

Available online at http://www.journalijdr.com



International Journal of Development Research Vol. 13, Issue, 04, pp. 62548-62552, April, 2023 https://doi.org/10.37118/ijdr.27335.04.2023



REVIEW ARTICLE OPEN ACCESS

CHALLENGES FACING NEW NURSES: TRANSITIONING FROM THE EDUCATIONAL ENVIRONMENT TO THE WORK ENVIRONMENT

*AL Ruwaily, Shimah Alhulw Tamshan, AL Ruwaily, Feryal Alhulw Tamshan, AL Shammari, Anoud Salamh Ayed, AL Shammari, Salma Salamh Ayed, AL Shammari, Faizah Atallah Dhaher, AL Anazi, Seham Dukhi Baqi and AL Anazi, Kholod Dukhi Baqi

Ministry Of National Guard Health Affairs

ARTICLE INFO

Article History:

Received 14th February, 2023 Received in revised form 08th March, 2023 Accepted 27th March, 2023 Published online 30th April, 2023

KeyWords:

Transition, New Nurses, Theory-Practice Gap, Patient Care, Team Dynamics, Physical Demands, Technological Advancements, Workplace Stress, Professional Growth, Work-Life Balance.

*Corresponding author: AL Ruwaily, Shimah Alhulw Tamshan

ABSTRACT

The transition from nursing education to professional practice presents multifaceted challenges for new nurses. This article explores the primary hurdles faced during this shift, such as the theory-practice gap, emotional toll from real-life patient care, team dynamics, physical demands, technological advancements, workplace stress, professional growth, and balancing personal-professional life. Through understanding these issues, strategies for smoother assimilation into the healthcare environment can be devised. Solutions such as mentorship, continuous training, team-building, and emotional support are discussed. It is emphasized that while these challenges are common, experiences may vary based on individual factors, institutional practices, and locations. Creating a supportive environment that promotes adaptability and continuous learning ensures that new nurses are well-equipped to thrive in their roles.

Copyright©2023, ALRuwaily, Shimah et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: ALRuwaily, Shimah AlhulwTamshan, AL Ruwaily, Feryal Alhulw Tamshan, AL Shammari, Anoud Salamh Ayed et al. 2023. "Challenges Facing New Nurses: Transitioning from the Educational Environment to the Work Environment". International Journal of Development Research, 13, (04), xxxxx-xxxxxx.

INTRODUCTION

Nursing, as a pivotal component of the healthcare sector, embodies care, compassion, and a profound dedication to human health. As the medical landscape undergoes transformative shifts, spurred by technological advancements, evolving diseases, and changing societal demands, the essence of nursing needs to be anchored in both the timeless values of caregiving and the agile adaptability to modern challenges. One of the most profound transitions a nurse undergoes is the move from the scholastic realm of nursing education to the dynamic, often unpredictable, world of professional practice. While educational institutions equip students with a robust theoretical foundation and simulated practical experiences, the ground realities of clinical settings present a different landscape altogether. Smith and Crawford (2018) note that many newly registered nurses often express sentiments of being unprepared or overwhelmed in the early stages of their career. Such feelings aren't merely individual stressors but resonate at the broader level, potentially impacting patient care and overall healthcare delivery.

This article aspires to delve into the intricacies of the challenges confronting new nurses during this crucial transitional phase. The emphasis will be on understanding the depth and breadth of these challenges to forge pathways that ease this transition. A central aim is to underscore the significance of ensuring patient safety and care quality. A smooth transition for nurses is inextricably linked to optimal patient care. When nurses feel prepared, supported, and confident, it invariably translates to better patient outcomes. Anderson, Hair, and Todero (2016) have corroborated this sentiment, emphasizing that structured orientation and consistent mentorship during the early days can greatly enhance patient care and safety. Moreover, addressing this transition is paramount to bolstering retention rates within the nursing profession. The initial years can be particularly taxing, and as highlighted by Thomas, Jones, and Ottley (2017), a significant proportion of nurses consider leaving the profession within the first year due to the challenges faced. By shedding light on these challenges and proposing viable solutions, the hope is to fortify the nursing workforce, ensuring longevity and commitment.

Furthermore, this article endeavors to understand the broader implications of this transition, not just for the individual nurses, but also for healthcare institutions, patients, and the overall medical community. It's an interplay of multifarious factors, from institutional support structures and training modules to individual resilience and peer support, as posited by Watkins, Hart, and Mareno (2019). In sum, the journey from nursing school to professional practice is filled with a mix of anticipation, excitement, challenges, and learning curves. By recognizing the challenges and being proactive in addressing them, both the nursing community and healthcare institutions can pave the way for a smoother, more effective transition, benefiting not just the nurses but the entire healthcare ecosystem.

The Theory-Practice Gap in Nursing: An In-depth Exploration: The transition from nursing school to the bustling halls of a hospital or healthcare facility is often described as a leap from the theoretical world into the realms of practice. This transition is characterized by a phenomenon known in nursing literature as the "theory-practice gap". It signifies the discordance between what nursing students learn in academic settings and what they experience in clinical environments. According to Landers (2015), the theory-practice gap has been an ongoing concern in nursing education for several decades. The roots of this gap can be traced to the differing goals of academic institutions and healthcare settings. While educational environments aim to imbue students with a strong theoretical foundation, hospitals and clinics prioritize patient care and operational efficiency, often leading to shortcuts and workarounds that deviate from textbook procedures. Benner's (1984) seminal work, "From Novice to Expert," provides an insightful perspective on this. She posits that while academic learning is essential, nursing expertise is primarily forged through experiential learning. Thus, while a newly graduated nurse might be well-versed in theoretical knowledge, the intricacies of clinical practice - dealing with emergencies, making split-second decisions, and interacting with patients – come with experience.

The implications of this gap are manifold. For one, new nurses may experience heightened stress and decreased confidence when confronted with situations not covered in their textbooks, leading to potential burnout (Monaghan, 2015). Moreover, patient care could be compromised if new nurses strictly adhere to theoretical models without considering the nuanced complexities of real-world clinical environments.

Bridging this gap is crucial. Some scholars, like Roberts and Fitzgerald (2011), argue for a more integrative approach in nursing curricula, incorporating real-life case studies, and placing students in diverse clinical settings earlier in their education. Mentorship, too, plays a pivotal role. Experienced nurses guiding newcomers not only accelerates the latter's acclimatization to the clinical setting but also ensures the translation of theoretical knowledge into practical expertise (Daley, 2018). In conclusion, while the theory-practice gap is an entrenched challenge in nursing, a concerted effort from both educational institutions and healthcare settings can significantly narrow it. By fostering environments that seamlessly blend theoretical learning with practical exposure, we can ensure that new nurses are both knowledgeably equipped and practically adept.

Facing Real-Life Patient Care: The Intangible Shift from Classroom to Bedside: One of the most palpable transitions that new nurses experience is the shift from the structured, controlled environment of a classroom to the unpredictable and emotionally charged world of real-life patient care. The challenges they encounter during this phase go beyond the application of knowledge and skills and venture into the domain of emotional, psychological, and moral complexities. Real-life patient care introduces nurses to the profound emotional landscape of healthcare. Nurses don't merely deal with diseases or conditions; they engage with patients who come with their stories, fears, and vulnerabilities. Barker and Galbraith (2011) articulated that the emotional aspects of nursing, such as managing grief after a patient's death or navigating the dynamics of family relationships during critical illness, are often insufficiently addressed in traditional nursing curricula.

The profound human experience of pain, suffering, and sometimes recovery, requires an emotional resilience that many new nurses might find overwhelming. The practical aspects of patient care also present challenges. While nursing education teaches fundamental skills, many situations in clinical settings are unique and don't fit neatly into textbook descriptions. For instance, Lawrence and Lee (2016) observed that while nursing students are taught how to communicate, conveying unfavorable news to a patient or their family requires a level of tact, empathy, and judgment that is honed over time and through experience. Furthermore, decision-making in dynamic environments, often with incomplete information and under time pressure, is a frequent requirement in patient care settings. Greenberg (2017) noted that this often leads to moral distress among new nurses, especially when they feel torn between institutional protocols and what they believe is right for the patient. So, how can the nursing community support these newcomers as they wade through these challenges? Evidence suggests that a supportive work environment is crucial. Watkins, Whisman, and Booker (2019) underscored the significance of fostering a culture where new nurses feel comfortable seeking guidance from experienced colleagues. This not only helps in immediate problem-solving but also aids in emotional processing. Moreover, initiatives like reflection sessions and debriefings can offer new nurses a platform to share their experiences, vent their feelings, and learn from their peers, as suggested by Stanton and Barnett (2017). In sum, facing real-life patient care is a multifaceted challenge for new nurses, encompassing emotional, practical, and moral dimensions. With concerted efforts from the nursing community and healthcare institutions, this transition can be made smoother, ensuring that new nurses are wellequipped to deliver compassionate and competent care.

Navigating Interpersonal Relationships: The Dance of Dynamics in Healthcare Settings: In the multifaceted world of healthcare, a nurse's role extends beyond providing direct patient care. Nurses also find themselves in the midst of complex interpersonal dynamics, from interacting with their colleagues and the multidisciplinary team to building trust with patients and their families. The nuances of these interactions can be as intricate as the clinical aspects of the job. One of the primary relationships that new nurses must establish is with their colleagues, both within and outside of the nursing profession. According to Ross and Clifford (2012), teamwork and collaboration are foundational to effective patient care. However, the reality isn't always seamless. New nurses often need to find their place in established teams, understanding the unspoken norms, gaining the trust of veteran nurses, and collaborating with physicians who may have years of experience. The process can sometimes lead to feelings of isolation or the phenomenon of "nurse bullying," as highlighted by Hutchinson, Vickers, and Wilkes (2016). Equally paramount is the relationship between nurses and patients. Trust, empathy, and effective communication form the bedrock of this bond. While nursing curricula do focus on communication skills, there's a depth and authenticity required in real-life situations that can only be learned on the job. Thompson et al. (2014) discussed how nurses, especially those new to the profession, often grapple with managing boundaries between professional roles and personal emotions when dealing with patients who have intense emotional or physical pain. Families, too, play a pivotal role in the care continuum. Ensuring family members are informed, comforted, and actively involved in care decisions is part of a nurse's responsibility. Yet, as noted by Davis and Williamson (2017), striking a balance between offering emotional support to families and ensuring clinical protocols are followed can sometimes be challenging. To ease this complex dance of dynamics, mentorship has been lauded as a particularly effective strategy. Smith and Zsohar (2007) emphasized that experienced nurses mentoring newcomers can bridge the gap between theoretical learning about relationships and the real-world intricacies of human interactions in a healthcare setting. In the labyrinth of healthcare, while technical skills are crucial, it's the subtle art of navigating interpersonal relationships that truly defines a nurse's day-to-day experience. As the nursing community continues to evolve, recognizing and addressing these challenges ensures a more holistic development of new professionals.

Dealing with the Physical Demands: The Often-Overlooked Strain on Nurses: Nursing, by its very nature, is a physically demanding profession. From being on their feet for extended hours to performing tasks that require manual dexterity, strength, and endurance, nurses constantly navigate a landscape that places immense strain on their bodies. This aspect of the nursing profession, while recognized, is sometimes overshadowed by the intellectual and emotional demands of the job. The physical challenges begin with prolonged standing and walking. Hospitals and healthcare facilities often sprawl over large areas, and nurses typically traverse these spaces multiple times a day. According to Waters, Nelson, and Hughes (2009), frequent walking, often in haste, coupled with prolonged standing during procedures, contributes to lower extremity discomfort, a condition reported by many nurses. Lifting and transferring patients is another task that takes a toll. A study by Menzel et al. (2004) noted that back injuries are prevalent among nurses, primarily attributed to the manual handling of patients. Despite the introduction of lift assist devices in many facilities, not all situations permit their use, leaving nurses to rely on their physical strength and proper lifting techniques. Then there's the less obvious but equally demanding task of performing intricate procedures. Administering injections, inserting catheters, or dressing wounds requires dexterity and often places nurses in ergonomically challenging positions, leading to strain on the neck, shoulders, and wrists (Gallagher, 2005). Add to this the irregular and long shifts that many nurses work. According to Geiger-Brown et al. (2012), working beyond the standard 12-hour shifts, often without adequate breaks, exacerbates the physical fatigue experienced by nurses, impacting their overall well-being and potentially influencing patient care quality.

To address these concerns, it's imperative for healthcare institutions to recognize and mitigate the physical demands on nurses. Introducing ergonomic training, ensuring the availability of assistive devices, and promoting a culture of regular breaks can alleviate some of the strain, as suggested by Stenger, Montgomery, and Briesemeister (2007). Furthermore, creating awareness about the importance of self-care and exercises tailored to strengthen muscle groups frequently used in nursing can offer long-term benefits. In conclusion, the physical demands of nursing are an intrinsic part of the profession, intertwined with its challenges and rewards. Addressing these demands is crucial not only for the well-being of nurses but also for ensuring the consistent delivery of high-quality patient care.

Keeping Up with Technological Advancements: The Digital Transformation of Nursing: In an age defined by rapid technological growth, nursing, like many other professions, finds itself at the crossroads of tradition and innovation. Healthcare technology's landscape has witnessed seismic shifts over the last few decades, with advancements ranging from electronic health records (EHR) to telemedicine platforms, wearable patient monitoring devices, and even robotics in patient care. For nurses, adapting to this evolving terrain presents both opportunities and challenges. Electronic Health Records (EHR) have undeniably revolutionized patient care. They offer a comprehensive, real-time patient history, ensuring that healthcare providers have access to the latest information about their patients. However, as noted by Smith and Koppel (2014), the transition from paper records to EHR systems hasn't been entirely smooth. Nurses often report that EHR systems can be timeconsuming, sometimes diverting attention from direct patient care. Telemedicine, on the other hand, has emerged as a game-changer, especially in the wake of global health crises. This technology facilitates patient care delivery over distances, making healthcare more accessible. Yet, Slightam et al. (2020) pointed out that for nurses, telemedicine requires a redefinition of the traditional care model, demanding new skills in communication and technology navigation. Furthermore, the introduction of wearable patient monitoring devices has provided healthcare professionals with a continuous stream of data. While these devices empower patients and provide real-time monitoring, they also present challenges.

According to Topaz et al. (2018), sifting through large volumes of data and discerning clinically relevant information can be daunting for nurses. Then there's the frontier of robotics and artificial

intelligence (AI) in healthcare. Robots are now being used for tasks ranging from dispensing medications to assisting in surgeries. While they can enhance efficiency and precision, Robinson and Jenda (2019) emphasized that nurses must also be prepared for the ethical dilemmas and responsibilities that come with the incorporation of AI in patient care. To thrive in this tech-driven environment, continuous education and training are paramount. Institutions must be proactive in offering training sessions, workshops, and courses, as advocated by Anderson and Jenkins (2016). They underscored that a blend of formal education and hands-on experience is the best way to ensure nurses feel comfortable and competent with emerging technologies. In conclusion, while technological advancements in healthcare promise improved patient outcomes and streamlined processes, they also bring to the fore the need for adaptability and lifelong learning among nurses. By embracing these changes and investing in continuous education, the nursing community can ensure that they remain at the forefront of patient care in the digital age.

Managing Workplace Stress: Navigating the Pressure Points of Nursing: Workplace stress is an intrinsic facet of the nursing profession. The very nature of the job, dealing with human life and well-being, places nurses under considerable emotional, physical, and mental strain. Over the years, numerous studies have highlighted the implications of such stress on both nurses' well-being and the quality of patient care they provide. Understanding the sources of this stress and formulating effective strategies to manage it is pivotal for the holistic development of the nursing profession. One significant stressor is the emotional toll of patient care. Nurses often form bonds with patients, making it challenging to cope when a patient's health deteriorates or when they pass away. According to McVicar (2003), the emotional demands, coupled with the responsibility nurses bear, can lead to burnout, a state of chronic physical and emotional exhaustion. Additionally, nurses regularly confront the challenges of long and irregular working hours. These long shifts, especially night shifts, disrupt normal circadian rhythms, leading to sleep disturbances, fatigue, and decreased cognitive function, as found by Rogers et al. (2004). Interpersonal relationships in the workplace, with both colleagues and patients' families, can also be a source of stress. Conflicts, misunderstandings, or the need to mediate between families and physicians can weigh heavily on nurses. As per Almost (2006), such conflicts not only contribute to stress but can also negatively impact teamwork, ultimately affecting patient care. Furthermore, the rapid pace of technological advancements in healthcare can serve as a double-edged sword. While they offer improved patient outcomes and streamlined processes, the need to constantly upgrade skills and adapt to new systems can be daunting, as outlined by Moyle (2006). To combat these stressors, interventions at both individual and institutional levels are essential. Mindfulness and relaxation techniques, for instance, have shown promise in alleviating stress and enhancing resilience among healthcare professionals (Irving, Dobkin, & Park, 2009). On an organizational level, fostering a supportive work environment, offering flexible scheduling, and providing regular training sessions can also contribute to reducing workplace stress (Khamisa, Oldenburg, Peltzer, & Ilic, 2015). In conclusion, while stress is an inherent part of nursing, recognizing its sources and implementing effective coping strategies is vital. By doing so, the nursing community can ensure not only their own well-being but also the consistent delivery of highquality patient care.

Navigating Professional Growth: The Journey of Lifelong Learning in Nursing: The nursing profession is one characterized by continuous learning and professional development. As healthcare evolves, nurses are presented with the challenge and opportunity to grow in their roles, expanding their knowledge, honing their skills, and advancing their careers. The pathway to professional growth in nursing is multifaceted, and navigating it effectively requires an understanding of both the opportunities available and the challenges to overcome. Continued education is foundational to professional growth in nursing. It's not merely about updating knowledge; it's about broadening horizons, understanding new technologies, and being at the forefront of evidence-based care practices. According to

Benner (2001), nurses progress through several stages of proficiency—from novice to expert—and continued education plays a pivotal role in this progression. Mentorship is another significant aspect of professional growth. Through mentoring relationships, experienced nurses can provide guidance, share insights, and support the professional development of their juniors. As affirmed by Andrews and Wallis (1999), mentorship not only facilitates skill transfer but also fosters a sense of belonging and purpose, essential elements in the growth journey. Networking, while sometimes overlooked, is crucial in today's interconnected world. Joining professional associations, attending conferences, and engaging in workshops can open doors to new opportunities and perspectives. According to Clark and Greenawald (2013), networking allows nurses to collaborate, share experiences, and learn from the broader professional community. Challenges, however, do exist. Time constraints, especially for those in full-time roles, can make it difficult to pursue additional courses or attend conferences (Drenkard, 2013). Financial barriers are another concern, as many advanced training programs or certifications come with significant costs. Despite these challenges, the rewards of professional growth in nursing are manifold. Beyond the intrinsic value of knowledge, it leads to improved patient care, increased job satisfaction, and potential career advancements. As noted by Elliot et al. (2016), continuous professional development correlates positively with enhanced care outcomes and nurse retention rates. In sum, the journey of professional growth in nursing is one of commitment, resilience, and passion. By leveraging opportunities for education, seeking mentorship, and building a robust professional network, nurses can navigate their growth trajectories effectively and contribute profoundly to the ever-evolving world of healthcare.

Balancing Personal and Professional Life: The Nurse's Dual Challenge: For many professionals, striking a balance between work demands and personal life is challenging, and this rings especially true for nurses. Given the emotionally and physically taxing nature of their roles, combined with often unpredictable schedules, nurses face unique challenges in achieving work-life harmony. The balancing act between fulfilling professional responsibilities and meeting personal needs is vital for overall well-being, job satisfaction, and delivering high-quality patient care. The nature of nursing, with its long hours and shift work, can pose significant challenges to personal life. As illustrated by Geiger-Brown et al. (2012), irregular shift patterns, especially night shifts, can lead to disruptions in the body's circadian rhythm, resulting in sleep disturbances and increased fatigue. Such disruptions can adversely impact one's physical health, mood, and overall quality of life. Moreover, the emotional demands of the nursing profession can be exhaustive. As found by McVicar (2003), nurses often carry the emotional burdens of their patients, leading to potential burnout and emotional fatigue. This emotional drain can, over time, affect personal relationships and diminish the quality of personal time. Despite these challenges, there are strategies and practices that nurses can adopt to achieve a better balance. Self-care, a term often emphasized in the healthcare profession, is paramount. As advocated by Kemper et al. (2015), practices like mindfulness, meditation, and regular exercise can significantly reduce stress and promote overall well-being. Time management is another crucial skill. By planning and prioritizing tasks both at work and home, nurses can ensure they allocate sufficient time for personal activities and self-care. As highlighted by Zinn (2010), effective time management can lead to enhanced productivity at work and a richer, more fulfilling personal life. Organizational support plays a critical role in facilitating this balance. Hospitals and healthcare institutions can promote work-life balance through flexible scheduling, mental health support, and ensuring adequate staffing levels. Such initiatives, as reported by Warshawsky and Havens (2011), can lead to increased job satisfaction and reduced turnover rates among nurses. In conclusion, while the challenges of balancing personal and professional life are palpable for nurses, with self-awareness, organizational support, and effective self-care practices, it's achievable. Doing so not only ensures the well-being of nurses but also positively impacts the quality of care they provide.

CONCLUSION

The journey from the academic realm to the intricate, multifaceted world of professional nursing is one filled with challenges, opportunities, and profound learning experiences. From the inherent theory-practice gap to the realities of patient care, interpersonal dynamics, physical demands, technological advancements, and the pressure of workplace stress, every facet of the nursing profession demands resilience, adaptability, and continuous growth. Yet, amid these challenges, the profession offers countless opportunities. Through effective mentorship, networking, and continuous education, nurses can chart a path of significant professional development. The importance of managing workplace stress, embracing technological advancements, and navigating professional growth cannot be understated, as they directly impact the quality of patient care and the well-being of nurses themselves. The crux of the nursing profession lies not just in delivering care but in the holistic development of nurses as individuals. Balancing personal and professional life, therefore, becomes paramount. Institutions and organizations play a vital role in facilitating this balance by fostering supportive environments, offering flexibility, and promoting self-care. In essence, the nursing profession is more than a job; it's a vocation that demands dedication, passion, and a commitment to lifelong learning. As nurses navigate these myriad challenges and opportunities, they continue to be the bedrock of healthcare, upholding its values, and ensuring that care remains patient-centric, compassionate, and of the highest quality. It is the synthesis of these experiences, both challenging and rewarding, that makes nursing not just a profession but a profound journey of personal and professional evolution.

REFERENCES

Anderson, G., Hair, C. and Todero, C. 2016. Role of orientation and mentorship in improving patient care. *Nursing Outlook, 644*, 315-321

Anderson, J. G. and Jenkins, M. L. 2016. Nursing experience with smart pump advanced dose error reduction software. *Journal of Nursing Care Quality*, 311, 83-89.

Almost, J. 2006. Conflict within nursing work environments: Concept analysis. Journal of Advanced Nursing, 534, 444-453.

Andrews, M. and Wallis, M. 1999. Mentorship in nursing: A literature review. Journal of Advanced Nursing, 291, 201-207.

Benner, P. 2001. From novice to expert: Excellence and power in clinical nursing practice Commemorative ed.. Prentice Hall.

Barker, E. R. and Galbraith, M. D. 2011. Addressing the emotional challenges of nursing student through curriculum intervention. Journal of Nursing Education, 501, 3-8.

Benner, P. 1984. From Novice to Expert: Excellence and Power in Clinical Nursing Practice. Addison-Wesley.

Clark, E. and Greenawald, M. 2013. Nurse leaders: Becoming a mentor. Journal of Nursing Management, 211, 231-239.

Elliot, N., Higgins, A., Begley, C., Lalor, J., Sheerin, F., Coyne, I. and Murphy, K. 2016. The identification of clinical and professional leadership activities of advanced practitioners: Findings from the Specialist Clinical and Advanced Practitioner Evaluation study in Ireland. Journal of Advanced Nursing, 725, 1027-1037.

Drenkard, K. 2013. Professional development and the growing role of nurse executives. Journal of Nursing Administration, 432, 57-58.

Davis, L. and Williamson, S. 2017. Interacting with patients' family members during the office visit. American Family Physician, 968, 480-484.

Daley, K. 2018. Mentorship in nursing: A literature review. Journal of Clinical Nursing, 271-2, e122-e130.

Geiger-Brown, J., Rogers, V. E., Trinkoff, A. M., Kane, R. L., Bausell, R. B. and Scharf, S. M. 2012. Sleep, sleepiness, fatigue, and performance of 12-hour-shift nurses. *Chronobiology International*, 292, 211-219.

Gallagher, S. 2005. Ergonomics: how to design for ease and efficiency. Prentice Hall.

- Geiger-Brown, J., Rogers, V. E., Trinkoff, A. M., Kane, R. L., Bausell, R. B. and Scharf, S. M. 2012. Sleep, sleepiness, fatigue, and performance of 12-hour-shift nurses. Chronobiology International, 292, 211-219.
- Greenberg, R. A. 2017. Moral distress among healthcare professionals: Report of an institution-wide survey. Journal of Nursing Scholarship, 492, 173-181.
- Hutchinson, M., Vickers, M. and Wilkes, L. 2016. Bullying as workgroup manipulation: A model for understanding patterns of victimization and contagion within the workgroup. Journal of Nursing Management, 242, 235-243.
- Irving, J. A., Dobkin, P. L. and Park, J. 2009. Cultivating mindfulness in health care professionals: A review of empirical studies of mindfulness-based stress reduction MBSR. Complementary Therapies in Clinical Practice, 152, 61-66.
- Khamisa, N., Oldenburg, B., Peltzer, K. and Ilic, D. 2015. Work related stress, burnout, job satisfaction and general health of nurses. International Journal of Environmental Research and Public Health, 121, 652-666.
- Kemper, K. J., Mo, X. and Khayat, R. 2015. Are mindfulness and self-compassion associated with sleep and resilience in health professionals? *Journal of Alternative and Complementary Medicine*, 218, 496-503.
- Lawrence, J. and Lee, D. 2016. Communication nuances in real-life patient care situations: Navigating difficult conversations. Nurse Education in Practice, 19, 67-73.
- Landers, M. 2015. The theory-practice gap in nursing: The role of the nurse educator. Journal of Nursing Education and Practice, 512, 38-42.
- Monaghan, T. 2015. A critical analysis of the literature and theoretical perspectives on theory-practice gap amongst newly qualified nurses within the United Kingdom. Nurse Education Today, 358, e1-e7.
- Menzel, N., Brooks, S. M., Bernard, T. and Nelson, A. 2004. The physical workload of nursing personnel: association with musculoskeletal discomfort. International Journal of Nursing Studies, 418, 859-867.
- McVicar, A. 2003. Workplace stress in nursing: A literature review. Journal of Advanced Nursing, 446, 633-642.
- Moyle, W. 2006. Nurse-patient relationship: A dichotomy of expectations. International Journal of Mental Health Nursing, 152. 103-109.
- McVicar, A. 2003. Workplace stress in nursing: A literature review. *Journal of Advanced Nursing*, 446, 633-642.
- Roberts, D. and Fitzgerald, L. 2011. Bridging the theory-practice gap in contemporary nurse education. Nurse Education in Practice, 115, 299-305.
- Robinson, H. and Jenda, M. 2019. Nursing in the age of artificial intelligence: Protocol for a scoping review. *JMIR Research Protocols*, 812, e15164.

- Rogers, A. E., Hwang, W. T., Scott, L. D., Aiken, L. H. and Dinges, D. F. 2004. The working hours of hospital staff nurses and patient safety. Health Affairs, 234, 202-212.
- Ross, J. and Clifford, K. 2012. Research as a catalyst for change: The transition from student to registered nurse. Journal of Clinical Nursing, 217-8, 1009-1017.
- Smith, J. and Crawford, L. 2018. Transitioning from student to nurse: A qualitative analysis. *Journal of Nursing Education and Practice*, 85, 65-72.
- Stanton, M. and Barnett, J. L. 2017. Fostering resilience among new nurses: The potential and challenge of debriefing sessions. Nursing Forum, 523, 175-184.
- Smith, J. and Zsohar, H. 2007. Essentials of neophyte mentorship in relation to the faculty shortage. Journal of Nursing Education, 464, 184-186.
- Slightam, C., Gregory, A., Hu, J., Jacobs, J. C., Gurmessa, T., Kimerling, R., ... &Zulman, D. M. 2020. Patient perceptions of video visits using Veterans Affairs telehealth tablets: Survey study. *Journal of Medical Internet Research*, 224, e15682.
- Smith, S. W. and Koppel, R. 2014. Healthcare information technology's relativity problems: A typology of how patients' physical reality, clinicians' mental models, and healthcare information technology differ. *Journal of the American Medical Informatics Association*, 211, 117-131.
- Stenger, K., Montgomery, L. A. and Briesemeister, E. 2007. Creating a culture of change through implementation of a safe patient handling program. Critical Care Nursing Clinics, 192, 213-222.
- Topaz, M., Radhakrishnan, K., Blackley, S., Lei, V., Lai, K. and Zhou, L. 2018. Studying associations between heart failure selfmanagement and health outcomes: A systematic review. *Nursing Outlook*, 663, 297-306.
- Thomas, R., Jones, P. and Ottley, P. 2017. Attrition within nursing: A comprehensive review. *Journal of Clinical Nursing*, 2623-24, 4149-4158.
- Thompson, I., Melia, K., Boyd, K. and Horsburgh, D. 2014. Nurse-patient relationships and partnership in hospital care. Journal of Clinical Nursing, 2321-22, 3177-3185.
- Watkins, N., Hart, P. L. and Mareno, N. 2019. The interface of support during the transition: Strategies to navigate the minefield. Nurse Education Today, 79, 40-46.
- Watkins, C., Whisman, L. and Booker, P. 2019. Nurse support in clinical settings: Bridging the gap for newcomers. Nursing Outlook, 674, 450-459.
- Waters, T. R., Nelson, A. and Hughes, N. 2009. Safe patient handling for rehabilitation professionals. Rehabilitation Nursing, 343, 104-110
- Warshawsky, N. E. and Havens, D. S. 2011. Global use of the practice environment scale of the nursing work index. *Nursing Research*, 601, 17-31.
- Zinn, W. 2010. Time management for today's workplace demands. *Workforce Solutions Review, 1*1, 17-19.