming stress and anxiety.

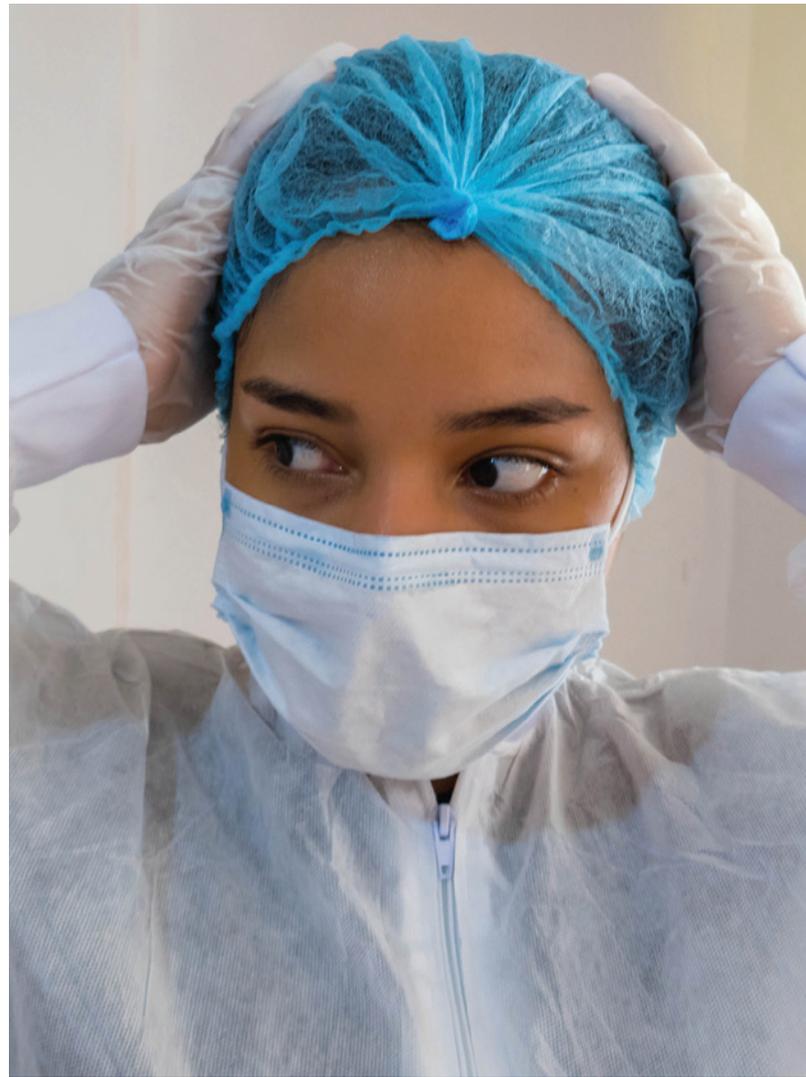
The effects of anxiety are especially compelling in new nurses just entering the workforce with limited confidence and competence in their skills. Even with adequate orientation and guidance, the shift from classroom to the front lines is a shocking new reality. Equally difficult, nurses are confronting these existing challenges during the complications of a worldwide health pandemic.

Without the close bonds of cohorts or a safe place to reflect, and share feelings, new nurses can feel abandoned and alone. Doubts of competency in real life situations pave the path to burnout.

“New nurses report they feel unprepared to provide safe and effective care to patients who are acutely ill with complex conditions in technologically advanced hospitals. Virtual education can expose new nurses to multiple situations that demand quick resolution in clinical practice. Building confidence can reduce the incidence of burnout, especially in crisis conditions.”

– Kandi Helminiak, RN, BSN

With a high patient-to-nurse ratio already in place, leaders are especially cognizant of identifying solutions to support their nurses in the transition from school to the clinical setting. Virtual education, support tools, resources and providing services such as childcare, transportation and emotional support have been essential to reducing stress.¹



However, acting in crisis mode, many states are working to incorporate new grads into the workforce in order to mobilize more nurses to assist in hospitals treating COVID-19 patients, even before they have taken their NCLEX. Testing for the national nursing exam has been problematic since testing centers are shut down due to the novel coronavirus pandemic. New grads could wait months for an opportunity to take the nursing exam.



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Some states have expedited the process for new nurses to obtain a temporary license during this emergency until they can take the national exam. In Phoenix, about 1,700 recently-graduated nursing students are being readied to move to the front lines to help Arizona hospitals deal with the current crisis. The Arizona State Board of Nursing has approved a new permit that allows recent nursing grads to practice under supervision until they can test for their license. “The permit could help a new grad enter the field just days after receiving their degree,” says executive director Joey Ridenour. “The process will cut out months of delay for grads waiting for a testing opportunity and ensure a graduate keeps their skills sharp.”ⁱⁱ

The state of New Hampshire always had a graduate license but the governor’s office and the board of nursing have also expedited the process to get a temporary license. The class of new registered nurses will continue working in the facilities where they spent their last semester of college, in hospitals treating COVID-19 patients.ⁱⁱⁱ

Nursing students can be deployed to use the clinical skills they have learned to date. In Georgia, nursing students who have completed coursework but are waiting to take licensing exams are also eligible for temporary RN licenses during the pandemic.^{iv}

Under emergency orders, the state of Idaho is permitting nursing students who have completed a basic nursing course to work as unlicensed assistive personnel under the state’s nurse apprenticeship program.^v

While nurses work on-site toward preparing for the national exam, they continue to face even more challenges in performing skills for which they are not fully prepared. While new nurses willingly join the front lines during critical times, many organizations anticipate the long-term risks associated with a traumatic transition.

“The stakes are very high, and unfortunately there are no good answers. Part of being able to find integrity here is accepting the reality of our current situation and living with uncertainty.”

– Cynda Rushton
Johns Hopkins nursing ethics expert

“The pandemic imposes so many limitations,” says Cynda Rushton, Johns Hopkins nursing ethics expert. “We can’t say, ‘Whatever you prefer is available,’ but we can say ‘Here’s how I am able to help you with the resources we have. It might be that I can offer my knowledge and skills to relieve your symptoms and help you make decisions, or simply listen to your fears and concerns.’”^{vi}



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Leading during a crisis

Leading during any crisis or natural disaster demands strength, perseverance and direction. Not only must leaders educate nurses on what to expect with a transition from the classroom to the workplace, but they must build connections with a team of advocates to find a safe space for new nurses to voice their anxieties and address concerns, even intervening to support at-risk nurses before they succumb to burnout. ^{vii}

The need for strong engagement and support tools is essential in transitioning new nurses from their academic setting to clinical practice at any time, but especially so during times of crisis.

Elsevier's Transition to Practice is a revolutionary platform designed to help boost new nurse confidence and readiness, while strengthening support and retention. Through an immersive, learner-centered environment that leverages evidence-based curriculum, new nurses are able to work through real-world scenarios in a safe space. Nurses also have the opportunity to reflect on their challenges and provide candid feedback, empowering timely support that rapidly builds new nurse confidence.

Discover how Elsevier's Transition to Practice can boost new nurse confidence and readiness as they navigate the critical transition into professional practice.

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