Cultivate New Sprouts



2021-2023 New Nurses Clinical Adaptation and Counseling Experience during the COVID-19 Epidemic Period





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When the outbreak of COVID-19 epidemic happened at the end of 2019, the school had to revise clinical internship online training programs to support the policy of epidemic prevention policy. All the nursing instructors agreed that clinical internship is the last step before joining the workforce at the hospital. For those who missed the in-person internship at the hospital, what kind of influences or impacts were felt by

Basic Statistics

Gender	Number of People	
Female	1,029	92.5
Male	84	7.5
Total	1,113	100.0
Department	Number of People	%
Internal Medicine	181	16.3
Surgery	148	13.3
Pediatrics	34	3.1
Obstetrics & Gynecology	46	4.1
Intensive Care & ER	197	17.7
Functional Unit	26	2.3
Kidney Dialysis	45	4.0
Operating Room	82	7.4
Outpatient Clinic	202	18.1
Palliative Care	26	2.3
Administration	22	2.0
Psychiatry	35	3.2
Others	69	6.2
Total	1,113	100.0
Years worked in the hospital	Number of People	%
under 1	132	11.9
1.1~2	114	10.3
2.1~3	87	7.8
3.1~5	133	11.9
above 5	647	58.1
	1,113	100.0

those new nurses who didn't experience the clinical internship training and by those who were supposed to train the nurses?

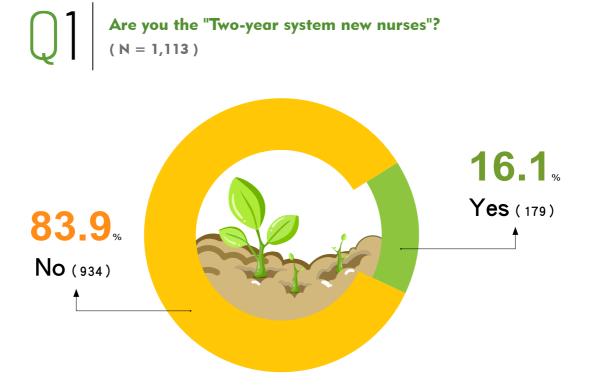
During the most chaotic and serious period of the global COVID-19 epidemic, an emergency doctor in New York (USA) committed suicide because of unbearable pressure. The front-line defenders taking care of COVID-19 patients were also very cautious and constantly faced the risk of death until a vaccine was available to improve protection and counter the impact of the disease. The nursing profession is high risk. It affects new graduates, in particular, who didn't go through the real clinical nursing students. Some parents wouldn't recommend that their children go into nursing, resulting in a shortage of nurses.

During this period, Dalin Tzu Chi Hospital was responsible for surveying the eight hospitals to find out the impact on new nurses. We hoped to provide better working conditions, retain more nursing personnel, and improve the learning environment to support nurses and provide quality nursing services and professional development.

We used Bing Chat to search for and discuss "post-pandemic era", to give us insights into a new normal after COVID-19 that continues to affect people's lives, work, production, country, and the entire world. The post-pandemic era does not

Age	Number of People	%
under 20	9	0.8
21~25	239	21.5
26~30	243	21.8
31~35	148	13.3
36~40	126	11.3
above 40	348	31.3
Total	1,113	100.0
Job Title	Number of People	%
Job Title Registered nurse	Number of People 835	% 75.0
Registered nurse	835	75.0
Registered nurse Deputy head nurse	835 49	75.0 4.4
Registered nurse Deputy head nurse Head nurse	835 49 56	75.0 4.4 5.0
Registered nurse Deputy head nurse Head nurse Supervisor and above	835 49 56 20	75.0 4.4 5.0 1.8





mean we experience zero COVID; it means we live with the virus and try to live a normal life after an infection. We are in an era of digitization, deglobalization, sustainable development, and government transformation. We need to adapt to a changing world, with risks, markets diversification, environment protection emphasis and an increase in localization and automation. The epidemic reveals how important the nursing field is.

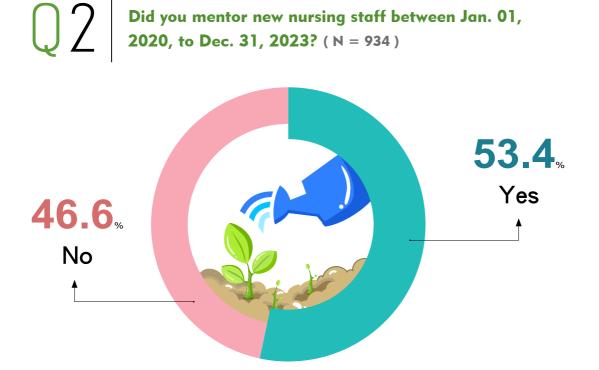
More than Half of Nurses Taking Clinical Tasks and Coaching the Newcomers

The survey has two parts, "Two-year system new nurses" (meaning new staff with clinical experiences under two years) and "Non Two-year system new nurses" (meaning with clinical experiences over two years), to differentiate the answers between these two groups.

First, we want to understand their feelings from 2020 to 2023 (the "epidemic period"). Only 16.1% from the "Two years new nurses". And there are 53.4% of the non-new nurses had experiences nurturing the new nurses.

When asked about the difficulties encountered in the clinical nursing training, 65.9% (under two years) and 73.4% (over two years) agreed that sometimes "Don't know how to take care of the clinical nursing problems". For the "over two years" group, 70.7% agreed they "perceived as don't know how to operate or not familiar with the technology" and 65% "feel stressed during the shift changes". For the "under two years" group, their responses to the last two questions were the same, at 63.7%.

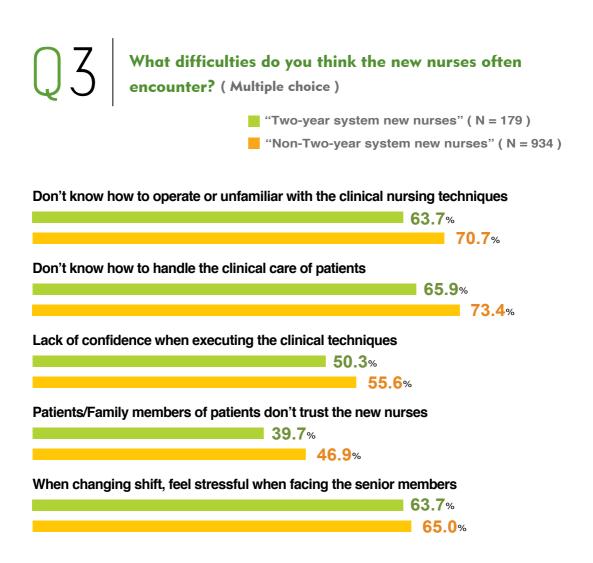
This shows that newcomers or skilled nurses have the same reaction to new circumstances. Although they learned a great deal of nursing knowledge from school, they encountered many unfamiliar situations in the actual workplace. Especially when facing life and death situations, the front line nurses felt pressure and fear. Shiao Chiu shared her experiences. When she first started in the nursing profession, and when facing an unfamiliar situation, the clinical counselor always reminded her to ask senior nursing staff or a doctor, and to not be shy on asking questions. Because of that advice, Shiao Chiu learned a lot by asking questions. This was a precious learning experience!





One-on-one Clinical Training Is Most Effective

Facing the post-epidemic era, nurses felt that to help the newcomers adjust to the profession, the hospital should provide more useful resources. For those who have more than two years' experience, 69.1% thought it should be one-on-one training. 54.2% felt senior nurses should provide more care and companionship and 47.2% felt the newcomers should be dining together. For those who have less than two years' experience, the survey results showed the following order: one-on-one training 60.3%, dining together 54.2% and senior nurses provide care and companionship 50.3%. The consensus was to provide one-on-one training so that



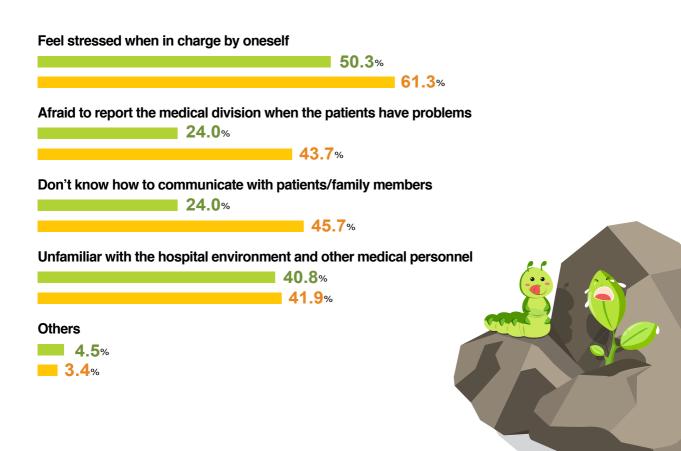
the experienced nurses could facilitate newcomers' learning.

Therefore, the responsible unit will arrange one considerate and compassionate senior staff member to help and support a newcomer's break-in. All the newcomers must have this opportunity. The senior staff member can be a mentor and role model and accompany the newcomer during their first three-month probation period.

The Newcomers Build Strength, and Help Encourage Each Other during Hardship

The survey revealed some interesting selections. Many of those who had less than two years' experience felt that "Dining together with peers" was very helpful. This survey item showed a variation in responses between junior and non-junior nurses.

The newer nursing staff will be assigned to a desired unit according to their interest or according to their previous internship experience, thus they would meet different people from different units. Because of their transition from students to the professional arena, their emphasis will focus on the clinical tasks and they will feel a kinship with their patients and with their mentors.





Because of the epidemic, many new nurses were affected by the internship experience. The online internship lacked a practical experience interface with real patients. Thus, when encountering problems not in the textbook during the clinical practice, they felt tremendous pressure. Some senior nurses shared their experiences with the juniors during those times, reducing the stress.

Practice How to Differentiate Priorities and Manage Sudden Interference

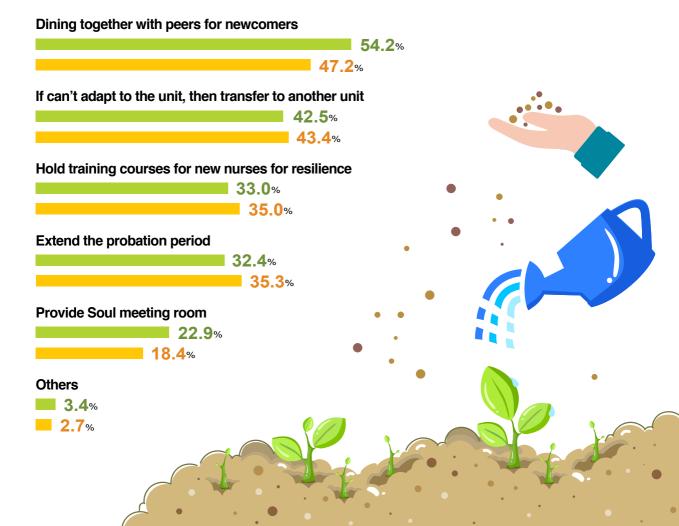
When asked what difficulties the new nurses encountered during the clinical practice, these issues came up: The new nurse might not be able to differentiate the

Which of the following resources can hospital provide to help the new nurses adapt to the new workplace? (Multiple choice) "Two-year system new nurses" (N = 179) "Non-Two-year system new nurses" (N = 934) Provide one on one clinical mentor 60.3% 69.1% Hold workshop (in person or online) for new nurses to experience the clinical workshop 37.4% 40.9% Senior members privately meet with new nurses for lunch or dinner or go to KTV to sing 30.7% 24.2% Interdisciplinary support and encouragement 34.6% 33.3% Unit life counselor seniors provide care and company 50.3% 54.2%

importance or urgency of the issues due to lacking real experiences. It was common to encounter interference by the patients' family or peers, impacting the performance of clinical tasks. Lack of trust from the patient's family. Insufficient communication with the patient's family or with the nursing team. No standard operating procedures to follow.

It was evident that there were two big challenges for new nurses: facing patients' families, and maintaining a good relationship with their peers. More due diligence is required on every matter. The consensus is that every nursing unit should provide mentorship for newcomers.

Because of the declining birthrate and values of society, when the new nurses faced dilemmas, it created contradictions and conflicts. On the one hand, they remembered the Nightingale pledges they recited wearing the white nurse robes and the discipline they received from their teachers. On the other hand, facing the reality of clinical work, they were exhausted. Hsiao Tze shared her dilemma when she first





entered the profession. Her family owned a tea shop, and realized she was so busy that she couldn't eat regularly, and tried to persuade her to leave her profession because they didn't need her salary.

Adequate Mentorship Is Most Important, and So Is the Newcomer's Opportunity to Dine Together with Their Mentors to Enhance Bonding

The last question of the survey helped the new nurses adapt to the resources in the workplace. There were five questions for both experienced and new nurses regarding the resources, and the third and fourth questions produced opposite results. This was also reflected in the previous questions. That is, newcomers felt attracted to the option of dining together with mentors, but the experienced nurses felt counseling was more important. This showed that the seniors were inclined to help the newcomers to ease their discomfort.

The survey contained some open-ended questions such as: Does the hospital provide sufficient manpower to enable the clinical teacher to lead? Is there sufficient time reserved to focus on the clinical matters? Do the specialized units give proper care? Is there an appropriate nurse-to-patient ratio? Is there a need to add functional teams (such as: intravenous injection technical team, wound dressing team, and blood draw team)? Should the hospital provide support for patients who are weak or without dependents to reduce the burdens of the nurses?

Although there are many multifunctional AI facilities employed in the medical institutions, the hospitals are still trying to lessen the heavy burden of the nurses. But as the values of society change, the objectives of the nursing profession are being tested.

Moreover, the questionnaire also mentioned that education provided to the newcomers could reduce problems and pressures faced by the nurses when encountering the family members of the patient. A few people pointed out that instructors for clinical practice could help individuals with their level of communication, which was very important, by encouraging the students and instructors to provide feedback and speak out about their innermost stress. Additionally, the survey results pointed out that the nurse team needs specialists or doctors to join the team; it's a very good approach.

Su-Yue shared that when she first came to the hospital, the head of the ward held a welcome lunch, and she was very impressed. She felt the environment was like

a family. The atmosphere of the workplace needed to resemble that of a family. We love to see the seniors and newcomers get along like a family.

Shiao-Jin also shared her experience: "I met those who left the workplace, and talked with them. I felt the harmonic feeling between the newcomers and seniors was very important. If the senior nurse was a demanding and meticulous person, with a bad EQ and temper, the newcomer would be intimidated and afraid. Naturally, the newcomer would withdraw. Even if they switched the mentor, the newcomer may not be able to withstand the pressure of public opinions, this is a shame." It shows that the first mentor is very important for newcomers. To get along with others is very important, it helps to build emotion and trust. This is a good way to retain the newcomers.

Game-based Teaching and Psychological Counseling Improve Performance

The survey results also suggested that regular psychological counseling or group counseling would lead to positive thinking and a positive atmosphere in the workplace, and give room to express opinions to avoid internalizing too much and feeling pressured. Other good suggestions include: extending the probation period, notifying the unit prior to the interview to ease the stress, providing a handbook for the newcomer, and handling shift changes more cleanly to allow familiarity with the environment.

Dalin Tzu Chi Hospital Nursing Dept. recently brought a game-based teaching method to the environment to enhance the motivation to learn, and improve the learning results. Also, we added recovery and full time care courses, to help the diversified nursing education.

During the three years of the COVID-19 epidemic, nursing students were only allowed to learn clinical applications virtually, impacting the students who entered the real internship program. But with senior's support and leadership, they managed to pass the probation period.

We are fortunate to see the end of the pandemic, and hope there will be no such global pandemic in the future. But we must remind ourselves that taking care of patients is our primary responsibility. In summary, newcomers not only need guidance and support from unit nurses, supervisors, and the nursing department, they also need the space to adapt to the new environment and direction from senior members such as specialists, and doctors. With more digital teaching techniques and material, we believe we will welcome more nurses to join us in the future.