

A call to action: Supporting our nursing workforce through improved transition to practice

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Dr. Kathryn Halverson, Assistant Professor in the Department of Nursing at Brock University, issues a call to action and a plea for help, urging us to listen to what new nurses are saying

The [Government of Canada](#) identified the health human resources (HHR) crisis as one of the most significant challenges facing Canada's healthcare system (Health Canada, 2022). [The International Council of Nurses cautions the worldwide shortage of nurses should be treated as a global health emergency \(ICN, 2023\)](#). There is an urgent need to recruit and retain nurses and other healthcare professionals to address staffing shortages across Canada and internationally.

Staffing shortages in the healthcare sector have led many hospitals to announce temporary service reductions (Statistics Canada, 2022). Poor staffing levels are negatively impacting patients across the continuum of healthcare, from outpatient encounters and elective procedures to emergency medicine and inpatient hospitalizations. For nurses to provide quality care resulting in positive patient outcomes, adequate staffing levels must be in place (Jarrar et al., 2018). Adverse events may include hospital-acquired infections, medication errors, falls, pressure wounds, readmissions, or patient mortality (Nantsupawat et al., 2022; Winter et al., 2020). These events have been observed across a variety of specializations when nurse staffing is low. Addressing the recruitment and retention of new nurses is more urgent than ever before as the social impact of staffing shortages continues to compromise patient safety and contribute to nurses leaving the profession.

[The Canadian Health Workforce Network and Canadian Federation of Nurses Unions presented a set of evidence-based solutions targeted to support and sustain nursing in Canada in response to intersecting issues such as shortages and inadequate staffing \(Ahmed & Bourgeault, 2022\)](#).

[The Royal Society of Canada \(RSC\) issued a report in 2022 titled Investing in Canada's Nursing Workforce Post- Pandemic: A Call to Action](#). This report highlights four recommendations, including to strengthen the voice of nurses in policy and planning at multiple levels to promote the valuation of the nursing workforce (RSC, 2022).

The [Government of Canada's Health Human Resources Symposium Summary Report](#) suggests a short-term action to create positive workplace culture and practice environments is to assess the current health workforce culture through focused engagement (i.e. interviews) with frontline healthcare workers (Health Canada, 2022). The calls to action outlined below are supported with quotes from interviews with new

graduate nurses practicing in Ontario, Canada to strengthen the voice of nurses and reflect focused engagement aimed at assessing the current health workforce culture. These quotes have been shared by the brave nurses interviewed by the author and are shared with consent and appropriate ethical clearance.

Calls to Action:

1. Improve Working Conditions:

In my research interviews with newly graduated nurses, they consistently identify heavy workloads as a key factor threatening their retention. The following quotes are examples of this frustration shared by new nurses, offering insight into why some nurses leave the profession early in their careers. The fear, uncertainty, and disappointment the nurses express offers insight into why intention to leave rates have risen to 20% around the world according to the ICN (2023):

- “About three days after my orientation, having 6-10 patients on day shift, I started not loving my job anymore. I couldn’t be the nurse I know I could be” (Nurse “Kallie”)
- “You don’t have time to ask questions.” (Nurse “Sophie”)
- “Nurses are busy and exhausted and burnt out....” (Nurse “Jay”)
- “I didn’t expect it to be as scary as it was. I come in early to research everything because it takes one wrong move to potentially kill someone. These patient’s lives are in your hands. You can’t control if you have three patients or nine patients on a day shift.” (Nurse “Darius”)
- “They’re just begging people [to work] ...If you keep going to the well, it’s going to run dry.” (Nurse “Jay”)
- “More of us are going to burn out.” (Nurse “Magda”)

2. Support Nurses:

New nurses report a lack of support in practice as a factor contributing to feeling unprepared and lacking the confidence to provide safe and competent patient care. Experienced nurses, often tasked with caring for the most acute patients in the hospital, often report feelings of overwhelm and burnout. The limited capacity of nurses to train and supervise their junior colleagues creates a need for new models of mentorship and support. Some organizations have implemented Clinical Coaches, Clinical Resource Nurses, Clinical Leaders, and more technology based “Ask a Nurse” phone or messaging systems. Support for new nurses that extends beyond their individual orientation periods and is made available to them at any time have a greater reach and impact. The following quotes are examples of this plea for more support as new nurses transition to practice in the current clinical context laden with heavy workloads and high patient acuity:

- “Orientations should be longer. I don’t think someone is qualified to be working in an intensive care unit after four weeks.” (Nurse “Marie”)

- “Maybe I’m providing inappropriate care. I can’t tell because I don’t feel there is enough supervision.” (Nurse Darius”)
- “Asanewgradlwishlhadalittle more support. I was super emotional every day and I just said, “That’s enough.” (Nurse “Henry”)
- “You’re by yourself.” (Nurse “Marie”)

3. Optimize Academic-Practice Partnerships:

In response to the urgent need to address staffing shortages in the health care sector, there is an opportunity for postsecondary institutions to work collaboratively with their clinical partners to optimize academic-practice partnerships for nurse recruitment and transition. Onboarding pathways can enhance opportunities for training and clinical exposure through paid employment for nursing students that can serve to alleviate workloads and enhance preparation and transition to practice. There are also benefits of collaborating on research including longitudinal studies to understand how nurses are prepared for the role as students, the formation of professional identity, the transition experience, perceptions of training and onboarding, and threats to retention.

4. Prioritize Public Policy:

In the best interests of the health and safety of the public, supportive policy and legislation specifying the maximum number of patients to whom a nurse can be assigned, would reflect a move to incorporate a leading international practice. Nurses struggle morally when they have more patients assigned than they can safely care for, and when working in conditions that they know are not right, fair, or safe. When policies perpetuate stressful work environments and inadequate staffing, patients and nurses suffer. Nurses need to be heard and empowered in the pursuit of safe and satisfying working conditions. Enforcing safe staffing ratios, through legislation, policy, or accreditation, is not only in the best interests of public safety but is a key factor in strengthening the recruitment and retention of nurses.

Conclusion: Recruitment and retention of the nursing workforce

To conclude, insight into factors influencing transition to practice for new nurses is best understood by listening to the voices of nurses themselves. New graduate nurses transitioning to practice have a particularly valuable ability and potential to identify challenges and solutions related to recruitment and retention at the organizational level, for the nursing profession, and for the healthcare system as a whole.

The healthcare system and its leadership, educators, policymakers, and researchers have the opportunity and responsibility to hear their cries for help and respond with their own calls to action.

Our new nurses are crying for help; are we listening?

Links/references

- [ICN: Recover to Rebuild: Investing in the Nursing Workforce for Health System Effectiveness \(2023\)](#)
- [CHWN and CFNU Report – Sustaining Nursing in Canada \(2022\)](#)
- [Royal Society of Canada Investing in Canada’s Nursing Workforce Post-Pandemic: A Call to Action \(2022\)](#)
- [Government of Canada HHR Symposium Summary Report \(2022\)](#)
- [Government of Canada Nursing Retention Toolkit \(2024\)](#)
- [ICN report says shortage of nurses is a global health emergency \(2023\)](#)

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