# Student nurses to newly hired nurses: Challenges encountered in clinical practice

**[1]Christine Joy A. Alvarez, [2]Marc Christian M. Cornelio, [2]Bianca Michaela V. Lacopia, [2]Michelle S. Sarmiento & [3]Leilani C. Dela Vega**

## Abstract

Although the nursing profession remains in high demand globally, nurse turnover rates continue to rise. The transition from student nurse to licensed professional is a critical phase in a nurse's development, during which individuals are particularly vulnerable to stress and workplace challenges. The Philippines, widely recognized for producing nurses who serve healthcare systems worldwide, has limited local research examining transition experiences within domestic healthcare settings. This study explored challenges encountered by newly hired nurses as they moved from students to licensed professionals. It examined gaps in knowledge, skills, and attitudes, and identified support systems and coping strategies that facilitated adjustment to clinical practice. A phenomenological design was employed using semi-structured interviews with newly hired nurses from two private hospitals in Candelaria, Quezon Province. Ten participants were selected through purposive sampling. Data were analyzed using thematic analysis supported by NVivo 15 software, generating nine themes: Navigating Role Transition, Professional Adaptation, Reality Shock, Adaptive Communication, Clinical Preparedness Deficit, Decision-Making Hesitancy, Institutional Support, Peer Support, and Personal Resilience. Findings revealed challenges related to psychological adjustment, inadequate clinical skills, and gaps between theoretical education and practice. These challenges underscore the need for structured transition programs and institutional support. Based on the findings, the study proposed Pathway to Care, an Information, Education, and Communication material designed to prepare licensed nurses for professional realities. The insights may inform educators, administrators, and policymakers in strengthening transition initiatives.

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**About the authors:**
[1]Corresponding author. Bachelor of Science in Nursing, Manuel S. Enverga University Foundation-Candelaria, Inc. Email: christinealvarez120703@gmail.com
[2]Bachelor of Science in Nursing, Manuel S. Enverga University Foundation-Candelaria, Inc.
[3]Registered Nurse, Master of Arts in Nursing. Manuel S. Enverga University Foundation-Candelaria, Inc. Email: leilani_delavega@yahoo.com

## 1. Introduction

Transitioning from student nurses to newly licensed professional nurses is a significant milestone marked by numerous challenges and adjustments. Globally, newly graduated registered nurses (NGRNs) experience a series of workplace-related transitions. As student nurses in the Philippines, all procedures are guided by clinical instructors. The administration of medications, provision of health education, and performance of independent nursing actions are all closely scrutinized and supervised by instructors. This guidance disappears once student nurses graduate from their institutions, leading to the independence expected of newly registered nurses. Ideally, student nurses should demonstrate autonomy in decision-making and utilize their role as an essential human resource within healthcare institutions. They should be able to thrive in the absence of mentors and be adequately prepared for role transition after graduation. However, newly hired registered nurses often struggle to transition successfully. They encounter numerous challenges, including unexpected role demands and a lack of institutional support, which may result in malpractice incidents and increased turnover.

According to See et al. (2023), newly graduated registered nurses experience knowledge deficits and are profoundly affected by heavy workloads. In Benner's Novice to Expert theory (Benner, 1984), newly graduated nurses in their first job are categorized as advanced beginners. This stage is characterized by limited experiential knowledge, leaving individuals vulnerable to uncertainty and stress in decision-making. Despite their advanced beginner status, NGRNs are frequently expected to meet high performance standards and assume unexpected roles without sufficient preparation or support. This pressure, combined with high stress levels and inadequate support, often leads newly graduated registered nurses to resign (Zhang et al., 2025). Ren et al. (2024) reported a global nurse turnover rate of 16%, which poses significant adverse effects on healthcare systems, including shortages in human resources and compromised care quality.

Graduates who completed their nursing education during the COVID-19 pandemic face distinct challenges in meeting professional role expectations due to limited clinical exposure. Upon entering practice, these graduates experience greater transition shock and require more comprehensive support systems. Powers et al. (2022) emphasized the importance of extended preceptorships to enhance safe skill performance and patient management. While pre-pandemic graduates are often perceived as more competent due to greater clinical exposure, evidence suggests that COVID-19–era graduates also demonstrate strengths. Palese et al.

(2022) found that although pre-COVID-19 nurses scored higher in the "helping role," pandemic graduates performed significantly better in "ensuring quality" and "therapeutic intervention" domains on the Nurse Competence Scale.

Despite the demanding nature of nursing, newly graduated nurses generally report satisfaction with their career choice. However, limited hands-on training during the pandemic contributed to knowledge gaps and difficulty integrating theory into practice (Brett et al., 2024). To support transition, healthcare institutions have adopted initiatives such as shadowing programs, where novice nurses work under experienced practitioners. Alrashidi et al. (2023) reported that such programs significantly improve confidence, with participants expressing confidence across all areas of practice.

Nevertheless, transition challenges persist. Aldosari (2021) noted that newly registered nurses continue to struggle with professional integration despite transition programs. In line with Article 296 of the Philippine Labor Code, this study focuses on nurses' first six months of employment. It aims to examine challenges related to knowledge, skills, and attitudes, identify needed support systems, and develop material to facilitate successful transition into professional nursing roles.

## 2. Literature Review

### 2.1. Theoretical Framework

This study is grounded in three complementary theories; Kramer's Reality Shock Theory (Kramer, 1974), Benner's Novice to Expert Model (Benner, 1984), and Schlossberg's Transition Theory (Schlossberg, 1984), to examine the transition of NGRNs during their first six months of clinical practice. Together, these frameworks explain the emotional, cognitive, and skill-based challenges nurses experience as they move from academic preparation to professional practice, offering a holistic lens for understanding early professional adjustment.

Kramer's Reality Shock Theory explains the emotional strain caused by the gap between educational expectations and clinical realities. NGRNs often progress through four phases, honeymoon, shock, recovery, and resolution, during their first year of practice. While the honeymoon phase is marked by enthusiasm and support from preceptors, the shock phase emerges when nurses are expected to function independently, manage complex patient care, and cope with workplace pressures. Yingnan et al. (2024) affirmed the continued relevance of this theory, noting persistent emotional distress among NGRNs. Successful navigation leads

to recovery and eventual resolution, where nurses either fully commit to the profession or choose to leave (Casey et al., 2021).

Benner's Novice to Expert Model situates NGRNs at the advanced beginner stage, where basic skills are present but experiential judgment is limited. Wang et al. (2025) highlighted the value of simulation in accelerating competence at this stage. Schlossberg's Transition Theory further explains this shift through the "4 S's" (situation, self, support, and strategies), emphasizing the role of personal and environmental factors. Together, these theories inform targeted interventions such as mentoring, structured onboarding, and coping strategies to support successful nurse transition.

### 2.2. Role Transition and Expectation

Newly graduated nurses often struggle to transition from learners to competent professionals due to gaps in practical skills and confidence in professional roles. Prosen and Ličen (2023) reported that despite formal education, nurses face transitional challenges arising from insufficient preparation in essential clinical and decision-making skills, leading to increased stress and uncertainty. Similarly, Murray et al. (2020) found that newly hired nurses experience role strain when assuming full clinical responsibility, particularly in high-risk situations that were inadequately addressed during their education.

Educational preparation and workplace support significantly influence perceptions of competence among new graduates. Moon et al. (2024) emphasized that supportive mentoring, leadership, and structured orientation programs enhance confidence and professional identity, facilitating smoother transitions and reducing early-career anxiety. A systematic review by Kreedi et al. (2021) further highlighted that sudden responsibility, unfamiliar hospital protocols, and independent patient care intensify stress and feelings of inadequacy. Although recruiting new graduates helps address nursing shortages, many still feel unprepared for clinical demands (Ubas-Sumagasyay & Oducado, 2020).

Knowledge, skills, and attitudes play a critical role in successful role transition, particularly for nurses educated during the COVID-19 pandemic, who experienced clinical knowledge deficits and workload-related stress (Brett et al., 2024). Opoku et al. (2021) identified inadequate practical experience, limited mentorship, communication challenges, performance anxiety, and blame culture as major barriers to transition. Despite these challenges, many nurses report professional fulfillment, underscoring the importance of

supportive interventions, enhanced education, skills development, and resilience-building to promote confidence, retention, and effective clinical practice.

### *2.3. Challenges Encountered During Transition*

In accordance with Article 296 of the Labor Code of the Philippines, newly hired nurses are defined as individuals within their first six months of employment. This probationary period is critical, as newly graduated nurses often encounter substantial challenges during their transition into clinical practice, affecting performance, professional confidence, and integration into healthcare teams. Several studies reported high levels of stress and role ambiguity among newly graduated nurses, who frequently feel unprepared to meet professional demands due to gaps between theoretical education and hospital practice, particularly in decision-making, time management, and patient communication (Baharum et al., 2023; Tawash et al., 2024; Jeffery et al., 2023; Alharbi et al., 2023; Wang et al., 2024). Similarly, Murray et al. (2020) identified transitional difficulties that contribute to high turnover, as new nurses often feel overwhelmed by expectations for which they were inadequately prepared.

Zhang et al. (2025) emphasized that inadequate onboarding and limited mentorship further intensify distress among newly hired nurses. Their findings demonstrated that structured support mechanisms, such as mentorship and residency programs, significantly enhance confidence and clinical competence. Collectively, these studies highlight the importance of postgraduate support in facilitating smoother transitions, reducing stress, and improving patient care quality. Mentorship supports knowledge transfer, skill development, and emotional, psychological, and professional well-being, which is particularly vital during transitional periods, including the COVID-19 pandemic. Pandemic-related disruptions to nursing education, including campus closures and online learning, hindered practical skill development (Langegard et al., 2021; Ramos-Morcillo et al., 2020) and negatively affected students' mental health (Mulyadi et al., 2022). Strengthening mentorship and structured support systems is therefore essential to enhance adaptability, resilience, and retention (Lysfjord & Skarstein, 2024).

Newly hired registered nurses also experience significant occupational stress as they transition into professional practice. Frögéli et al. (2018) identified nursing as a highly stressful profession, placing newly hired nurses at increased risk. Heavy workloads, high demands, and significant responsibilities are key stressors (Spence Laschinger et al., 2019), often

accompanied by self-doubt and perceived unpreparedness (Aller & Almrwani, 2024). Insufficient orientation and limited clinical exposure further exacerbate stress, contributing to burnout and compromised well-being (Chesak et al., 2015). Consequently, newly registered nurses emphasize the need for standardized transition programs and collegial support (See et al., 2023; Casia et al., 2025; Kwon et al., 2025). Addressing these stressors through targeted interventions may strengthen support systems, improve clinical competence, reduce burnout, and enhance nurse retention.

## 3. Methodology

### 3.1. Research Design

A phenomenological approach was employed in this qualitative study to capture an in-depth understanding of the participants' lived experiences. Phenomenological research seeks to understand the essence of a phenomenon or experience by examining individuals' lived experiences to gain deeper insight into a particular issue (Ng, 2025). Its focus on participants' experiences and interpretations provides rich, detailed insights that allow researchers to identify commonalities and capture the essence of shared experiences.

### 3.2. Research Instrument

To obtain an in-depth understanding of the participants' experiences and challenges, this study utilized semi-structured interviews as the primary research instrument. This approach allowed researchers to explore participants' responses in greater depth while maintaining consistency and objectivity. At the same time, it provided flexibility to probe emerging themes. The interview guide consisted of three parts. The first part focused on the experiences and difficulties encountered by newly hired nurses during their transition into professional practice. The second part examined gaps in knowledge, skills, and attitudes. The final part explored coping strategies and available support systems, identifying both helpful and lacking forms of support that influence nurses' role transition.

### 3.3. Data Gathering Procedures

Participants were identified through a formal request submitted to the management of the selected institutions. A letter of request outlining the study's objectives, participant criteria, and a validated interview guide was submitted for institutional approval. Once potential

participants were identified, they were contacted and provided with an overview of the study. Informed consent was obtained prior to the interviews to ensure confidentiality, voluntary participation, and the right to withdraw at any time.

Interviews were scheduled at a time and location convenient for the participants and were conducted either in person or through an online platform, depending on participant preference. Each interview followed a semi-structured format using the validated questionnaire. With participants' consent, interviews were audio-recorded to ensure accuracy of data collection. Non-verbal cues and significant observations were also documented. Interviews continued until data saturation was achieved, which was anticipated to occur within 8 to 10 interviews. Data were analyzed using NVivo version 15 to facilitate efficient data management and ensure unbiased theme development.

### 3.4. Participants

The study was conducted in Candelaria, Quezon Province, Philippines. Two hospitals were selected due to their significant number of newly hired nurses each year, making them appropriate settings for examining role transition experiences. Interviews were conducted at locations convenient for the participants. Hospital administrators and nursing supervisors were provided with clear inclusion criteria for participant selection. Eligible participants included registered nurses who graduated within the last three years (batch 2021–2022) and had one to six months of clinical experience. This ensured that the data collected were recent and relevant. Supervisors were also encouraged to recommend other individuals who met the criteria.

The study involved approximately 10 participants, consistent with qualitative research standards that allow sufficient time for in-depth interviews and analysis. A consent form detailing the purpose of the study, voluntary participation, and confidentiality was provided. Upon consent, participants were scheduled for one-on-one semi-structured interviews to share their experiences and perspectives on transitioning from student nurse to professional practice.

Purposive sampling was used to select participants with characteristics relevant to the research objectives. Registered nurses who graduated within the last three years and had six months or less of clinical experience were intentionally selected to ensure alignment with the study criteria. Participant selection was facilitated through collaboration with chief nurses and nursing supervisors from the participating institutions. Ethical standards were upheld through the acquisition of informed consent, ensuring confidentiality and voluntary participation.

### 3.5. Data Analysis

Data collected from the semi-structured interviews underwent thematic analysis to identify emerging themes related to the experiences of newly graduated registered nurses with less than six months of clinical experience. Audio-recorded interviews were transcribed verbatim to ensure accurate and unbiased interpretation. Non-verbal cues noted during interviews were included to enrich the analysis.

NVivo version 15 software was used to facilitate systematic and impartial data analysis. Transcripts were imported into the software, coded accordingly, and organized into broader themes. NVivo's categorization capabilities allowed efficient clustering of codes, enabling the identification of overarching themes in a structured and rigorous manner.

## 4. Findings and Discussion

Using thematic analysis assisted by NVivo15 software, nine overarching themes were generated: Navigating Role Transition, Professional Adaptation, Reality Shock, Adaptive Communication, Clinical Preparedness Deficit, Decision-Making Hesitancy, Institutional Support, Peer Support, and Personal Resilience with each corresponding to the study's specific objectives. These themes reflect the complex reality of transitioning from student nurse to clinical practitioner and the various psychosocial and professional challenges experienced in the early months of practice.

The transition from student to professional nurse is a critical stage in a nursing career, characterized by significant emotional, cognitive, and practical challenges that influence confidence, professional identity, and long-term commitment to the profession. As novice nurses adapt to new roles, environments, and expectations, they often require substantial support to manage these demands effectively. Findings from this study revealed three overarching themes: Navigating Role Transition, Professional Adaptation, and Reality Shock, which collectively capture the shared experiences of newly hired graduates and highlight key areas where structured guidance and institutional support are essential.

### Theme 1: Navigating Role Transition

The transition from student nurse to professional practitioner is a continuous process of navigating one's role in clinical practice, marking a significant shift in liability, identity, and performance. The theme Navigating Role Transition captures how newly hired nurses struggle

to reconcile their academic training with the realities of clinical independence. This theme encompasses multiple aspects of early professional adjustment, reflected in recurring codes such as accountability and responsibility, lack of confidence, limited experience, achieving autonomy, workload demands, and uncertainty in career paths. Participants frequently expressed feelings of overwhelm upon recognizing the weight of their professional accountability.

Unlike academic settings, where student nurses are guided and monitored, the clinical environment demands real-time decision-making with significant consequences. This heightened sense of responsibility often triggered self-doubt, particularly among nurses questioning their readiness to perform independently. Several participants (4 out of 10) emphasized that increased accountability affected their decision-making skills. Although they approached tasks with caution, hesitancy and lack of assurance sometimes hindered decisive action. Participant 10 stated:

> *"The responsibility is greater—not only are you taking care of the patient, but also your role as a nurse and your license. We worked hard for four years for that, and with just one mistake as a newly hired nurse, everything you worked for can disappear in an instant."*

This statement reflects the conscious burden nurses feel when rendering patient care. These findings align with Frankel and Austin (2013), who noted that while accountability enhances responsibility, it may also contribute to hesitancy when support systems are lacking or when individuals lack confidence in their decision-making abilities. Despite these challenges, 6 out of 10 participants demonstrated awareness of their new role and the shift in expectations and responsibilities that comes with licensure. They recognized that they were no longer in a protected learning environment and were now accountable for their decisions, actions, and patient outcomes. However, this awareness did not always translate into confidence. While conscious of their professional identity, many struggled to fully embrace autonomy, especially in high-pressure situations. Participant 9 described the experience as:

> *"I find this moment as an independence act where I am on my own now, no clinical instructors behind me and school requirements."*

Similarly, Participant 7 reflected on autonomy as a learning journey:

> "Now, I've really learned so much more as a nurse, but it's quite overwhelming because, as a student nurse, someone was always there to handle and guide you."

Kramer (2017) explained that although new nurses are aware of their responsibilities, they often struggle to implement their skills under pressure, which can reduce confidence. Nevertheless, 3 out of 10 participants reported a distinct lack of confidence in performing clinical interventions, describing a sense of regression to earlier stages of their nursing career. Participant 7 remarked:

> "The challenge I'm facing right now is with my skills—it feels like I'm starting all over again, like I'm back at level 1."

This sentiment reflects broader psychological unpreparedness, which may stem from limited clinical exposure, insufficient mentorship, or the abrupt transition from a supervised to an autonomous role. Three participants identified lack of confidence as a major barrier to effective practice. Despite completing academic requirements, they felt inadequately prepared for the realities of ward duties, with the pandemic cited as a contributing factor. Participant 1 stated:

> *"Working without enough experience is very hard."*

These findings are supported by Kwon et al. (2025), who found that new nurses with insufficient guided practice and mentorship demonstrated low confidence, which improved significantly with structured preceptorship programs. Moon et al. (2024) similarly highlighted that limited practical experience contributes to feelings of incompetence and hesitation, particularly in complex clinical scenarios.

Another notable challenge is uncertainty in career direction. Three participants expressed ambiguity about their long-term career paths, questioning whether they wished to remain in their current role or in the nursing profession altogether. This uncertainty often arises from the sudden shift in responsibilities and the inherent challenges of the profession. Participant 4 noted:

> *"It's also very pressuring because you don't know which path to take. You don't know if you'll be successful in the career you're pursuing right now, like me."*

Career uncertainty is common among newly hired nurses and can affect motivation, job satisfaction, and long-term commitment. Najafi and Nasiri (2023) reported that early-career nurses often feel unprepared to set long-term goals due to limited guidance and professional development planning, which may lead to job dissatisfaction and early turnover.

Amid these challenges, 2 out of 10 participants reported a smooth transition into their new roles. Participant 6 stated:

> *"It's okay, since our clinical instructors were really good when we were just on duty as nursing students. Now that we're registered nurses, we already know the right things to do."*

These participants had a strong clinical performance history during their student years, suggesting that some graduates adapt more quickly when they have a solid foundation and receive robust guidance during academic training. Studies indicate that graduates with structured hands-on experiences demonstrate higher confidence and competence in patient care, critical thinking, and communication in high-pressure settings (Casia et al., 2025).

### *Theme 2: Professional Adaptation*

Newly hired nurses often demonstrate professionalism yet perceive professional adaptation as a major challenge during this adjustment period. Effective communication, whether verbal or written, is crucial, as miscommunication in healthcare can lead to serious consequences. Establishing clear communication channels is therefore essential for patient safety and smooth workflow.

Participant 5, the sole participant who noted the issue of doctors' penmanship, described it as an additional burden:

> *"Reading doctors' handwriting is difficult because it varies a lot—sometimes we really can't read it at all, it's honestly so messy."*

As a newcomer, the participant viewed this seemingly minor issue as a potential risk for mistakes. Poor doctors' handwriting remains a significant concern in nursing practice, contributing to medication errors, delayed treatments, and increased nurse workload. Elmzughi et al. (2025) found that handwritten prescriptions were partly unreadable, posing risks to patient safety, while Seremetkoska et al. (2025) noted that nurses often experience stress when interpreting unclear orders. Many hospitals continue to rely on handwritten notes, and Aoudi

Chance et al. (2024) reported higher medication error rates in facilities using manual documentation.

The work environment emerged as another pivotal factor influencing professional adaptation, as identified by 4 out of 10 participants. This concept encompasses both the physical setting and the social and interpersonal relationships within the institution. Participant 3 remarked:

> *"One of the challenges I face as a new graduate is adjusting to the environment.*
> *It really feels unfamiliar at first."*

This statement reflects the shared experience of newly hired nurses, for whom social relationships can significantly shape adjustment outcomes. Participant 5 highlighted the challenge of forming professional connections in an environment characterized by frequent rotations:

> *"You have to know how to get along with others because we're constantly*
> *rotating, so you can't get too comfortable with the people you're with—since*
> *you'll eventually be working with different ones."*

Transitioning from student nurse to newly hired nurse entails substantial environmental challenges. While student nurses benefit from structured, supervised settings that allow gradual adaptation (Labrague, 2024), newly hired nurses must quickly navigate patient care responsibilities, independent decision-making, and team dynamics. Ssemata et al. (2017) described this as environmental shock, particularly in resource-limited settings, and noted that inadequate mentorship exacerbates the difficulty. Gularte-Rinaldo et al. (2023) and Moon et al. (2024) emphasized the importance of mentorship programs in easing this transition and reducing stress.

Institutional policies also affect adaptation. Participant 6 highlighted the need to adjust to new organizational rules:

> *"The only difference is that in the different hospitals where I did my duty as a*
> *nursing student, there were various policies, but now that I am hired, I just need*
> *to focus on the core and policies of the institution I applied to."*

Adjustment to hospital routines, performance pressures, and limited real-world experience can lead to stress and emotional exhaustion among newly hired nurses. Studies by

Hussein et al. (2017) and Labrague (2024) stress that proper orientation, mentorship, and support systems are critical for a smooth transition and for fostering confidence in new nurses.

Professional relationships were also identified by 4 out of 10 participants as vital to adaptation. These relationships involve interactions with colleagues, senior nurses, physicians, and other healthcare team members. Participant 9 explained:

> "There are differences on the cultural aspect of relatives and health care providers.
> You have to respect it and maintain professionalism so that you could still perform
> your role well."

Nurses must maintain professionalism across diverse socio-cultural interactions. Cultural differences can significantly impact the quality of care. Understanding patients' cultural beliefs, values, and practices facilitates more effective care, reduces health disparities, and improves patient satisfaction, while cultural misunderstandings can lead to miscommunication, non-compliance, and adverse health outcomes (Gustafson, 2005).

### Theme 3: Reality Shock

As newly hired registered nurses enter the clinical field, many encounter a jarring experience characterized by anxiety, dissonance between academic training and real-world expectations, overwhelming workload demands, and the dawning realization of their new professional reality. This phenomenon, commonly described in the literature as reality shock, captures the transitional period when idealism meets the harsh realities of clinical practice.

The weight of responsibility and accountability generates significant anxiety, often manifesting both during and after shifts. One participant explicitly noted the presence of pre- and post-duty anxiety, highlighting the risks associated with their actions. Beyond initial excitement, the participant experienced anticipatory dread, including concern about potential interventions and professional interactions with colleagues. Post-shift, residual anxiety persisted, often characterized by rumination over decisions made throughout the day. The participant shared:

> "That pre- and post-duty anxiety — like, when you have scolded? Will it be a toxic
> shift? What will happen during duty? And then after duty, there's that post-anxiety
> — did I do everything right? Did I make any mistakes?"

Another challenge is the stark contrast between academic training and real-world practice. Four out of ten participants observed that techniques and procedures emphasized in school often differ from those required in clinical settings, where time constraints and institutional policies take precedence over textbook standards. Participant 3 reflected:

> *"As a new grad, the knowledge and skills I learned in school are different from what it's like when you're a bedside nurse, because that's when you really see the difference between what's ideal and what's no longer ideal in real-life practice."*

Similarly, Participant 8 noted the influence of institutional policies:

> *"When you're actually here, you realize that things are really different. What actually happens is different — like, for example, procedures are done a certain way in theory, but once you're here, it really depends on the setup."*

This disconnect often leaves new nurses feeling like novices despite prior student training, as Participant 9 explained:

> *"I felt like I was a novice on everything since I knew that hospital experience is different from what has been taught in nursing schools."*

Overwhelming workload demands and the broad responsibilities of licensed practice were also reported by 3 out of 10 participants. The expectation to manage multiple patients, complete documentation, and coordinate with healthcare teams was described as exhausting due to the abrupt shift in work pace. Participant 9 shared:

> *"The role of nurse is a laborious task and I felt overwhelmed as lots of responsibilities should be carried by nurses."*

High workload demands are a major stressor for newly hired nurses, contributing to burnout and decreased job performance. Galanis et al. (2025) reported that nurses in their first year frequently face heavy patient assignments, multitasking pressures, and time constraints, leading to mental fatigue and reduced care quality. Labrague (2024) further emphasized that workload stress is intensified by the transition from academic to clinical environments, where new nurses must quickly adapt to fast-paced hospital settings with limited experience.

Finally, new nurses gradually confront the full reality of their career responsibilities. The discrepancy between expectations and practice necessitates emotional and cognitive adjustments. Participant 8 reflected:

> *"Maybe it's also about the expectations. At first, as a student nurse, you think things will be a certain way, but it's different — what actually happens as a student nurse is not the same as in real practice."*

Labrague and De Los Santos (2020), in a study of 286 newly graduated nurses, found that reality shock was directly associated with missed nursing care, with caring ability partially mediating this relationship. These findings underscore the importance of institutional strategies, including structured orientation, mentorship, and support systems, to facilitate smooth transitions, preserve caring abilities, and minimize compromises in patient care.

The transition from academic learning to real-world clinical practice often exposes critical gaps in the knowledge, skills, and attitudes of newly hired registered nurses, highlighting limitations in theoretical preparation for the complex demands of professional practice. Identifying these gaps is essential for addressing performance challenges and supporting professional growth. The thematic analysis of this study revealed three core themes: Adaptive Communication, Clinical Preparedness Deficit, and Decision-Making Hesitancy, which reflect common deficiencies experienced by new nurses and underscore key areas requiring reinforcement and targeted interventions to promote competent and confident nursing practice.

### *Theme 4: Adaptive Communication*

Communication has always been an integral part of nursing and is considered an essential skill to be developed early in one's career as a student nurse. However, integrity and self-respect must not be compromised in the pursuit of effective communication. Positioned at the lower end of the clinical hierarchy, newly hired nurses often felt compelled to adjust their tone, language, and responses based on the rank or attitude of the person they were interacting with, even in situations where the other party may have been in the wrong. This delicate balancing act highlights the critical need for nurses to communicate professionally and respectfully without sacrificing their integrity.

Communication is foundational in nursing, essential not only for patient safety and high-quality care but also for fostering collaborative practice and trust with patients and colleagues (Burgener, 2017). Within this context, adaptive communication emerged as a prominent theme among newly hired nurses, particularly in relation to navigating interpersonal dynamics and power structures in the healthcare environment. Adaptive communication involves tailoring messages to the context, audience, and emotional tone, allowing nurses to respond appropriately to institutional hierarchies and interpersonal dynamics (Meneses-La-Riva et al., 2025). Newly hired nurses frequently report challenges in asserting themselves professionally while maintaining harmony in team-based care (Lee & Jang, 2023). Half of the participants (5 out of 10) acknowledged that developing adaptability in communication was an essential skill they had to acquire quickly upon entering the workforce. While academic training emphasized clarity and structured communication, real-world practice demands flexibility, especially when interacting with colleagues, doctors, or patients of higher status. Participant 10 noted:

> *"As for the staff, everything's okay. But for someone like me who's a bit of an introvert, I still find it a bit hard to talk or coordinate with them."*

Four participants highlighted the phenomenon of disempowered communication, characterized by conscious deference to higher authority even when they were correct. This illustrates the pressure new nurses often feel to step back or remain silent despite having valid input. Participant 8 shared:

> *"Even if you know you're right, sometimes they'll insist that you're wrong, but you have to remain respectful and calm in the conversation."*

Barriers such as excessive workload, emotional exhaustion, and inadequate training have been shown to disempower nurses, reducing their willingness and ability to engage in meaningful communication with patients (Alshammari et al., 2020).

### *Theme 5: Clinical Preparedness Deficit*

Nurses are exposed to clinical settings from the beginning of their training; however, student duties are typically supervised by clinical instructors and involve lighter responsibilities. It is only upon licensure and autonomous practice that previously unrecognized gaps become evident. These gaps often highlight areas of unpreparedness,

making clinical preparedness deficit a recurring and significant theme during the transitional period of newly hired registered nurses.

Half of the participants (5 out of 10) reported feeling that their clinical skills were insufficient during their first deployment as professional nurses. Despite a strong theoretical foundation, many described a lack of fluency in nursing interventions, particularly those less frequently practiced during training. This sudden shift, coupled with the mismatch between student training and professional responsibilities, manifests as feelings of insufficiency, sometimes leading to ineffective management of clinical duties. Participant 10 explained:

> *"I've only handled 7 patients so far, which is actually still fewer than the daily load of the regular staff, yet I still struggle to manage them. But when I'm assigned around three patients, I can handle it well."*

Hallaran et al. (2023) noted that many new nurses enter the workforce feeling underprepared, particularly when performing hands-on tasks under pressure, which can create anxiety and affect patient safety. Three participants emphasized that mastery of key skills occurred only after exposure to real-time clinical situations. To compensate for gaps in their training, they engaged in self-directed learning, including observation, questioning during duty hours, and independent research. While this demonstrates resilience and initiative, it also underscores the need for comprehensive pre-employment clinical immersion and mentorship programs to reduce pressure and improve patient safety. Participant 8 reflected:

> *"So, we're still in the process of improving our abilities, but as we continue, we see improvement day by day."*

Najafi and Nasiri (2023) observed that new nurses rely heavily on experiential learning, gaining insights from senior nurses and daily practice. Their study highlighted that informal, experience-based learning is a major factor in developing early-career confidence. One participant also noted the dissonance between theoretical knowledge and clinical practice. Classroom learning often emphasizes idealized procedures, which must be adapted to practical realities in patient care. Participant 6 stated:

> *"As nursing students, we were taught what's in the book, the ideal. But when you're already in the clinical setting, what's taught…"*

Mthiyane and Habedi (2018) further highlighted that many student nurses feel lost when their clinical environment does not reflect classroom teachings, leading to confusion and hesitation in applying learned concepts.

### *Theme 6: Decision-Making Hesitancy*

In the fast-paced environment of clinical practice, effective decision-making is essential; however, for newly licensed nurses, the anxiety of committing errors and the apparent unpreparedness for professional responsibilities often take precedence. These factors hinder their ability to make prompt and confident decisions, reflecting a critical gap during their transition into independent practice. The shift from guided learning to autonomous judgement proved daunting to new nurses, giving rise to the theme Decision-Making Hesitancy.

For general, the transition into a new workplace meant learning new rules and adjusting to the unique standards and protocols of their specific facility; however, this period of adjustment may vary. One participant noted that due to the longer duration of student training in certain hospitals, the policies they have learned to practice were hard to unlearn. Participant 6 stated:

> *"Last time, we had longer duties at a provincial hospital here in Quezon, so we got more used to their policies."*

Dyess and Sherman (2009) found that newly licensed nurses often feel overwhelmed when adjusting to unfamiliar hospital policies and systems. They emphasized that structured orientations and mentorship are vital in helping nurses feel more confident and integrated into their new work environment.

Despite having foundational training, some nurses reported experiencing mental blocks during their shift. These episodes, cited by three participants, were typically pronounced during high-pressure scenarios where swift decisions were required. This internal cognitive barrier reduces their abilities to perform independently, inherently making them a complete beginner who struggles to cope up with the basic skills. Participant 8 shared:

> *"After the board exams, it felt like I knew everything because during the review season, we learned so much. But after the results came out and the board exam was over, it felt like everything just disappeared. Even the basics, it seemed like I forgot them"*

Boamah et al. (2018) revealed that stress and cognitive overload can cause mental blocks in new nurses, especially in high-pressure areas like emergency units. They recommended emotional support and proper workload management to help nurses stay mentally focused during critical situations.

In line with this, the perceived need for expertise emerged as another contributor to decision-making hesitancy. Three participants also expressed a recurring sense of uncertainty when faced with complex patient care situations. Although they possess the theoretical knowledge and appropriate actions in mind, they lack clinical experience to validate their ideas. This lack of confidence often drove them to seek approval or guidance from more experienced colleagues before proceeding with decisions, even in situations that were within their scope of competence. Participant 4 expressed:

> *"With the experience and knowledge I have now, I still feel like it's not enough because I still need more expertise"*

Kaihlanen et al. (2020) noted that new nurses often feel pressured to show expertise quickly, despite limited hands-on experience. They stressed that building true competence requires time, guidance, and space for reflection to boost both skills and self-assurance.

Transitioning from student nurse to licensed professional presents numerous challenges that influence the success of a neophyte nurse's adjustment to the professional role. These challenges extend beyond physical demands and significantly affect the emotional well-being of newly hired nurses, often leading to internal disequilibrium during the early stages of practice. Without adequate guidance and support systems, new nurses may struggle to adapt effectively, increasing the risk of turnover. Analysis of the collected data revealed three central themes: Institutional Support, Peer Support, and Personal Resilience, which reflect the shared perceptions of newly hired nurses regarding the forms of assistance that facilitate successful professional transition. These themes underscore the need for targeted reinforcement and interventions to support a smooth and sustainable transition into professional nursing practice.

### *Theme 7: Institutional Support*

Institutional support is a vital component in navigating the early stages of a professional nursing career, greatly contributing to the successful adaptation of newly hired nurses to their

roles. Structured orientation programs and approachable mentors were frequently cited as factors that eased adjustment. For many, the sudden shift in identity and responsibilities became more manageable when supported by an administration fostering a professional and growth-oriented environment.

Most participants (8 out of 10) emphasized the importance of mentorship programs during this stage. Effective mentorship often relies on the availability of approachable preceptors, who provide guidance and establish meaningful connections to facilitate communication. Participant 4 explained:

> *"Mentorship is really important to me because it's where we're taught the right way from the start."*

The timing and duration of mentoring were also highlighted as critical for successful deployment. Participant 8 reflected:

> *"We were deployed before we had our training, so it was a bit difficult because we had no idea what to expect. But since we eventually had training, it really helped us understand how things flow in the hospital."*

This underscores the importance of providing training prior to deployment to equip new nurses with the knowledge and confidence to function effectively in clinical settings. Gularte-Rinaldo et al. (2023) found that structured mentorship programs significantly aid newly hired nurses in adapting to clinical environments, reducing anxiety, enhancing professional identity, and fostering a sense of belonging.

In addition to mentorship, skill-focused programs were identified as necessary by 2 out of 10 participants to develop competencies required for clinical procedures. Participant 8 noted:

> *"Maybe it's the time and the specific skills we need. For example, in IV or seminars, these seminars help us gain more knowledge and develop the skills we need."*

Vanderzwan et al. (2025) highlighted that simulation-based seminars enhance the clinical judgment and technical skills of newly graduated nurses. Their study showed that engaging in realistic practice scenarios boosts confidence and bridges the gap between theoretical learning and actual patient care.

### *Theme 8: Peer Support*

The presence of supportive colleagues significantly influences the ability and pace at which newly hired nurses adapt and thrive in their professional environment. Peer support is a critical factor in shaping the professional community, emphasizing the importance of interpersonal relationships in fostering growth, instilling confidence, and providing an emotional outlet for new nurses. In the demanding healthcare setting, encouragement and solidarity from fellow workers offer both comfort and a sense of belonging.

Three out of ten participants noted that motivation from co-workers played a significant role in their transition. Recognition for efforts, practical guidance, or simple praise helped build confidence in an otherwise intimidating environment. Participant 1 succinctly stated: *"Motivation from co-workers."*

Lyu et al. (2024) found that encouragement and recognition from colleagues significantly enhance motivation among newly hired nurses. Positive interactions create a supportive environment that fosters job satisfaction, boosts confidence, and helps new nurses feel competent and connected to their team. Additionally, four participants highlighted the importance of social support in navigating the early stages of their careers. Opportunities to debrief with colleagues, share concerns, and relate to peers provided emotional validation, normalized workplace struggles, and alleviated the emotional burden carried from shifts. Participant 5 reflected: *"After my duty, I tend to rant to my coworkers."*

Alharbi et al. (2023) emphasized that social support from colleagues, supervisors, and family members is crucial for newly hired nurses, particularly during their first year. Such support reduces emotional distress, builds resilience, and facilitates adaptation to challenging clinical environments, ultimately contributing to higher job satisfaction and improved retention.

### *Theme 9: Personal Resilience*

Sustaining composure and adaptability amidst the rigors of clinical practice is deeply rooted in the personal resilience of newly hired registered nurses. While institutional programs and peer support provide scaffolding, the ability to draw on internal resources remains essential for stability during transitions marked by unfamiliar responsibilities, high expectations, and intense physical demands. Practicing independently reinforces the need to cultivate a strong inner resilience.

For some participants (2 out of 10), adherence to core principles served as a moral compass and cognitive guide, instilling confidence when confronted with ambiguity or conflict. This deeply anchored sense of integrity helped them remain grounded in decision-making. Participant 6 explained:

> *"My principle in life is simple: as long as you're doing the right thing, staying on the right path, you can help and make a difference for the patient."*

Newly hired nurses often face challenges in maintaining ethical and professional standards during the transition. Rossiter et al. (2024) emphasized that mentorship and consistent guidance are crucial for reinforcing these principles, helping nurses navigate complex situations with confidence and integrity.

Awareness of the weight of professional responsibility also promotes mental preparation before shifts, allowing nurses to anticipate challenges and remain ready to respond effectively. Participant 5 shared:

> *"I always remind myself that every day brings new challenges, so I need to be ready."*

Jarden et al. (2021) noted that psychological readiness and pre-employment mental training programs equip new nurses with coping skills, reducing stress and enhancing job satisfaction. Professional detachment was identified by 2 participants as a key strategy for maintaining composure. Establishing boundaries between personal emotions and clinical situations, particularly in high-pressure or emotionally charged settings, allowed nurses to remain anchored. Participant 10 reflected:

> *"I just try to think positive, even if the doctor shouts at me, I keep going. If a senior nurse yells at me, I keep going. From my experience now, I've learned not to always dwell on things. We'll always have pre- and post-shift anxiety, but that's just part of the job."*

Stoian-Bălășoiu et al. (2025) highlighted that professional detachment, or the ability to emotionally separate from patients and situations, is crucial for preventing burnout. Training programs that incorporate techniques for emotional regulation help nurses maintain empathy while protecting their mental health. Restorative coping strategies, such as rest, self-care routines, spiritual practices, and activities outside of work, were emphasized by 4 participants as essential for recovery and mental clarity. Participant 9 noted:

*"Relaxing enables us to provide space for critical thinking. Overwhelming situations can occur during clinical duty, but I remind myself that stress and toxicity are common scenarios that need to be addressed."*

Wang et al. (2023) similarly discussed restorative strategies, such as mindfulness, exercise, and peer support groups, as effective in managing stress, fostering emotional resilience, and promoting mental well-being among new nurses. Equally significant was the drive for self-improvement. Nurses actively sought to enhance their skills and knowledge to compensate for limited guidance from colleagues. Participant 4 emphasized:

*"So, everything that's being taught to us, I really make sure to remember it—and I take notes."*

Kurtović et al. (2024) highlighted that continual professional development enhances confidence and job performance. New nurses who engage in self-assessment and seek growth opportunities are better equipped to meet the demands of clinical practice. This internal motivation led to deliberate skill acquisition, where participants refined clinical competencies through observation, independent study, and research. Participant 5 shared:

*"For the challenges I experienced, what I did was try to familiarize myself with the more difficult cases—how they're handled—so that when I encounter a similar case, I'll know what to do."*

Han et al. (2023) confirmed that hands-on practice, ongoing training, and feedback are vital for newly hired nurses to develop critical clinical skills efficiently, highlighting that personal resilience and proactive skill development are foundational to successful early-career adaptation.

## 5. Conclusion

The transition from student to professional nurse was described by participants as a challenging period marked by feelings of vulnerability, uncertainty, and heavy responsibilities. Many reported anxiety about committing errors, adjusting to fast-paced environments, and assuming full accountability for patient care. Several participants also highlighted a disconnect between classroom learning and real-world practice, which left them feeling underprepared and overwhelmed. Despite these challenges, most participants demonstrated resilience by

focusing on growth and adapting to the demands of their new roles. Their experiences reflect determination and personal progress as they adjusted to professional responsibilities.

Newly licensed nurses often identified gaps in knowledge, skills, and decision-making as key obstacles during this transition. Participants expressed difficulty bridging theoretical learning with practical application, feeling underprepared for the complexities of independent practice. Communication challenges were also noted, as some participants felt compelled to defer to more senior colleagues even when they were correct, affecting their ability to assert themselves professionally. Decision-making hesitancy was common, particularly in high-pressure situations, where nurses often sought validation from experienced colleagues before acting, underscoring the need for confidence-building interventions.

Institutional support emerged as a critical factor in facilitating a smoother transition. Structured orientation programs, formal mentorship from senior nurses, and consistent guidance from supervisors were consistently cited as instrumental in helping participants navigate their new roles. Such support not only enhanced technical competence but also provided emotional reassurance. External support from family and friends further helped participants manage stress and reinforced their commitment to professional growth.

Despite these challenges, some participants reported positive outcomes during their transition period. They described a sense of professional growth associated with increased autonomy, independence, and confidence in handling complex clinical situations. The experience encouraged continuous learning and adaptability, enabling them to integrate effectively into healthcare teams while enhancing their professional identity.

Participants also employed a variety of coping strategies to manage the difficulties of transition. Peer support and observational learning from senior colleagues were commonly used, while others relied on independent study and self-directed practice. Time-management techniques, personal note-taking, and mental rehearsal were also employed to improve efficiency and reduce anxiety. Maintaining optimism, engaging in self-reflection, and celebrating small achievements were essential strategies for building resilience and sustaining motivation throughout the adjustment period.

Based on their experiences, participants recommended improvements to support future newly hired nurses. They emphasized the importance of comprehensive pre-deployment orientation, longer and more hands-on clinical exposure during training, and formal mentorship programs. Workshops focused on practical skill development were also suggested to bridge

the gap between academic preparation and real-world practice. These recommendations reflect the participants' collective call for a structured and supportive transition framework to better equip nurses entering the workforce.

Newly hired nurses are encouraged to be compassionate toward themselves during this adjustment period. Feeling uncertain at the beginning is normal, and what matters most is maintaining a willingness to learn, seeking guidance when necessary, and building connections with mentors or supportive colleagues. Every duty or shift provides an opportunity for personal and professional growth, and consistent effort and patience will gradually improve both confidence and competence.

For hospital administrators, creating a supportive and nurturing environment is crucial. Implementing comprehensive orientation programs, structured mentorship, and regular check-ins can significantly ease the adjustment process. Administrators play a vital role in fostering a culture that prioritizes professional growth alongside productivity, reducing stress and promoting long-term success.

Policy makers should consider developing structured initiatives that support smooth transitions into nursing practice. Programs such as mentorship, peer support groups, and targeted training can make a meaningful difference. Policies grounded in the real experiences of nurses are more effective, compassionate, and responsive to their actual needs.

Educational institutions should evaluate how well they prepare students for real-world clinical practice. Enhancing practical training through simulations, extended clinical rotations, and hands-on skill development can bridge the gap between academic learning and hospital practice. Integrating emotional readiness alongside technical skills will better equip students to manage the stress and expectations of professional environments.

Finally, this study lays the foundation for future research into the early career experiences of newly hired nurses. Subsequent studies could examine the long-term effectiveness of various support strategies or track nurses over time to gain deeper insights into their professional development. Such investigations can inform the creation of more effective support systems, ensuring that new nurses are better prepared for the challenges of clinical practice.

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### Institutional Review Board Statement

This study was conducted in accordance with the ethical guidelines set by Manuel S. Enverga University Foundation-Candelaria, Inc. The conduct of this study has been approved and given relative clearance by MSEUF University Ethics Review Committee with Ethics Review Board.

### AI Declaration

The authors declare the use of artificial intelligence (AI) in writing this paper. In particular, the authors utilised ChatGPT for language editing, restructuring sentences, and improving clarity. The authors take full responsibility for ensuring proper review and editing of the AI-generated content.

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