

Federal Department of Nursing

Ministry of Health, UAE

February 2003



PRO fessional Development
gram for the New Nurse

G r a d u a t e

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"A New Graduate Nurse, upon entry into professional practice, is at the beginning of the journey to develop the expertise which will lead to confident, intuitive and fully appropriate and comprehensive nursing care management. New Nurses want to make a difference in patient care and those in nursing management are critical in providing encouragement and coaching in ways that will enable new nurses to maintain their enthusiasm and vision while they are acquiring the skills and perspectives they need to become effective in the system...."

(Benner, 1984)

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The Emirati Nurse & New Graduate Development (ENGD) Section at the Federal Department of Nursing (FDON), Ministry of Health (MOH), United Arab Emirates and the Professional Development for Beginning Practitioner Program (PDBP) Taskforce Committee, where its members represent a number of MOH facilities, have in the process of revising this document used a variety of sources to develop this program. (Please refer to Reference List)

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Therefore reproduction of this document will be as follows:

- Program saved on disc will be kept with the facilitator of the program at the In-service/Continuing Education Department at the facility.
- One master copy to be kept at the Director of Nursing office.
- One copy to be kept at a designated place on the ward where New Nurse Graduates are practicing. This copy will be accessible to the Nurse Manager/Head Nurse, Preceptor and New Nurse Graduate.

Reproduction of the developed tools to measure the continuing progress of the New Nurse Graduate depends on the number of New Nurse Graduates expected to join the program.

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The revised program has been greatly improved through hands on experience, valuable ideas and input from the members of the PDBP Taskforce Committee. Members to the Committee convened in May 2001 and completed their work in November 2002.

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FOREWARD

The revised program is a guiding document to assist the facilities in supporting the New Nurse Graduate on entry into actual practice setting.

Depending on the practice setting in which the NNG is allocated, the core competencies identified in “My Clinical Handbook” may be modified and adapted to meet those learning needs specific to that area of practice.

Although the time frame of the program is stated at six (6) months, each New Nurse Graduate should be assessed individually, to determine if further development and support is required in specific areas of nursing practice. Facilities are encouraged to assume this role and responsibility after the completion of the program to ensure safe practice is maintained at all times.

INTRODUCTION

The Professional Development Program for Beginning Practitioner (PDBP) Taskforce Committee was formed in May 2001 to review the current operational program in MOH facilities. The review process took into consideration recommendations, formal and informal feedback from MOH facilities, Institutes of Nursing, New Graduates experience with the program and documented evaluation findings collated since the implementation period of the program in 1997.

Revising the program has been essential to enhance and improve the quality and usefulness of this program, to meet the challenges and the changes within our health care environment and to effectively meet the needs of the New Nurse Graduate practicing within the health care service in various clinical setting. The revised program as of November 2002, will be referred to as:

“THE PROFESSIONAL DEVELOPMENT PROGRAM FOR THE NEW NURSE GRADUATE”

1. Mission Statement

The Federal Department of Nursing believes that all New Nurse Graduates¹ (graduate of an approved nursing education program), throughout the United Arab Emirates (UAE), should have access and the opportunity for professional development. This can be achieved through a formal, comprehensive and supportive program, specifically designed to meet the professional and individual learning needs of such a target group as applied/implemented in various health care facilities.

This program promotes growth in professional attitude, knowledge and skills utilizing current and available resources and formal learning opportunities.

In accordance with the Ministry of Health (MOH) mission statement (Professional Code of Conduct, 2001) the program assists in providing optimum health for all people in the UAE, by promoting and ensuring excellence in health care practices through ongoing education.

Participants in the program are expected to strive for high standards of nursing care whilst sensitively honoring the values, rights and needs of others and self in a dignified way, taking careful cognizance of diversified, religious and cultural perspectives in the UAE.

The program aspires to meet the needs, of its various stakeholders, for example;

- Professional learning needs of the NNG
- Health care delivery needs of MOH facilities
- Requirements of the MOH
- Provision for quality care in health care and community setting

2. Program Goal

To provide essential, structured and guided support to the New Nurse Graduate, reflecting on and assessing their professional development at the initiation of their career path and supporting their transition to fully function as a professional nurse.

*New Nurse Graduate¹: Will be abbreviated as **NNG**.*

3. Program Objectives

3.1 To enable the **New Nurse Graduate** to function optimally within practice by focusing first on her/his security and affiliative needs, such as belonging, feeling of comfort and acceptance.

3.2 To facilitate the identification, structuring and monitoring of clinical educational experiences that positively impact on attitude, knowledge and skills in the development of the NNG.

3.3 To enable participants in developing interpersonal and self-management skills and in coping with immediate/demanding needs by utilizing, for example; reflection, feedback, guidance and professional support.

3.4 To enable the NNG to adapt to the role and function as a valuable and responsible team member within clinical practice.

4. Program Outcome

On completion of the program, the New Nurse Graduate is expected to have achieved the following:

4.1 Successfully completed the requirements of the program

4.2 Demonstrated attributes of a professional nurse

4.3 Acquired the ability to respond to sudden or unpredictable changes in client status

4.4 Facilitated the transition from student to professional nurse role

5. Program Key Elements

Time Frame

The program outlined in the following document is developmental and extends over a **six (6)** month period. The NNG is expected to complete the requirements of the program within the stated period. The six (6) month period commences when the NNG joins the program **not** on the date of employment.

Area of Practice

The NNG is not expected to move from one clinical area to another during this program, unless the facility regards this move as necessary and is able to provide continuity in supporting the NNG in that new area of practice.

Key Elements

- **Macro/micro orientation:** This element introduces the NNG to the facilities expectations of the staff nurse role in relation to the care and nursing practice they provide. The NNG is familiarized with rules and regulations set by MOH, policies and procedures, protocols developed by the facility and unit routines. This represents defined sets of expectations on how staff nurse functions, completes certain tasks or activities and responds to specific situations in delivering patient care. Additional written documents and ongoing educational activities will support the learning needs of the NNG in this phase.
- **Preceptorship:** Facilitates the development and socialization of the NNG to the responsibilities of their position on their assigned practice area. This element focuses on the preceptor role as an experienced and competent staff nurse, who is prepared to provide structured support, act as a role model and resource person to facilitate the development of skills necessary to effectively interact with the NNG.
- **Socialization:** This element focuses on helping the NNG feel welcomed and accepted as a member of the unit, member of the healthcare team and an employee of the facility. Socialization encompasses supporting and respecting the NNG abilities, recognizing their progress and enhancing their self-confidence as contributors to the health team. Rather than feeling like an outsider, NNG can experience a true sense of belonging among their peers, which is easily overlooked in the midst of acquiring new knowledge and skills.
- **Standards of the Program:** Standards were developed to support and define the expectations of the NNG, whereby the quality of care is assessed. The standards in the program are stated in broad terms and are accompanied by a set of criteria that define expectations of the NNG more explicitly and facilitate determination of compliance with the standards. Our concern in this program is with the quality of the performance carried out by the NNG, not how slowly or quickly a performance occurs.

- **Professional competencies:** This element demonstrates the integration of knowledge, skills, attitudes, abilities and judgment of nursing practice in a given context. The process begins with the preceptor/facilitator and NNG meeting to assess her/his practice in order to identify opportunities for learning. This self-assessment leads into the next step that is the planning of learning activities. The Clinical Skills Competency Tool, and the Individual Professional Development Plan (IPDP) support this plan. Both of these tools are identified in “My Clinical Handbook”.
- **Assisting with the continuous progress of the New Nurse Graduate:** The facilitator and preceptor provide continuing support through regular review days and appropriate documentation of learning. The use of the reflective diary and the IPDP facilitates the assessment of newly acquired learning.
- **Learning activities:** These activities are developed and planned by the facilitator to meet and support the attainment of learning needs of the NNG. These activities could range from assigned readings, group discussion, lectures related to various content areas, reflective practice, role-playing and others as deemed relevant by the facilitator.
- **Completion and evaluation of program:** To mark the completion of the program the NNG will provide completed and discussed IPDP’s to the facilitator and submit a minimum of two (2) reflective journals during the program. Evaluation of the program will be carried out by the facilitator/preceptor and the NNG on the provided forms. Evaluation of the program will provide meaningful information that can be used to make necessary decisions about the program’s achievement of its desired outcome.

To better understand the Model applied in the program the following is a brief summary of the model describing progression of professional skills and is based on Patricia Benner's adaptation of the Dreyfus Model of Skill Acquisition

DREYFUS MODEL OF SKILL ACQUISITION

(From Novice to Expert)

Aydelotte describes Benner's groundbreaking work as "... a major contribution to nursing. In her analysis of observations reported by nurses in actual practice, Dr. Benner applies a model of skill acquisition developed by professors Hubert L. Dreyfus and Stuart E. Dreyfus". (Benner, 1984, p.V)

This model namely "Dreyfus model of skill acquisition", consist of five levels (Novice, Advanced Beginner, Competent, Proficient and Expert) (Benner, 1984, p. 13)

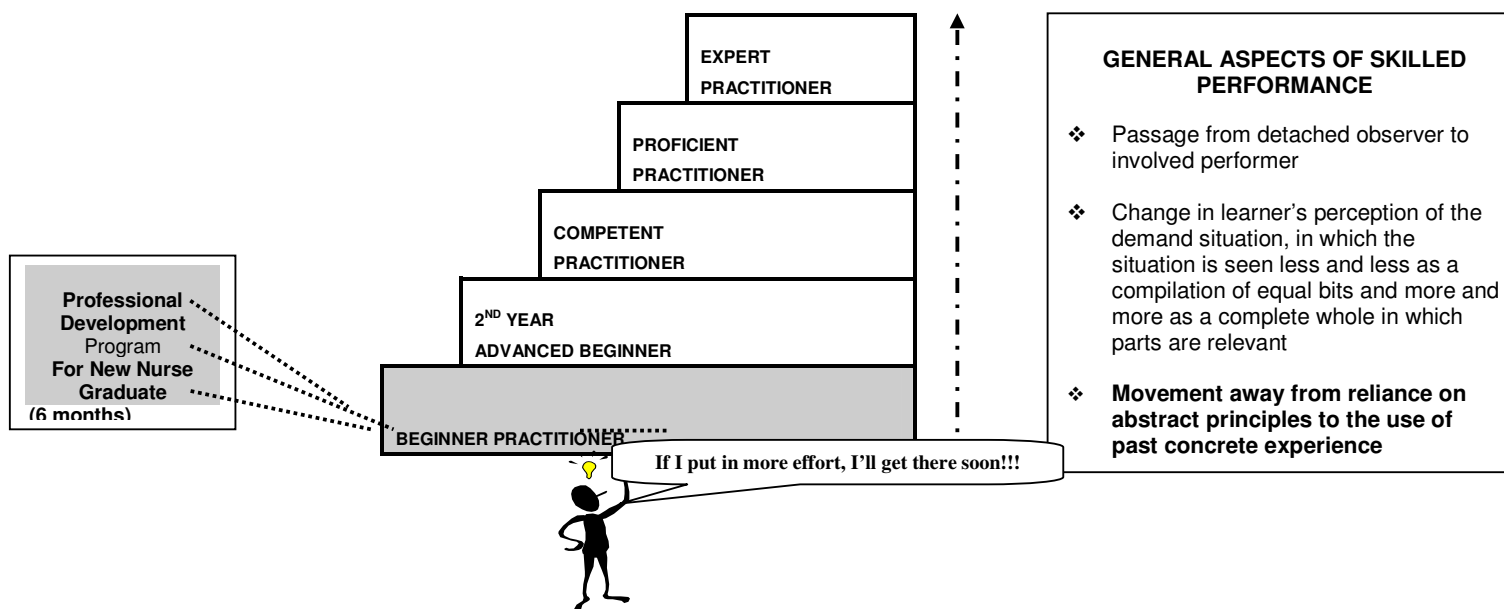
The first year may be viewed as a foundation to nursing professional practice development and is vital in the clinical development of the novice nurse practitioner. The nurse who successfully completes one level will be at the advantage of moving onto the next level of skills acquisition.

Clinical knowledge is gained over time, and clinicians (in this case with reference to the novice nurse) are unaware of what they gain out of actual practice situations. Clinical know-how strategies should be extended and refined in order to enhance clinical skills development. "Skills and skilled practices refer to the applied skill of nursing in actual clinical situations" and include skilled nursing interventions and clinical judgment skills.

(Benner,1984, p. 14)

The Dreyfus model made it possible to describe the performance characteristics at each level of development and therefore is an ideal practice model to identify teaching/learning needs at each level.

STAGES/LEVELS OF SKILL ACQUISITION



STAGE 1:

NOVICE: (Beginner Practitioner, Neophyte):

- Have no experience in which they are expected to perform.
- Take in little of the situation because it is too new and too strange – they have to concentrate on remembering the rules.
- New graduates (or students) who enter clinical areas at novice level, as well as any other nurse entering a clinical setting where s/he has no experience with the patient population if the goals and tools of patient care are unfamiliar. (Benner, 1984, pp. 20-22)

STAGE 2:

ADVANCED BEGINNER:

- Can demonstrate marginally acceptable performance.
- Have coped with enough real situations to note (or as pointed out to them by a mentor) the recurring meaningful situational components ("**aspects of the situation**")
- Requires prior experience in actual situations for recognition of these aspects.
- Aspects include overall, global characteristics that can be identified only through prior experience. (Benner, 1984, pp. 22-25)

The Professional Development Program for the New Nurse Graduate is based on the Dreyfus model, and stretches over a six (6) months period in which only the first two levels are significant - the NNG starts as a novice and progresses in the direction to that of an advanced beginning practitioner within that area of practice.

Implications for Teaching and Learning: (in relation to the Novice and Advanced Beginner)

- Gain experience in situations necessary for skills development, and are taught features of the task world. (e.g. weight, intake and output, blood pressure) that can be recognized within situational experience.
- Are given context-free rules (e.g. procedural lists) to guide action.
- Orientation in many hospitals by preceptors (nurses who are at the competent level) so that aspects of the situation can be pointed out and during this stage of learning, setting priorities based on most noticeable aspects. Safeguarding the patients or the new nurse.
- Guidelines may be given to integrate as many as possible aspects, but these aspects or attributes are equally important. Differential importance is ignored - attributes and aspects are treated as equally important.
- Advanced Beginner needs support in the clinical setting.
- Advanced Beginner needs assistance, for e.g. with setting priorities as they may operate from general principles and only begin to perceive meaningful patterns in clinical practice.

STAGE 3

COMPETENT:

- Typified by the nurse who has been on the job in the same or similar situations two to three years
- The nurse begins to see his/her own actions in terms of long-range goals or plans which he or she is consciously aware.
- Lacks the speed and flexibility of the proficient nurse but does have a feeling of mastery and ability to cope with and manage the many contingencies of clinical nursing.
- The conscious deliberate planning that is deliberate of this skill level helps achieve efficiency and organization.
- Competent nurses lack the experience to recognize a situation in terms of an overall picture or aspects which are most salient¹ or most important. (Benner, 1984, pp. 25-26)

STAGE 4

PROFICIENT:

- The performer/nurse perceives situations as wholes rather than in terms of aspects
- Performance is guided by maxims².
- Perception is a key word here – the perspective is not thought out but presents itself based on experience and recent events.
- During this stage the nurse understands the situation as a whole because they perceive its meaning in terms of long-term goals.
- The nurse learns from experience what typical events to expect in a given situation and how plans need to be modified in response to these events.
- The holistic understanding improves the proficient nurse's decision-making.

Maxims²: General truth, principle or rule of conduct expressed in a sentence, (The Concise Oxford Dictionary, 1991)

(Benner, 1984, pp. 27-30)

STAGE 5

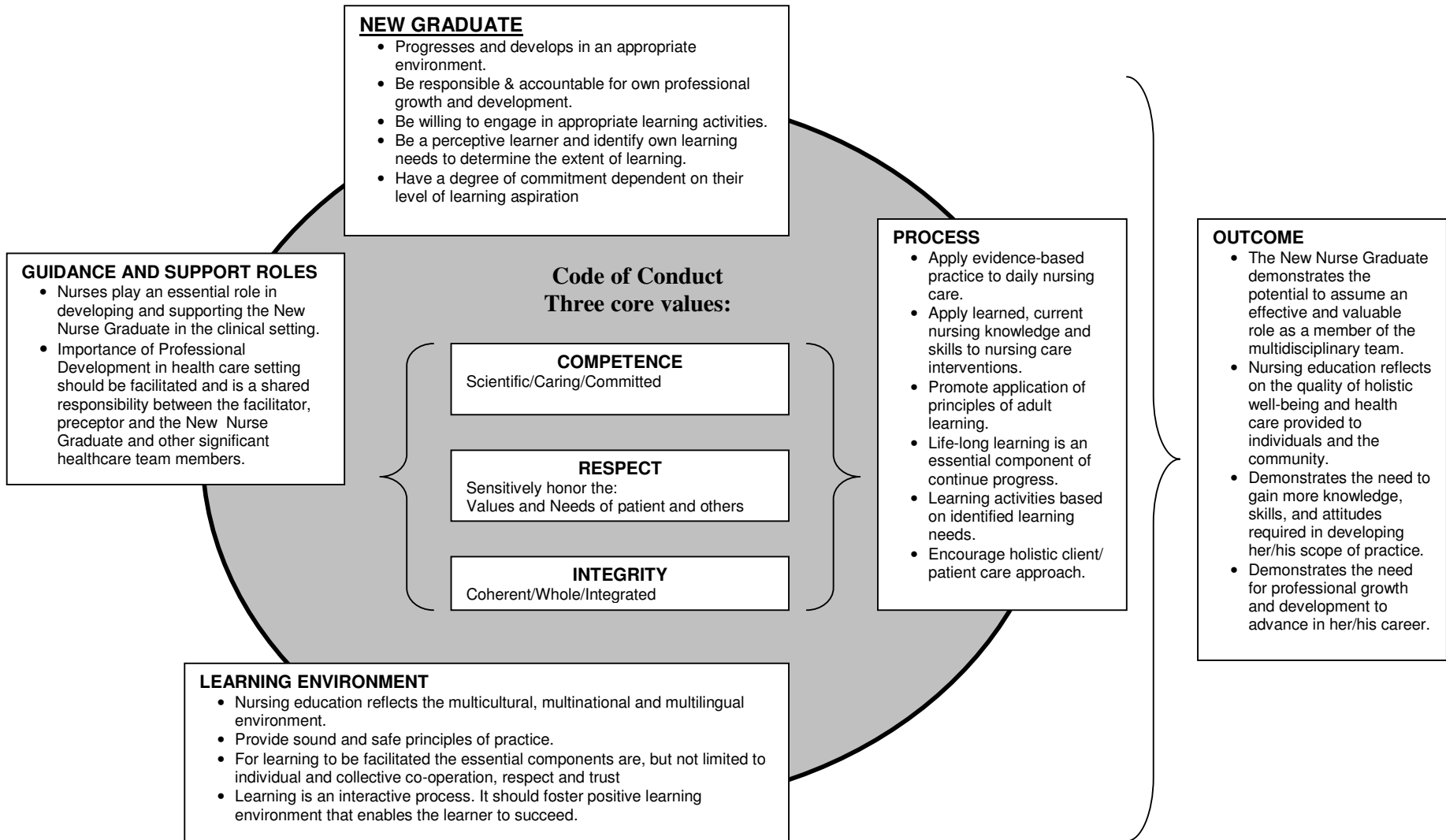
EXPERT:

- No longer relies on an analytic principle (rule, guideline, maxim) to connect her or his understanding of the situation to an appropriate action.
- Has an enormous background of experience, and now has an intuitive grasp of each situation. and zeroes in on the accurate region of the problem without wasteful, alternative diagnosis and solutions.
- Operates from a deep understanding of the total situation. (Benner, 1984, pp. 31-35)

SUMMARY:

The **Dreyfus model** distinguishes between the level of skilled performance that can be achieved through principles and theory learned in a classroom, and on the other hand context-dependent judgments and skill that can be acquired only in real situations. Nurses are expected to continue their professional development after completing the program, by moving onto the next levels of the model. (Benner, 1984, pp. 20-25)

STATEMENT OF BELIEFS



Standards of the Program

To Support Scope of Competencies

Preamble:

It is important to identify the level of performance, which a NNG is expected to attain on progressing through the guided transition period into professional practice.

Standards provide statements of intent-specification of a behavior, practice or approach, which defines the expected performance.

Identified criteria provide measurable actions associated with attainment of the Standard. Together Standards and Criteria provide guided direction for required experience, assessment of performance and evaluation of methods and process.

Standard Statements

STANDARD 1

The New Nurse Graduate demonstrates knowledge, skills, values and attitudes needed for safe and effective nursing practice.

Criteria is being met when NNG:

1.1 Complies with written policies, procedures and guidelines

The program delivery will comply with MOH, FDON, and Facility established and documented policies/procedures and guidelines

1.2 Understands roles and responsibilities

1.3 Ensures correct technique and procedure is maintained and correct equipment is used

Any equipment used within the program, including those for teaching as well as anything used by participants in delivering patient care

1.4 Meets patient/client physical, psychological, emotional, spiritual and social needs within the holistic context

1.5 Identifies own professional development needs when engaging in activities such as, reflection in and on practice

The program uses structured techniques in delivery to enhance reflection

Teaching technique:

In meeting the standard of the program, the facilitator may use a variety of teaching techniques including:

- Classroom discussion.
- Guided practice, e.g. Demonstration, coaching (within clinical area)
- Reflective practice such as a reflective diary, discussion on a critical incident report
- Self-assessment on skill performance, by the NNG
- Simulation Exercises

STANDARD 2

The New Nurse Graduate demonstrates a systematic and holistic approach to patient/client care during her/his interactions with all clients, at all times.

Criteria is being met when NNG:

2.1 Follows nursing process, applies equal emphasis to all steps: assessment/planning/implementation and evaluation
Clinical aspects of the program emphasizes each step of the nursing process equally

2.2 Integrates physical, social, emotional, cultural, psychological and religious/spiritual dimensions of care
Definitions used within the program of holistic care incorporate a multi-dimensional view of the patient/client

2.3 Clients and their 'significant others' are participants in care

2.4 Patient status is understood and appropriate nursing care is carried out

2.5 Real life examples/cases/scenarios are used to highlight priorities and work organization
Teaching techniques utilize real life examples

2.6 Documents and reports accurately on clients condition and care

2.7 Acknowledges contribution of other health care providers and incorporates into nursing care management

2.8 Contributes to health education of patients and significant others

The program acknowledges the support of the multidisciplinary team in patient/client care

Guidelines

Teaching techniques:

In meeting the standard of the program, the facilitator may use a variety of teaching techniques including:

- Role playing
- Discusses cases with emphasis on the nursing process
- Role modeling
- Health education session/patient teaching session

STANDARD 3

The New Nurse Graduate understands the importance of assuming responsibility for her/his professional development.

Criteria is being met when NNG:

- 3.1 Utilizes learning opportunities to achieve formal (degree, diploma, etc), non-formal (in-service), and/or informal (teachable moments) education
- 3.2 Utilizes resources to further enhance practical knowledge and skills
- 3.3 Seeks relevant opportunities to increase clinical experience
- 3.4 Utilizes experiences as a basis for reflection and improvement

Guidelines

Teaching techniques

In meeting the standard of the program, the facilitator may use a variety of teaching techniques including:

- Structured clinical placement
- Participation in/attendance of workshops, seminars, case studies, grand rounds (nursing, medical)
- Facilitate the achievement of own learning needs
- Provide support in reflection on and in practice
- Encouragement to maintain a reflective diary

STANDARD 4

The New Nurse Graduate supports the ethical practice of nursing.

Criteria is being met when NNG:

- 4.1 Practices in accordance with the Professional Code of Conduct (MOH, 2001).
- 4.2 Ensures confidentiality and security of written and verbal information acquired
- 4.3 Understands and practices the principles of privacy, dignity, and respect.
- 4.4 Delivers nursing practice in a fair way, acknowledging the differences in beliefs and culture practice of individuals or groups
- 4.5 Reflects on the four basic moral values – beneficence, non-maleficence, honesty and fairness in daily patient care.

Guidelines

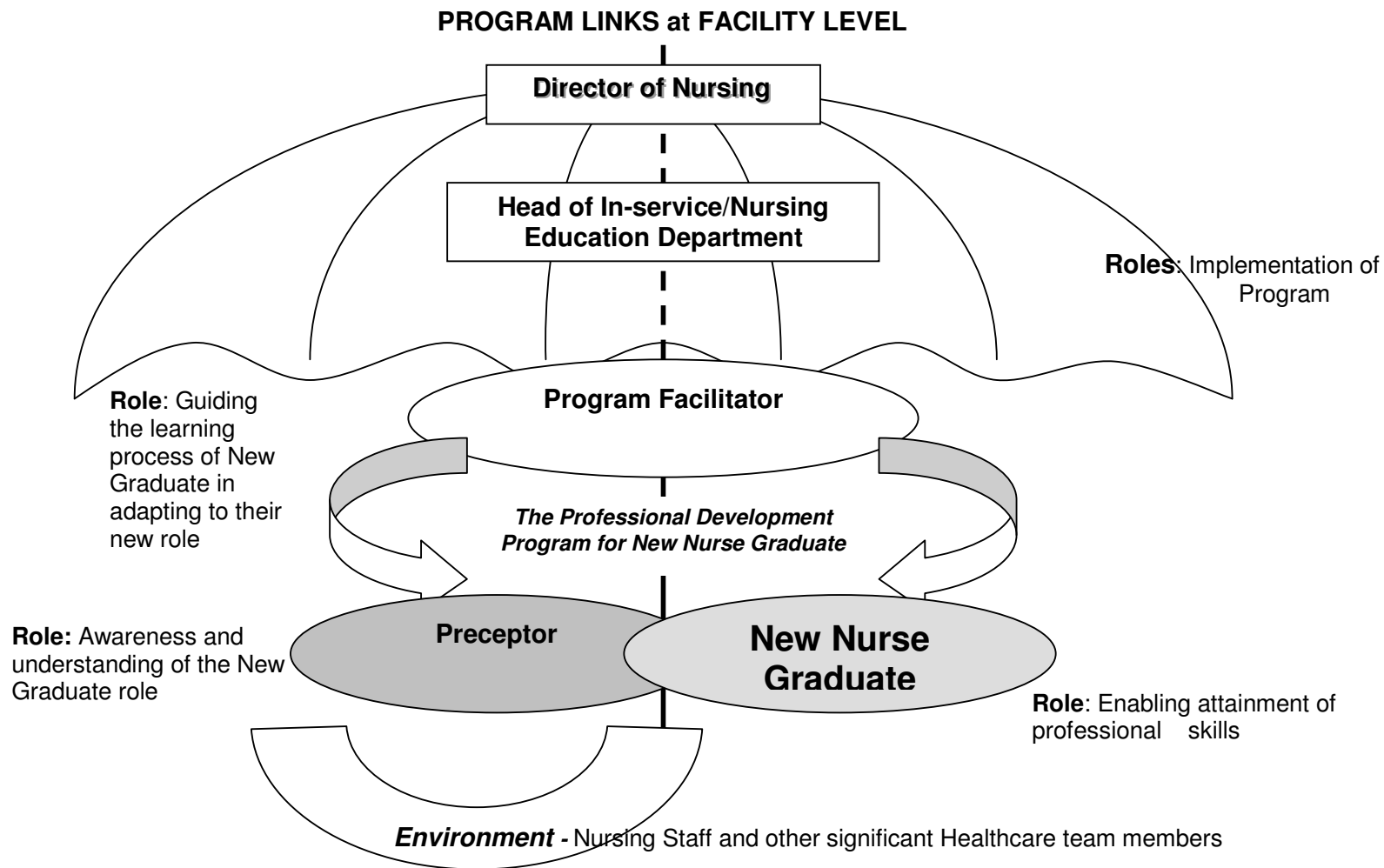
Teaching techniques:

In meeting the standard of the program, the facilitator may use a variety of teaching techniques including:

- Formal sessions to discuss content of the Professional Code of Conduct Booklet (MOH, 2001)
- Facilitate attendance to introductory ethics workshops
- Selected MOH rules and regulation, professional codes, policies, procedures and guidelines

Examples of Resources available:

- Federal Department of Nursing (FDON), MOH – Policies, Procedures and Guidelines Manual
- Facility policies, procedures and work guidelines
- Mandatory competencies required by FDON – MOH.
- FDON, MOH - In Support of Nurses: Quality Standards
- Job Description
- Related learning activities
- My Clinical Handbook
- Equipment and Supplies Manual
- Guidelines on reflective practice
- Professional Development Program for the New Nurse Graduate
- Preceptor, facilitator of program, senior colleagues and other multidisciplinary team members
- Literature and internet search
- Advanced studies in nursing
- Facility in-service education programs
- Unit staff meeting, case studies
- Nursing audit report and anecdotal reports
- Professional Code of Conduct booklet (MOH, 2001)
- Preceptor/facilitator and Head Nurses as resources for specific cases requiring expertise beyond own current scope of competence
- Attendance of relevant seminars, meetings, workshops and conferences at facility, MOH and national level



PROGRAM IMPLEMENTATION


The following information (provided in table format) outlines one way in which role players in this program could share and understand the scope of responsibilities expected of them within each aspect of the program. Identifying these responsibilities may avoid any potential misunderstanding and role conflict.

Expected Time Frame: Sixth Months

Program Phase	Forms	New Nurse Graduate	Preceptor	Facilitator	Others
Initial Phase (Expected completion 2 weeks –1 month)	Employment and relevant documents	Completes required forms and documents	Welcoming NNG to unit / hospital Assists NNG in social integration into the unit and the staff Nurse Manager, Head Nurse or Nurse In charge assigns preceptor to NNG		Nurse Manager, Head Nurse or In-charge assigns preceptor to NNG
Commences on General Orientation	Form A Form E	Familiarize with organizational system and process	Establishes a time frame to meet the NNG (e.g., biweekly, monthly...) to discuss identified learning needs, prioritize and plan on achieving outcome		Adjusts preceptor patient assignments
Unit Orientation	Form B Clinical Handbook: Form C Form E	Identifies learning needs specific to this phase Gradually begins to complete self-assessment of core competencies Works with facilitator/preceptor to develop an initial learning plan	Preceptor: to function as a role model and resource person.	Coordinate with nurse manager, Nursing Department re: Clinical Placement Familiarize NNG with rules, regulations, professional code of conduct, policies and procedures set by MOH	Reviews learning plan On a regular basis, to determine NNG progress Schedules NNG and preceptor to the same working shift for at least the 1-2 months

PROGRAM IMPLEMENTATION (cont'd)

Program Phase	Forms	New Nurse Graduate	Preceptor	Facilitator	Others
Implementation Phase 2-4 months, structured clinical placement	Clinical Handbook: Form C Form D Form E Reflective Tool	Completes first Individual Professional Development Plan and reflective diary Discusses outcome with facilitator/preceptor Attends planned learning activities	Facilitates to meet learning needs specific to that phase Discusses with facilitator learning opportunities to support specific learning needs of NNG	Prepares NNG in mandated competencies Modifies formal learning opportunities to meet learning needs or resolve encountered learning problems of NNG	Remains informed of the progress of the program Provides resources and other support to the NNG Communicates any arising problems with the facilitator and preceptor Selects a second preceptor, if circumstances warrant this change Provides own observations and comments in the first appraisal form
	Facility Appraisal Form (at 3 months)	Completes second Individual Professional Development Plan and discusses with preceptor	Continues to arrange to meet with NNG to review progress Provides positive and constructive feedback throughout the program	Encourages NNG to pursue informal learning opportunities, which may include gathering information via the literature, the Internet, colleagues, peers and patients/clients Contributes to the facility appraisal form Monitors ongoing progress of program in all its aspects	



Understanding the Socialization Process to better support the New Nurse Graduate

Target Group: New Nurse Graduate

The New Nurse Graduates from the Institute of Nursing, at the MOH, UAE or from an approved Nursing Education program from within or external to the UAE.

The NNG in her/his encountered novice clinical practice and environment is expected to provide nursing care for clients/ patients and recipients of nursing care of all ages with common and predictable health problems, and has the potential to provide nursing care for clients with complex health problems requiring specialized nursing care.

She/he is prepared to practice with the level of supervision normally provided in health care settings.

The New Nurse Graduate

The following are some quotes of how NNG are perceived by others and how they perceive themselves

“.....they have this enormous learning curve when they qualify and come into the wardafter six months you suddenly realize that they have managed to absorb a phenomenal amount of information by the end of that year..... But that year for them must be hell on earth’.
(Runliman et al., 1998 p. 102)

‘.....I felt tired, not organized in my work, too much to do, I am confused and can’t manage my work.....’
(NNG, 2000 → 2 months into clinical experience)

‘.....my independent training helped so much, since I was appointed on the same ward, the staff welcomed me, as if I was one of them.....’
(NNG, 2002, 4 months clinical experience)

‘.....I was confused, the first few days, I didn’t know which case belonged to which Dr.....I started then to write everything down, now after 5 months, I gave up writing down the cases, since it’s all in my head.....’ (NNG, 2001)

‘.....They asked me if I know how to calculate medication, I just felt like a student.....’ (NNG, 2002)

Preceptoring

‘.....I think that (preceptoring) enhances my role. I do not actually see it as a difficult burden, I actually see it as part of my role. I look on it positively.....’ (Journal of Advanced Nursing, 1995, pp. 1006-1015)

‘.....I was really apprehensive about taking her (New Nurse Graduate) with me.....watching me.....that made me feel a bit more...well I have got to do this properly and right!’
(Preceptor, MOH Facility, 1999)

‘....It (Preceptoring) had made me realize that I can’t afford not to keep myself up to date and develop myself.....!’
(Journal of Advanced Nursing, 1995, pp. 1006 – 1015)

CHALLENGES THE NEW NURSE GRADUATE MAY ENCOUNTER

Orientation programs are designed to fill gaps in the newly graduated nurse's clinical practice. Providing supervised learning experiences, facilitating the application of theoretical knowledge to actual patient-care situations, developing essential nursing core competencies, enhancing self-confidence and socialization will contribute to achieving an effective member of the nursing staff.

NNG usually has mastered theoretical content, but may lack the ability to apply it to the following:

- Solution of basic nursing problems
- Action in sudden changes of patient condition
- Prevention or immediate treatment of complications.

This difficulty may have implications on problem solving skills.

NNG may lack technical competence in performing nursing skills, due to the following:

- Lack of clinical competence as a result of limited exposure to clinical nursing experiences.
- Lack of clinical competence may cause the NNG to feel inadequate.
- Disparaging comments from staff further lowers the New Graduate self-esteem.

The resultant feeling is displayed in dissatisfaction and discomfort in the employment setting.

NNG may lack organizational skills to accomplish set goals, due to the following, but not limited to:

- Inability to prioritize when faced with competing goals.
- NNG approaches work with a task-oriented focus.

NNG may be unable to perform more than one task at a time, attributed to the following:

- Within the educational process the students care for a small number of patients, often with a focus on specific aspects of care, rather than on the "whole job".
- Inability to set priorities which leaves the NNG at a further disadvantage clinically, where assigned tasks are not completed as expected.

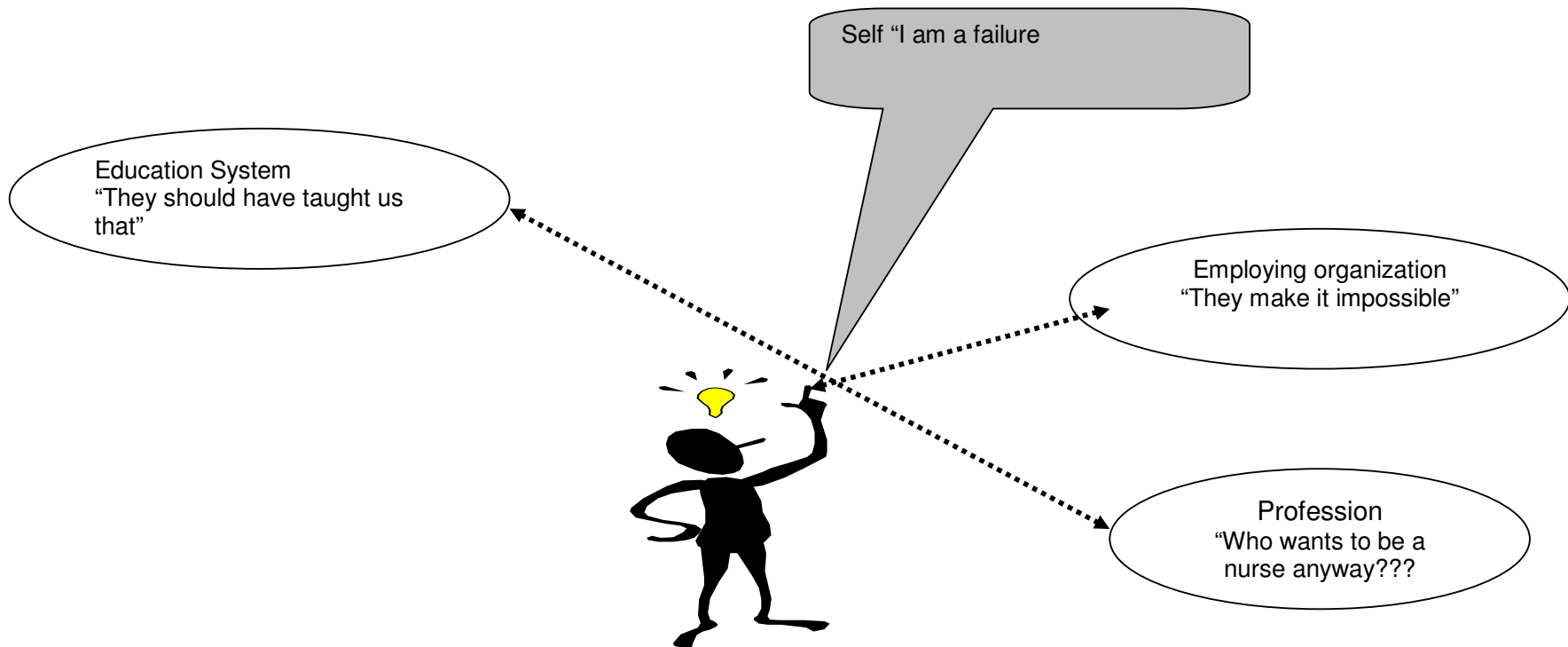
NNG may lack initially leadership attributes specifically in directing the work of others.

- Leadership aspect of the nursing role is addressed in the nursing curriculum, supporting theoretical knowledge but lacks the practical application.

NNG usually lacks a peer group, comparable to classmates in school, with which to compare and share experiences, perceptions and feelings.

- The belief that she/he is alone in feeling incompetent and confused may lead the NNG to experience a sense of isolation.
- Fatigue – normal in any new employment situation reduces the NNG's coping abilities and leaves little energy for social interactions.

Faced with all these problems, the nursing graduate may blame perceived inadequacies on:



The resulting disillusionment and frustration may cause the neophyte nurse to experience a delayed adjustment period to the role of staff nurse.

(MOH,FDON, Orientation Resource Package, Unknown, pp.28-30)

To avoid and minimize such negative experiences of the NNG, it is useful to introduce Kramer (1974) ‘Phases of Reality Shock’ Tab I, which the New Nurse Graduate may experience in her/his work setting.

Phase	Description
Honeymoon	NNG perceives work setting and co-workers through a positive perspective NNG focuses on developing skills and unit routines NNG becomes familiar with the organization and staff
Shock	NNG encounters obstacles and shortcomings in practice and among coworkers. NNG is faced with the way things should be (professional values) rather than the way things often are (reality values)
Recovery	“NNG is able to perceive the realities of the work setting with a more balanced view of negative and positive aspects. NNG gains a sense of perspective regarding expectations of real nursing practice”(Kramer, 1974 in Alspach, 1995, pp.206).
Resolution	“NNG resolves perceived conflict between school and work values, either by rejecting one set of values, or the other, or by integrating the positive aspects of each set of values into one set that is realistic for the work setting. The term biculturalism refers to this blending of school and work value systems ”(Kramer, 1974 in Alspach, 1995, pp.206).

(From Alspach, 1995, pp.206)

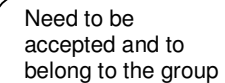
To effectively support the New Nurse Graduate in her/his orientation period, three areas should be considered, these include the following:

1. **Socialization**
2. **Development of role identity**
3. **Development of clinical practice skills**

1. Socialization

To enhance this process it is expected that one of the responsibilities for preceptors is the following:

- 1.1 Assist the New Nurse Graduate to feel welcome and accepted as a member of the unit, nursing staff member of the healthcare team and an employee of the health care organization.
- 1.2 Support and respect the NNG abilities, recognize their progress and enhance their self-confidence as a contributor to the healthcare team.
- 1.3 Foster an atmosphere of sociability and team work.
- 1.4 Introduce the NNG to the work group by explaining both formal and informal mechanisms of communication.
- 1.5 Promote the feeling of true sense of belonging among their peers.



Need to be accepted and to belong to the group

2. Development of Role Identity

The transition from the identity of the student to that of the staff nurse role depends on the successful passage of the NNG through the four phases of reality shock as described in Tab.1

If this transition in role identity is not effectively achieved, NNG may become disappointed with the reality of nursing.

The program therefore, acknowledges and responds to the special needs of the NNG for converting from the student to the staff nurse role identity, through the following but not limited to:

- 2.1 Effective application of this program
- 2.2 Educational activities in the form of training sessions and learning opportunities scheduled **some weeks to months** following the start of employment. The rationale for this delay is that the NNG will be able to relate to the concepts of reality shock and biculturalism more effectively when discussed in these activities.

3. Development of Clinical Practice Skills

Two major considerations need to be kept in mind in relation to the development of clinical practice skills in the NNG.

- 3.1 Focus on entry capabilities of the NNG.
- 3.2 Focus on the strategies used to develop these capabilities.

3.1. Entry capabilities

A variance exists in the entry capabilities of the NNG due to the following:

- 3.1.1 NNG with limited/basic nursing experience may be a graduate of one of the following nursing education programs: Diploma, Higher Diploma, or Baccalaureate degree.
- 3.1.2 These programs differ not only in their duration, but also in their curriculum and in the learning experiences provided to the NNG.
- 3.1.3 Due to these differences, graduates enter hospital setting with a wide divergence of clinical practice capabilities and significant differences in the clinical practice capabilities.

3.2 Strategies to develop clinical practice skills

Benner's novice to expert model provides a useful framework for understanding the ways in which the New Nurse Graduate acquires and develops clinical practice skills.

- 3.2.1 Validate that the NNG knows the rules and attributes that govern patient assignments and provide any instructions and reinforcement indicated.
- 3.2.2 Avoid reference to exceptions to rules until NNG understands and applies the general rules.
- 3.2.3 Assist NNG in formulating guidelines for practice that integrate as many aspects of patient care.

Example: Admission of a trauma patient

Guidelines:

- Patient Assessment
- Indications of any injuries
- Stabilize patient
- Anticipate family needs and support

3.2.4 When the opportunity arises: At the end of each orientation day spend at least few minutes with the NNG, to assist them to reflect on their experiences. This practice will enable the NNG to think about why certain actions were taken and identify ways in which performance could be improved.

3.2.5 Work with the NNG to develop capabilities to:

- Establish and readjust priorities of care as patient needs change

- Organize time and workload based on patient care priorities
- Modify rules and procedures when patient situations warrant
- Encourage holistic practice when managing patient and family care needs

3.2.6 Closely supervise NNG nursing care to ensure

- Important patient needs are being attended
- Priorities of care are recognized

3.2.7 Have realistic expectations of the NNG, such as the following:

- Early in the orientation, expect the NNG to be preoccupied with the details of their own assignment
- Expect the NNG practice to be more task-oriented than holistic
- Expect them to be slow and unsure of themselves
- Expect them to know only one way of doing things

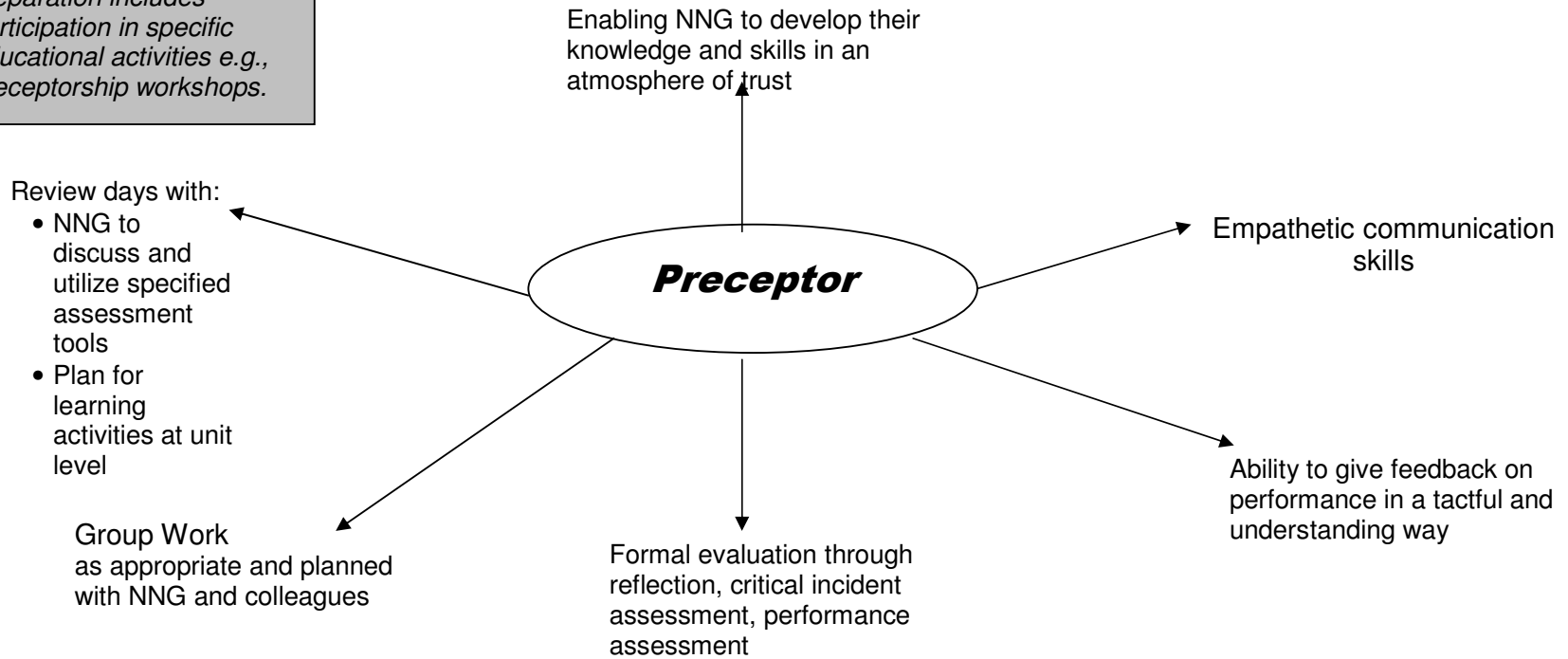
*"Come to the edge", he said
They said: "We are afraid".
"Come to the edge", he said.
They came.
He pushed them.....
And they flew!*

(Guillamme Appollinaire, unknown)

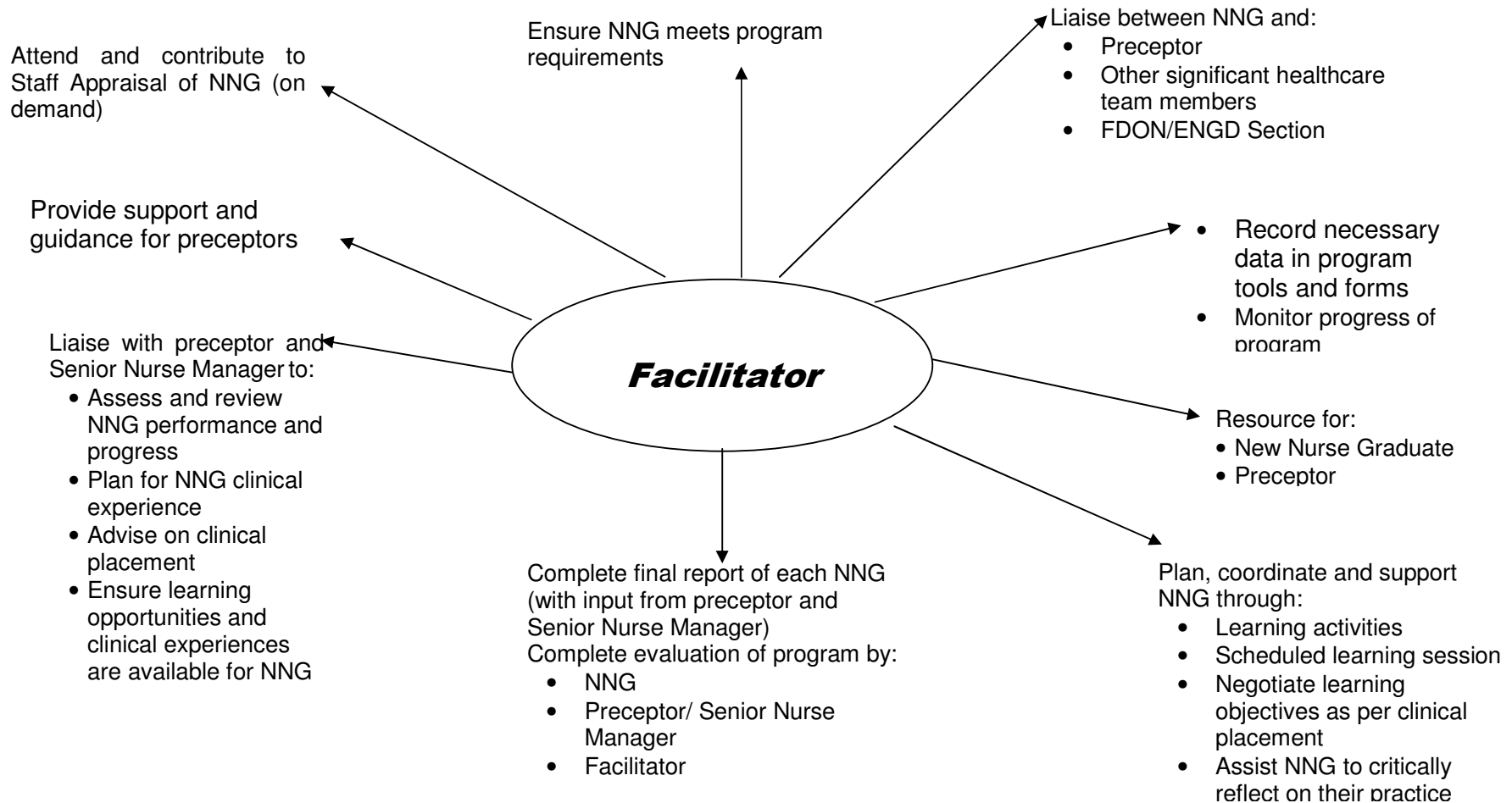
Enablers: Facilitator and Preceptors and significant others of the healthcare team.

Nursing staff willing to assume this role, require formal preparation and training at facility level. This preparation includes participation in specific educational activities e.g., preceptorship workshops.

Preceptor role and activities



Facilitator role and activities



Appendix I

My Clinical Handbook attached in separate file

Appendix II

Standards of the program, Form D

Form D

Evaluation Form for Facilitator/Preceptor

New Nurse Graduate Name: _____

STANDARD 1				
<i>The New Nurse Graduate demonstrates knowledge, skills, values and attitudes needed for safe and effective nursing practice.</i>				
Criteria	Met	Not Met	Evidence	Opportunities to Improve
1.1 Complies with written policies, procedures and guidelines	<input type="checkbox"/>	<input type="checkbox"/>		
1.2 Understands roles and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>		
1.3 Ensures correct technique and procedure is maintained and correct equipment is used	<input type="checkbox"/>	<input type="checkbox"/>		
1.4 Meets patient/client physical, psychological, emotional, spiritual and social needs within the holistic context	<input type="checkbox"/>	<input type="checkbox"/>		
1.5 Identifies own professional development needs by engaging in activities such as, reflection in and on practice	<input type="checkbox"/>	<input type="checkbox"/>		

STANDARD 2

The New Nurse Graduate demonstrates a systematic and holistic approach to patient/client care during her/his interactions with all clients, at all times.

Criteria	Met	Not Met	Evidence	Opportunities to Improve
2.1 Follows nursing process, applies equal emphasis to all steps: assessment/ planning/ implementation/and evaluation	<input type="checkbox"/>	<input type="checkbox"/>		
2.2 Integrates physical, social, emotional, cultural, psychological and religious/spiritual dimensions of care	<input type="checkbox"/>	<input type="checkbox"/>		
2.3 Client and their 'significant others' are participants in care	<input type="checkbox"/>	<input type="checkbox"/>		
2.4 Understands patient status and appropriate nursing care is carried out	<input type="checkbox"/>	<input type="checkbox"/>		

STANDARD 2 (cont'd)				
Criteria	Met	Not Met	Evidence	Opportunities to Improve
2.5 Real life examples/cases/scenarios are used to highlight priorities and work organization	<input type="checkbox"/>	<input type="checkbox"/>		
2.6 Documents and reports accurately on clients condition and care	<input type="checkbox"/>	<input type="checkbox"/>		
2.7 Acknowledges contribution of other health care providers and incorporates into nursing care management	<input type="checkbox"/>	<input type="checkbox"/>		
2.8 Contributes to health education of patients and significant others	<input type="checkbox"/>	<input type="checkbox"/>		

STANDARD 3

The New Nurse Graduate understands the importance of assuming responsibility for her/his professional development.

Criteria	Met	Not Met	Evidence	Opportunities to Improve
3.1 Utilizes learning opportunities to achieve formal (degree, diploma, etc.), non-formal (in-service), and/or informal (teachable moments) education	<input type="checkbox"/>	<input type="checkbox"/>		
3.2 Utilizes resources to further enhance practical knowledge and skills	<input type="checkbox"/>	<input type="checkbox"/>		
3.3 Seeks relevant opportunities to increase clinical experience	<input type="checkbox"/>	<input type="checkbox"/>		
3.4 Utilizes experiences as a basis for reflection and improvement	<input type="checkbox"/>	<input type="checkbox"/>		

STANDARD 4*The New Nurse Graduate supports the ethical practice of nursing.*

Criteria	Met	Not Met	Evidence	Opportunities to Improve
4.1 Practices in accordance with the Professional Code of Conduct, (MOH, 2001)	<input type="checkbox"/>	<input type="checkbox"/>		
4.2 Ensures confidentiality and security of written and verbal information acquired	<input type="checkbox"/>	<input type="checkbox"/>		
4.3 Understands and practices the principles of privacy, dignity and respect	<input type="checkbox"/>	<input type="checkbox"/>		
4.4 Delivers nursing practice in a fair way, acknowledging the differences in beliefs and culture practice of individuals and groups	<input type="checkbox"/>	<input type="checkbox"/>		
4.5 Reflects on the four basic moral values- beneficence, non-maleficence, honesty, and fairness in daily patient care	<input type="checkbox"/>	<input type="checkbox"/>		

Appendix III
General Orientation: Form A, Form B

Appendix IV

Guidelines to support the role of the FACILITATOR

Guidelines for assessing the NNG

Reflection on the NNG clinical practice development

Guidelines to support the role of the facilitator of the program

To facilitate structured and guided program for the NNG, which allows for reflection on and assessment of their professional development plan, there exists some common areas that are highlighted in this guide. The following may be used to stimulate, enhance and assist the NNG in his/her process to meet the set objectives of the program throughout their learning experience.

Objective 1

To enable the **New Nurse Graduate** to function optimally within practice by focusing first on her/his security and affiliative needs, such as belonging, feeling of comfort and acceptance.

Guidelines

To support the achievement of this objective it is suggested to provide for the following learning methods:

- Group discussions and guided reading. The facilitator can coordinate and lead these discussions, in consultation with the In-service coordinator
- Familiarizes the NNG with the common stages of transition and reality shock (Tab. I in program)
- Supports in identifying mechanisms and resources for coping with stress on the job
- Provides skills in interpreting the perspectives of other health personnel and determine behavioral approaches to arising challenges within actual practice setting
- Promotes the ability to function more effectively on evening and night shift
- Provides insight in appraisal of self and awareness for self improvement and professional development
- Assists in developing basic assertive techniques in communication
- Fosters practices within an ethical and legal framework of the nursing profession

Objective 2

To facilitate the identification, structuring and monitoring of clinical educational experiences that positively impact on attitude, knowledge and skills in the development of the NNG.

Guidelines

The NNG will identify her/his skills deficit; measure her/his progress by using the Clinical Skills Competency Tool (pls. Refer to Form C) and set her/his own objectives as part of the appraisal process.

NNG of previous years revealed the need for further development and support in specific practice areas listed below, but not limited to:

- Documentation of care
- IV therapy, cannulation and equipment
- Stoma care
- Care of the dying patient and understanding the bereavement process
- Caring of the dead body
- Chest tube management
- Medication by inhalation
- BLS of infant, child and adult
- Emergency cart and Code management
- Prioritizing patient care

Objective 3

To enable participants in developing interpersonal and self-management skills and in coping with immediate/demanding needs by utilizing, for example; reflection, feedback, guidance and professional support.

Guidelines

- Arrange for debriefing sessions
- Discuss outcome of activities reflective diary
- Review IPDP and adjust accordingly
- Provide for structured classroom discussion with the participation of peers
- Reflect on completion of program requirements

Objective 4

To enable the NNG to adapt to the role and function as a valuable and responsible team member within clinical practice.

Guidelines

- Assist in developing effective skills for organization of workload
- Assists in identifying strategies to become an accepted member of the unit
- Fosters group cohesiveness by using appropriate methods that assure the development and maintenance of effective communication

Guidelines for assessing New Nurse Graduate

Formative assessment of the NNG's is an integral part of the program and is carried out throughout the implementation phase.

Assessment includes the following:

- Reflection on the drafted Individual Professional Development Plan (**Form E**) at **1, 4** and **6** months
- Reflecting on hospital and unit orientation (**Form A and B**)
- Complete facility appraisal forms and the MOH facility yellow folder/personal history folder at **3** months
- Joint review of clinical skills competency tool (**Form C**)
- Joint review of application and outcome of the Standards of the program (**Form D**)
- Joint review of the reflective diary

Facilitator/Preceptor: Reflection on the NNG clinical practice development

On conclusion of the program, kindly provide feedback on the NNG by completing the following form.

New Nurse Graduate	
Name:	_____
Date of appointment:	_____
CS#:	_____ Facility/unit: _____ / _____
Date of commencement on the program:	_____
Date of completion:	_____

Reflecting on my clinical practice with the NNG, I have observed the following areas of **strength**:

Reflecting on my clinical practice with the NNG, I am **concerned** about the following:

Recommendation for further **professional development** and support:

Any further **comments** you would like to share with us,

We appreciate your input into this form

Appendix V
Evaluation Form

Evaluation Form I for the New Nurse Graduate

Dear New Nurse Graduate,

In order to improve the Professional Development Program, the Federal Department of Nursing is interested in your feedback. Please complete the following questions and return them to your Facilitator.

Kindly circle your closest response to the statements below

1. Throughout the program, I was able to reflect on my new experiences

Strongly Disagree Disagree Neutral Agree Strongly Agree

2. Simulated case studies/ examples were used by the preceptor / facilitator

Strongly Disagree Disagree Neutral Agree Strongly Agree

3. I was able to learn and practice holistic care throughout the program

Strongly Disagree Disagree Neutral Agree Strongly Agree

4. I was able to work as part of a multidisciplinary team throughout the program

Strongly Disagree Disagree Neutral Agree Strongly Agree

5. I was taught by the facilitator/ preceptor in both the classroom and at the bedside

Strongly Disagree Disagree Neutral Agree Strongly Agree

6. Resources were made available to me to use in developing my knowledge and skills

Strongly Disagree Disagree Neutral Agree Strongly Agree

7. I was able to seek opportunities to increase my clinical experience

Strongly Disagree Disagree Neutral Agree Strongly Agree

8. I was able to practice within the Code of Conduct guidelines

Strongly Disagree Disagree Neutral Agree Strongly Agree

Complete the following sentences

If I could improve the program for next year's group, I would

Overall, the program was

Thank you for completing this survey; your answers will assist us in improving the program for your colleagues.

Evaluation Form for the Facilitator/Preceptor

Dear Facilitator/Preceptor

*To facilitate continuous improvement of the program, the Federal Department of Nursing is interested in your feedback about the program as a whole. Please complete the following questions and return them to the **Federal Department of Nursing, MOH Dubai office, ENGD Section, P.O.Box:1853***

*You are not obliged to give out your name, but it would be helpful if **this information** were provided so that clarifications of answers to the questionnaire can be obtained if necessary.*

Name: _____

Dates of facilitation: From _____ To _____

Facility: _____ District: _____

1. **Program Content:** Please indicate the appropriate comment.

Topic/Section in the Program	Very Useful	Useful	Somewhat useful	Not Useful

2. Do you feel sufficient time was given to the NNG and your role as a preceptor to complete the requirements of the program?

No

Yes

If 'No' please explain below

3. What is your assessment of the format/content of the tool 'My Clinical Handbook' provided to support the learning experience of the NNG?

Very Good

Good

Fair

Not Applicable

Please indicate below ways of improving this tool

4. Do you feel any important areas/topics are missing in this program package?

If "yes" please explain/list below.

No Yes

5. Do you feel the revised program has achieved its goal in preparing the NNG to function in a safe and effective manner as a staff nurse on your assigned unit.

No Yes

If 'No', please explain briefly below.

6. Did you receive adequate support from your nurse manager and other nursing staff, while assuming the preceptor role?

No Yes

If 'No', please explain briefly below.

7. The responsibilities of the preceptor/facilitator role were fully understood.

No Yes

If 'No', please explain briefly below.

8. Facilitator/Preceptor Reflection

Kindly take a few minutes to reflect on any encountered challenges/difficulties while implementing the program.

9. Your recommendations/suggestions/critiques on improving modifying, changing specific elements of the program are welcome.

10. In general how do you rate your satisfaction with the quality of this program?

Very Good Good Fair Poor

Please elaborate briefly on the rating you have selected:

We appreciate your work and your feedback, which will assist us in continuously improving the program.

**Evaluation Form II for the New Nurse Graduate
Evaluation of Preceptor/Facilitator**

*We are interested in your objective feedback on this issue. Kindly complete the following questions. On completion return the form to the facilitator of the program.
Please note: Your name does not need to appear on this form.*

1. The Preceptor/Facilitator acted as a role model throughout the program through:

1.1 Demonstrating clinical procedures:

Strongly Disagree Disagree Neutral Agree Strongly Agree

1.2 Demonstrating collaboration with other nursing staff and health care team

Strongly Disagree Disagree Neutral Agree Strongly Agree

1.3 Demonstrating professional role of responsibilities (related to giving report, standard etc...)

Strongly Disagree Disagree Neutral Agree Strongly Agree

2 The preceptor/Facilitator assisted with the socialization process by

2.1 Introducing me to other staff

Strongly Disagree Disagree Neutral Agree Strongly Agree

2.2 Making me feel welcome, accepted

Strongly Disagree Disagree Neutral Agree Strongly Agree

2.3 Helping me to feel part of the health care team

Strongly Disagree Disagree Neutral Agree Strongly Agree

3.The preceptor/facilitator assisted me with the planning of learning experiences, as related to offered patient assignments and opportunities to function autonomously.

Strongly Disagree Disagree Neutral Agree Strongly Agree

4.The preceptor/ facilitator provided assistance with the reflective journal and the Individual Professional Development Plan

Strongly Disagree Disagree Neutral Agree Strongly Agree

5. Preceptor/facilitator was accessible and available when needed

Strongly Disagree Disagree Neutral Agree Strongly Agree

6. Preceptor/facilitator feedback was provided as appropriate

Strongly Disagree Disagree Neutral Agree Strongly Agree

7. Preceptor/facilitator provided assistance in completing all entries in the Clinical Skills Competency Tool

Strongly Disagree Disagree Neutral Agree Strongly Agree

Please provide any further comments you would like to share with us on improving the role of the preceptor/facilitator

We appreciate your feedback on this issue.

Appendix VI

Letter to the New Nurse Graduate

To: New Nurse Graduate
Subject: Professional Development Program for the New Nurse Graduate

Dear Graduate,

WELCOME

The Professional Development Program for the New Nurse Graduate has been developed specifically to support you in your transition from new graduate to professional nurse. The program is six (6) months in duration and provides an essential, structured and guided support in facilitating and socializing you toward the responsibilities of the position you have been assigned to.

Time will be devoted to classroom teaching, group discussions, guided readings, relevant suggested resources, scheduled meetings with your preceptor and facilitator, individual tuition and other methods of learning, which may vary from one facility to the other.

The assigned preceptor will work closely with you, assist you to feel welcomed and integrated into the unit and the team, identify your learning needs, and monitor your progress with the Head Nurse/Nurse Manager and/In-Charge and the program facilitator.

As you move through the phases of orientation, you will be able to use "My Clinical Handbook" as a tool to:

- Identify your own learning needs
- Demonstrate achievement of core competencies
- Develop your own individual professional development plan
- Work on your reflective diary to understand certain encountered events and reactions within your practice.

To continually improve the program, we ask you to complete two evaluation forms as related to the program and the preceptor and facilitator role.

Upon successful completion of the program, the Federal Department of Nursing, ENGD Section, issues certificates of achievement.

We would like to wish you good luck, a successful and safe journey throughout your nursing career.

Section Head, Emirati Nurse and New Graduate Development
Federal Department of Nursing

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