

## Review

## Closing the gap on nurse retention: A scoping review of implications for undergraduate education

Sarah S. Collard<sup>a,\*</sup>, Janet Scammell<sup>b</sup>, Stephen Tee<sup>a</sup><sup>a</sup> Royal London House, Christchurch Road, Bournemouth, Dorset BH1 3LT, UK<sup>b</sup> Bournemouth House, Christchurch Road, Bournemouth, Dorset BH1 3LT, UK

## A B S T R A C T

**Objectives:** Newly qualified nurses leave the profession at a higher rate than any other year of experience. Undergraduate education influences nurse retention following qualification. However, it is unclear if the factors associated with intent to leave are included within programmes to aid retention once qualified. A scoping review was conducted to explore the literature within nursing as well as social work undergraduate education to obtain viewpoints from an allied profession with similar retention barriers.

**Design and data sources:** Following PRISMA extension guidelines for scoping review, the research question used to explore the literature was: What is the impact of undergraduate nurse and social work education on retention when newly qualified? Databases searched were BNI, CINAHL complete, Science Direct, PsycINFO, Medline Complete, Academic Search Complete and ERIC.

**Review method:** One author undertook a comprehensive electronic and hand-search of relevant research articles. These were then discussed with two authors for inclusion within the review and data extracted for thematic analysis.

**Results:** Limited through search inclusion and quality of research, ten research papers met the criteria for this review. Main themes found were resilience and commitment, perceived knowledge and confidence, preparation for transition and expectation of supervision.

**Conclusion:** The literature presents the need to strengthen resilience-building within undergraduate education in the transition to newly qualified practitioner, support to cope with the emotional and physical impact of professional practice as well as developing confidence in one's skills, guidance for career progression, promotion of authentic leadership in work-place mentors and commitment of both the University and health or social organisation to support staff to be healthy and feel valued.

## 1. Background

Registered nurse (RN) retention is a pressing global concern in healthcare, compromising healthcare systems, individuals' wellbeing and patient care. In 2018, 29,786 RNs left the register in the United Kingdom (UK), 23.1% higher than 2013 (RCN, 2017). In 10 European countries (Belgium, Finland, Germany, Ireland, Netherlands, Norway, Poland, Spain, Switzerland and UK), the turnover for RNs leaving the profession was 5 to 17% (Buchan et al., 2018). Furthermore, newly qualified nurses (NQN) have shown to leave the profession at a higher rate than any other year of experience or time of life transition (Van Camp and Chappy, 2017).

The initial stress, anxiety, fatigue and feeling ill-prepared for qualification heighten the desire to leave (Tapping et al., 2013; Morrow, 2009; Eckerson, 2018; Olsen-Sitki et al., 2012). Moreover, the lack of confidence in performing multiple functions as a RN increases their stress (Tapping et al., 2013; Morrow, 2009). These complex factors associated with NQNs leaving the workforce have been reported over time (Health Education England (HEE), 2014; Brennan, 2017; Olsen-

Sitki et al., 2012).

Undergraduate pre-registration nurse education influences retention following qualification. These programmes are structured to prepare NQNs for RN practice (Trice et al., 2007; West et al., 2012), but it is unclear the extent to which factors linked to intent to leave are included. However, there is evidence that mechanisms to support NQNs and student nurses such as clinical placement-based preceptors and mentors, internships and further educational courses post-registration have been implemented to provide personal and professional support to enhance retention (Jenkins and Germaine, 2018; Huckabay, 2009; Cochran, 2017). Terminology for support roles differ internationally, so for the purpose of this paper, the terms 'preceptor' refers to structured support for NQNs and 'mentor' is an individual who provides support and supervision for student nurses. In the United States (US), nurse residency programmes (including supervision and structured professional development) have shown a decrease in stress levels, increase in confidence as a NQN, and higher retention rate as a result (Eckerson, 2018). A key difference within the UK and US systems is that residency is optional, whereas preceptorship is mandatory.

\* Corresponding author.

E-mail address: [Scollard@bournemouth.ac.uk](mailto:Scollard@bournemouth.ac.uk) (S.S. Collard).<https://doi.org/10.1016/j.nedt.2019.104253>

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Implementation of preceptorship and mentorship in today's high pressured healthcare climate brings many challenges (Irwin et al., 2018). Despite these initiatives, due to high physical and emotional demands of contemporary practice, nurse retention is still showing signs of worsening, especially within nursing specialties, such as older person's nursing (Chenoweth et al., 2014; McGilton et al., 2013). Moreover, this is not a problem confined to nursing but impacts in a range of health and social care professions (Alkassabi et al., 2018; Shim et al., 2009). Research is sparse in relation to most health professions although some is evident in social work, a profession facing similar challenges (Rosenthal and Waters, 2006; Jacquet et al., 2007; Searle and Patent, 2013; Webb and Carpenter, 2012; Cho and Song, 2017). Social work is defined as "a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people" (IFSW, 2014). Social work research has reported an increase in emotional labour and decrease in trust in the organisation they work for, causing intent to leave (Cho and Song, 2017). Furthermore, limited career development, professional identity, lack of support and caretaking issues were presented as reasons for leaving (Wermeling and Smith, 2009; Chiller and Crisp, 2012; Shim et al., 2009).

Nurse retention, particularly of NQNs, has been shown to be a global problem in healthcare. It seems pertinent to explore research evidence concerning the impact of undergraduate education in preparing new graduates to positively manage the realities of NQN practice and thereby support intent to stay. As similar issues are evident in social work, we wanted to explore whether there are developments within undergraduate social work education which could provide insights for nurse education.

## 2. Methods

To investigate the literature exploring undergraduate educational structures and content in relation to the retention of newly qualified nurses and social workers, a scoping review was conducted. Following PRISMA extension guidelines for scoping review (Tricco et al., 2018), the research question used to explore the literature was: What is the impact of undergraduate nurse and social work education on retention when newly qualified?

### 2.1. Inclusion and exclusion criteria

Inclusion and exclusion criteria were set to explore the search question (Table 1). Research quality was judged via discussions between authors on the uniqueness of the research, design of the study and presentation of the results (e.g. participants used but no number of participants provided; research method used did not provide accurate

**Table 1**  
Search criteria and terminology.

Inclusion criteria:
Peer-reviewed
Rigorous research discussing undergraduate education and retention post-qualification within nursing and social work
Research published within the last 18 years (2000-2018)
Written in English
Exclusion criteria:
Commentaries, guidelines, literature reviews
Published prior to 2000
Research focused solely on undergraduate nurse or social worker student attrition; or qualified nurse and social worker retention
Poor quality peer-reviewed research
Search terms:
Nurse education, retention, undergraduate, university, college, social work and education
Boolean operators and truncation of search terms:
Nurs*, Undergraduate*, social work*, "new* qualif*", graduat*, register*, "new* register"

detail). The PRISMA guidelines (Tricco et al., 2018) do not require the use of critical appraisal tools and therefore the quality of the research was appraised using these criteria.

### 2.2. Search strategy

Main author\* conducted a comprehensive electronic literature search of relevant peer-reviewed journal articles. Subsequent hand searching of relevant articles and reports was conducted to identify additional literature. The databases used to search were BNI, CINAHL complete, Science Direct, Psycinfo, Medline Complete, Academic Search Complete and ERIC. Multiple search terms and variations were used to obtain the final literature (see Table 1). Decisions for the inclusion of literature were discussed with \*(co-author) and \*(co-author) based on quality of the paper, uniqueness and relevance to our aims. As a result, ten research papers were included within this review (see Fig. 1).

### 2.3. Data extraction and charting process

Upon the completion of the search, the literature was collated and a summary of descriptive characteristics of the studies was presented in a table produced by \*(main author) (Table 2). JS examined the table and confirmed its form and content.

### 2.4. Analysis

After data extraction, thematic analysis (Braun and Clarke, 2006) was conducted to explore the key themes within the papers and compare the findings between studies. All authors reviewed the themes and agreed the final findings structure.

## 3. Results

### 3.1. Characteristics of sources of evidence

The initial search found 1715 (nursing) and 148 (social work) articles. Upon further scrutiny of relevance and duplicates being removed, the final number of papers included was 10 (7-nursing; 3-social work). Fig. 1 details the search numbers through the stages.

Methods used in the 10 studies were thematic analysis (n = 2), content analysis (n = 1), descriptive statistics (n = 2), descriptive and inferential statistics (n = 1), structural equation modelling (n = 1), mixed methods (n = 2) and case study (n = 1). Locations of the research were Australia (n = 3), United Kingdom (UK) (n = 2), United States (US) (n = 2), Ireland (n = 1), China (n = 1) and Singapore (n = 1). The detailed descriptions of the studies are shown in Table 2.

### 3.2. Key themes

Four themes emerged: Resilience and commitment, Perceived knowledge and confidence, Preparation for transition and Expectation of supervision.

### 3.3. Resilience and commitment

Resilience is the ability to overcome adversity and turn negative experiences into a positive outlook for the future (Lopez et al., 2018). Physical and emotional labour was a common thread within five of the selected papers. Stress and high workloads were some of the main grievances reported by students and registered nurses (Suresh et al., 2012; Lopez et al., 2018; Heslop et al., 2001; Phillips, 2017). However, within social work and nursing, building resilience was argued to be a tool to enable coping with these issues as well as aiding commitment towards the profession (Clements et al., 2014; Lopez et al., 2018). Furthermore, within the undergraduate education system for social

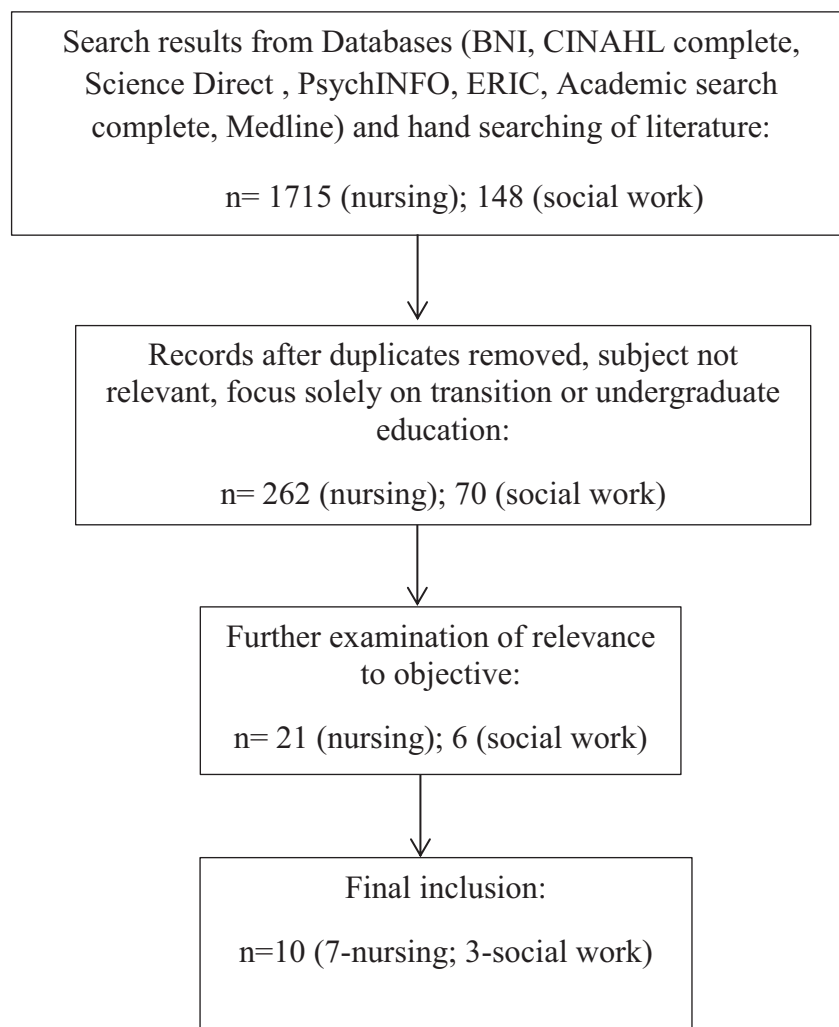


Fig. 1. Search strategy and selection process.

work in the US, [Olcoñ et al. \(2018\)](#) discussed how such issues are addressed by using a learner centred approach within their education programme. For example, because of family obligations and employment, a focus on coursework is a struggle and as a result, the Bachelor of Social Work (BSW) programme has incorporated steps to decrease these issues and facilitate the student's continued journey on the programme (e.g. low-cost child care, free parking, scheduling class times for ease of students working full-time). This commitment shown by the educator has been presented as one way to show the mutual commitment to the students ([Olcoñ et al., 2018](#)). This is also shown within the nursing literature as the higher rate of job satisfaction positively correlated with the commitment shown by the organisation ([Wu and Norman, 2006](#)).

Examining clinical placements for undergraduate nursing students in Singapore, [Lopez et al. \(2018\)](#) found that some nursing students initially found the placement traumatising and that a lack of support increased the impact of the stress and worry. However, over time, resilience was built through coping strategies such as speaking with peers, positive reframing as well as learning to adjust to the culture of the ward as experience was gained. This was also shown within [Phillips \(2017\)](#) when “survival tactics” were self-learned by the nursing students in order to cope with the hostile treatment felt from others on the ward.

### 3.4. Perceived knowledge and confidence

Perceived lack of knowledge of clinical methods as well as confidence to make decisions and management of clinical situations were shown to cause issues for students and registered nurses ([Suresh et al., 2012](#); [Heslop et al., 2001](#); [Lopez et al., 2018](#); [Lea and Cruickshank, 2007](#); [Phillips, 2017](#)). Within social work, similar findings were presented as reasons for leaving the profession, but were directly related to the registered professionals' belief that a poor educational background had prepared them inadequately for the role ([Wermeling et al., 2013](#); [Clements et al., 2014](#)).

Within nursing, [Suresh et al. \(2012\)](#) found students in Ireland felt dissatisfied with their clinical placements and were not learning as much as they should. Student expectations of placement experience were varied and a source of disappointment when not fulfilled. Some felt they were given too much responsibility, others felt too little. Similar varied expectations were expressed by NQNs where a lack of confidence and preparedness for this new role was reported ([Lopez et al., 2018](#)).

Exploring confidence in relation to relationships amongst staff, student nurses expressed the expectation they would form good working relationships with other NQNs, patients, relatives and other health professionals ([Heslop et al., 2001](#)). However, they lacked confidence in having good working relationships with doctors and more experienced colleagues once in the workplace. [Heslop et al. \(2001\)](#) was based in Australia, but these sentiments were also expressed in the UK

**Table 2**  
Descriptive characteristics of included studies.

Title/authors (date)	Research question/aim	Participants	Study setting (e.g. place of study)	Method	Themes	Key findings
Clements et al. (2014)	Explore the issues related to student commitment that may aid the development of interventions to use during their training	10 participants; 3 social work lecturers and 7 social work students	UK	Semi-structured interviews; thematically analysed	Resilience and commitment; Perceived knowledge and confidence; Preparation for transition; Expectations of supervision	Commitment was seen as dedication to the profession and its values; Support varied in quality, but peer support was generally positive; Defining the profession was discussed in terms of personal and societal values. Key findings were in relation to the impact of support that could reduce their commitment and potentially lead to retention issues. Student nurses favoured large public hospitals and looked for good graduate programmes with opportunities for guidance and support. Most expected to achieve good working relationships with professional colleagues and patients. Final year students had apprehension of meeting workplace performance expectations; had self-perceived lack of clinical experience.
Heslop et al. (2001)	Third year nursing students' expectations of the graduate nurse role. Examines how prepared they feel to fulfil it.	105 third year students; 99 female, 6 male; 20–25 yrs. (63 participants), 26 + (42 participants)	Australia	4-part questionnaire developed based on themes-expectations, fears, support expected, and perceptions of the graduate year role and programme. Analysed using Minitab. Open questions analysed via content analysis.	Perceived knowledge and confidence; Preparation for supervision	Work preparation satisfaction was a significant predictor of job satisfaction. Effect on expectations of leaving the job through work environment satisfaction. Intentions to leave associated with work environment (staff, support, quality of care, physical environment, professional development, and responsibility)
Kenny et al. (2016)	Examines satisfaction with different aspects of the job and job overall, and participation in a new graduate transition programme.	204 registered nurses in their first job after graduating from BN programme.	Australia	Survey (Milton-Wildey et al. 2014) measured satisfaction with nursing education. Job satisfaction was measured in survey (used previously published research). Structural equation modelling used to analyse.	Perceived knowledge and confidence; Preparation for transition	New graduates early (first months) experiences were influenced by the culture of the ward environment (e.g. lack of support, hostile, senior research staff with hostile and aggressive behaviour), workload and level of responsibility (time-management challenging, workload allocation unfair, extra responsibilities), and limited structured support during their graduate nursing programme.
Lea and Cruickshank (2007)	Explore role transition for NQNs in a rural setting.	10 new graduate nurses	Australia	In-depth interviews; hermeneutic-phenomenological framework; thematic analysis	Perceived knowledge and confidence; Preparation for supervision	Challenges faced during clinical placements: facing the reality of nursing work; lack of support - (stress reported and lack of support to overcome/aid) 2) Building resilience over time: coping strategies; adapting to the ward culture; seeking support- (coped by talking with peers or using positive reframing; Gradual adaptation to ward; sought support from peers, clinical preceptor from the education institution, knowing about ward culture and clinical setting prior to placement).
Lopez et al. (2018)	Learn how undergraduate nursing students perceive and experience clinical placements and identify the factors that help build resilience	19 participants- 9 (3rd year) and 10 (4th year) undergraduate nursing students. Mean age- 23.15 years	Singapore	Focus groups; content analysis	Resilience and commitment; Preparation for transition; Expectations of supervision	1) Challenges faced during clinical placements: facing the reality of nursing work; lack of support - (stress reported and lack of support to overcome/aid) 2) Building resilience over time: coping strategies; adapting to the ward culture; seeking support- (coped by talking with peers or using positive reframing; Gradual adaptation to ward; sought support from peers, clinical preceptor from the education institution, knowing about ward culture and clinical setting prior to placement).
Olcoñ et al. (2018)		N/A	United States			

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Table 2 (continued)

Title/authors (date)	Research question/aim	Participants	Study setting (e.g. place of study)	Method	Themes	Key findings
Phillips (2017) NB- Unpublished thesis	To understand the strategies to recruit and retain Latino students in social work BSW programmes.	10 student nurses; undergoing placement	UK	Case study; Multiple sources of information collected-historical records, syllabi from social work courses and assignments, school's and BSW programme's website, course catalogues, and University brochures; BSW programme retention and college satisfaction of current students and postgraduate opportunities of former students) from the BSW programme and University's institutional research office.	Resilience and commitment; Preparation for transition; Expectations of supervision	Applies community cultural wealth model; BSW programme incorporates cultural capital in the areas of aspirational, familial, linguistic, social, navigational, and resistance.
Suresh et al. (2012)	Explore the lived experiences of ten student nurses during completion of a longer practice placement during their undergraduate nursing education.	120 newly qualified nurses, 129 fourth year student nurses	Ireland	Semi-structured interviews within one week of completing their final three months in practice. Data were analysed using Giorgi's (2009) modified Husserlian approach to descriptive phenomenology.	Resilience and commitment; Perceived knowledge and confidence; Preparation for transition	Four main themes: belongingness and fitting in; taking charge of own learning; making sense of the complexities of nursing; and becoming a nurse. Findings revealed challenges to current thinking as well as a process of transformative learning to prepare themselves for registration as a professional nurse. Aided by their mentors encouraging autonomous practice, they began to experience a sense of awakening to the responsibilities and accountability that they will face as a registered nurse. NQN scored highest in workload and lowest in conflict with other nurses; Student nurses scored highest in inadequate preparation and lowest in conflict with other nurses. Workload was scored high for student nurses, but not as high as NQ. NQ scored higher in relation to perception of conflict with physicians. Perceived stress is not higher in NQ compared to student nurses.
Wermeling et al. (2013)	What is the effect of social work education on retention of this professional workforce? Further research questions- Why do social workers intend to leave the profession? Why do social workers actually leave the profession?	785 participants; convenience sample drawn from CSWE accredited MSW programmes in the mid-South region of the United States	United States	Electronic survey; questions developed from literature within this topic, education scale developed using Herrick et al. (1983).	Perceived knowledge and confidence; Preparation for transition	Social workers who wanted to leave the profession left for similar reasons as to those who had already left. Majority of participants who left or intended to leave the profession stated that they did not have a high quality of undergraduate education within social work.
Wu and Norman (2006)	Explore the relationships between job satisfaction and organisational commitment, role conflict and ambiguity, and demographic variables associated with retention of nurses within China; compare these variables with non-Chinese student nurses and between student nurses and qualified nurses.	71 female full-time nursing students. Age between 20 and 25.	China	Self-administered survey translated from English to Chinese. Five sections: Job satisfaction, organisational commitment, role conflict and ambiguity, career motivation and aspirations, demographic information. Descriptive and inferential statistics used.	Perceived knowledge and confidence; Preparation for transition	Positive relationship between job satisfaction and organisational commitment; negative relationship between job satisfaction and role conflict and ambiguity. Students least satisfied with the pay of the job. Clinical position was the preferred job. Suggestions that student nurses' experience in clinical placement could influence their future plans of staying or leaving. Commitment to Chinese healthcare was a predictor of retention. Students desired clearer explanations and rational in the position.



by Phillips (2017) who found students felt shunned by some staff and had to develop the confidence to make their voice heard.

In rural Australia, the lack of structured support created a negative work environment for NQNs (Lea and Cruickshank, 2007). Some were unable to trust colleagues as hostility and aggressive behaviour were felt. This lack of support combined with the heavy workload reduced confidence and created feelings of stress and worry (Lea and Cruickshank, 2007). Furthermore, NQNs felt that the workload and level of responsibility expected was beyond their preparation, nor what they should be responsible for, resulting in role ambiguity and role conflict (Lea and Cruickshank, 2007). This differed with findings from Wu and Norman (2006) who found low levels of role conflict and ambiguity within Chinese student nurses.

Kenny et al. (2016) investigated the link between satisfaction with nursing education and job satisfaction in Australia. The highest levels of dissatisfaction reported were focused on preparation for working in nursing and adequate information on all aspects of the nursing profession. This dissatisfaction was also reported within Wu and Norman (2006) as there was a range of satisfaction from 15 to 75%.

Clements et al. (2014) shared the importance of support, particularly of the practice educators (clinical faculty that supervise and assess social work students). Students stressed that a good practice educator was key in aiding their development during placement and also enthusiasm for social work. Furthermore, Wermeling et al. (2013) found that those who remained within the profession rated the quality of their education higher than those who had left.

One way that confidence and comfort in the future role of an RN was developed was through longer clinical placements (13 weeks compared to 5 or 6 weeks), particularly at the end of the programme (Phillips, 2017). Not only did this allow the development of psychological comfort within the workplace environment, but also in working with the team. Whilst some students felt the placement too long, it did allow them to learn to manage fatigue and recognise the value of annual leave (Phillips, 2017). Students placed in community settings reported increased confidence due to 'supervised lone-working', as they perceived their mentors believed them capable of working independently. This support was an aid to improving their confidence and knowledge (Phillips, 2017).

### 3.5. Preparation for transition

Support was a common theme shown to aid preparation for transition in both nursing and social work students (Clements et al., 2014; Lopez et al., 2018; Phillips, 2017; Wermeling et al., 2013; Olcoñ et al., 2018; Wu and Norman, 2006; Kenny et al., 2016; Heslop et al., 2001). Transition is defined as the move from undergraduate student to newly qualified professional. Within social work, the lack of support of practice educators for students on placement caused students to question their desire to continue within the profession upon graduation (Clements et al., 2014). However, peer support aided motivation and added value to training through learning about others' experiences (Clements et al., 2014).

Olcoñ et al. (2018) described the extent to which the BSW programme includes multifaceted aspects of preparation for the students for qualification. Such examples include maintaining and emphasising that speaking the language of the clients is very helpful when in the field. In addition, it was promoted that support and networking opportunities are another strong aid to prepare the students for their new role post-graduation. Again, this confirmed findings within Wermeling et al. (2013) who found those more likely to leave perceived they were poorly prepared for the professional role.

As discussed in previous sections, insufficient support in multiple aspects of placement and their new role as a qualified nurse have shown to be the most common deterrents for student nurses to feel unprepared for their new role (Wu and Norman, 2006; Kenny et al., 2016; Lopez et al., 2018; Heslop et al., 2001; Lea and Cruickshank, 2007). Wu

and Norman (2006) suggested there needs to be a clearer explanation and rational for how and what things are done within clinical placements, thus lessen the confusion and resultant feelings of role conflict and ambiguity. As a result, this will increase satisfaction within the new workplace. Similar findings were shown within Kenny et al. (2016) when preparation for work in nursing and adequate information concerning all aspects of the job were found to have the highest level of dissatisfaction in preparing for their new role. Interestingly, Phillips (2017) found most students valued longer clinical placements at the end of their programme to prepare them for their role as a NQN. The role of supervision in this transition is pivotal and is the focus of the next section.

### 3.6. Expectations of supervision

Both nursing and social work literature stresses the importance of supportive and effective supervision to aid retention (Suresh et al., 2012; Lopez et al., 2018; Heslop et al., 2001; Lea and Cruickshank, 2007; Olcoñ et al., 2018; Clements et al., 2014). Student nurses expressed feelings of "being seen as a 'helping hand'" (Suresh et al., 2012, p774) as opposed to a learner. The dissatisfaction with placements was shown through feeling isolated and unsupported in the clinical environment (Suresh et al., 2012), which was also expressed by NQNs in rural communities in Australia (Lea and Cruickshank, 2007). Such sentiments included having a lack of support from management and feeling rebuked by staff whom they asked questions concerning clinical decisions that they felt were beyond their knowledge (Lea and Cruickshank, 2007).

One way to reduce these feelings was through seeking support from their lecturer within the University setting rather than at their clinical placement (Lopez et al., 2018). Students perceived that lecturers focused on helping them develop as compared to mentors within the clinical setting who they felt may not have the student's best interests in mind. Heslop et al. (2001) found students had high expectations of support from their mentor. Support was also expected to be obtained whilst adjusting to being a NQN and to the procedures or processes of the organisation. Building upon earlier discussions in regards to preparation and confidence, the lack of support within placement-based education was linked to feeling unprepared for their professional role.

In contrast, Phillips (2017) reported more positive experiences of support, both from lecturers and clinical mentors. The expectation that student nurses would be adequately guided was met by most, although some felt unsupported more than they had expected or hoped. However, independent working was also felt to be a learning opportunity that enhanced confidence.

Within social work education, practice educators were a key avenue of support (Clements et al., 2014). Lecturers promoted the importance of practice educators to the students in order to signal the individuals who will aid their development whilst in placement. As shown within nursing, negative experiences with practice educators impacted students to question their motivation to continue within this profession (Clements et al., 2014). Olcoñ et al. (2018) presented the positive relationships with lecturers to be promoted to the students. These relationships were seen as beneficial to improving confidence and knowledge within the programme and maintain student motivation.

## 4. Discussion

Whilst the detail of education preparation for RNs and social workers varies considerably between countries, it seems evident from the findings that the systems of nurse and social work preparatory education appear to be failing to adequately prepare many students for the rigours of the realities of practice. Whether it is inadequate skills development, lack of support or poor resilience, the education provider has an ethical and contractual responsibility to ensure that such issues are fully addressed in order to retain good practitioners and help stem

the flow from the professions (Sytsma et al., 2009). Perhaps it is time to rethink the structure of programmes, particularly in the final year and focus more fully on preparedness for practice. The common themes arising from the literature within nursing and social work were transition, resilience, authentic leadership, commitment and support and should therefore be the focus of a pre-qualifying programme.

#### 4.1. Transition

Literature exploring transition from student to qualified professional discussed the current barriers and aids for retention. Pressures of the job, lacking confidence and feelings as a new practitioner need to be discussed within undergraduate education in order to prepare students for the realities of professional practice (Morrow, 2009; Hussein et al., 2017; Cho and Song, 2017). Our findings indicate that the quality of supervision both as a student and NQN or social worker is key for intent to stay (Chiller and Crisp, 2012; van Rooyen et al., 2018).

#### 4.2. Resilience

Resilience was a key concept within the literature as a method of coping with work pressures. The importance of personal and organisational resilience in highly pressured work-environments is well established (MacAllister and Lowe, 2011; Jenkins and Germaine, 2018). Both nursing and social work are physically and emotionally demanding (Etheridge, 2007) and as care needs are increasing (House of Commons Health Committee, 2018; Bowyer and Roe, 2015), new practitioners need to be equipped to deal positively with this reality. All nursing and social work programmes have interpersonal skills incorporated (Olcoñ et al., 2018; NMC, 2018), but resilience needs to be specifically addressed in the context of mental health wellbeing. This should involve teaching strategies to build resilience and role modelled by supervisors in practice (Lopez et al., 2018).

A recent report focused on NHS staff and learner mental well-being (HEE, 2019) highlighted that fear of stigma and being labelled as 'not coping' deterred health care staff from seeking timely support. Such attitudes are a feature of wider society and are being challenged, but need to be embedded in nurse and social work education. These findings have shown that self-awareness coping strategies and knowing when and how to seek help should be promoted within the undergraduate curriculum. This could be through scenario-based education developed from anonymised case studies collaboratively built with industry partners to be used effectively in the final year of the programme.

#### 4.3. Authentic leadership

Our review indicates that poor leadership in practice placements impacts on the learning environment. If staff do not feel valued, this can impact learners as dissatisfaction leads to poorly motivated staff (Chiller and Crisp, 2012; Hussein et al., 2017), including those undertaking the pivotal role of practice-based supervisor and assessor. Our findings confirmed previous research (Hussein et al., 2017) of students feeling unable to ask questions and unsupported in developing knowledge and skills. Leadership is a factor here as this sets the tone of a placement and therefore, the learning culture (Chiller and Crisp, 2012; Phillips et al., 2014; van Rooyen et al., 2018). Preparation and support of mentors is central to this but given resource constraints, their role can be unappreciated and unsupported as in the case of nursing in the UK; for example, clinical priorities take precedence (Phillips et al., 2014; Hussein et al., 2017). As providers of education, health care organisations working with universities have a moral obligation to invest in training and valuing mentors, not only to support student education but to act as role models to newly qualified practitioners when they take on this role. To enhance further the student's desire to stay in the profession once qualified, there needs to be strong support-based

guidance from the start. This can lead to NQN and social workers who feel they have had the proper tools prior to starting their new role and also feel continual support to progress their career. Authentic leadership has therefore been shown as a further key part of enhancing nurse retention.

#### 4.4. Commitment

Commitment of the individual and of the organisation was a strong theme that arose throughout the literature. One key method that was promoted as an aid was to build in structures within the educational system and post-qualification to support health and wellbeing. Social work literature revealed that one way of providing this support would be to have adaptable aids for the students and incorporate elements into the curriculum that assist post-qualification transition. This could be incorporated further within the curriculum of undergraduate nurses to ease the 'reality shock' of being a NQN. Such elements could be the promotion of teamwork (e.g. bullying and hostile treatment to others on your team makes your work harder), knowledge that seeking support is a positive method to ease worries and adding in methods of building resilience (Rush et al., 2013; Morrow, 2009). Furthermore, as longer placements may be a strategy to increase NQNs' confidence and preparation, this could be further examined as a key to nurse retention.

Students should emerge from their preparatory programme with the knowledge, skills and attitudes to work as a new practitioner. However, it is unrealistic for organisations to expect new staff to 'hit the ground running', although given workload pressures, this is frequently their experience (Phillips et al., 2014; Morrow, 2009; Spiva et al., 2013). Policy and the resources to support this need to reflect the call for support of newly qualified practitioners; this is mandatory for nursing in the UK via the preceptorship scheme (HEE, 2017). The literature clearly illustrates the value newly qualified practitioners place on this support but even where it is mandated, clinical pressures impact on how effectively it operates (Spiva et al., 2013). Students therefore need to learn how to identify and access support as well as develop assertiveness skills to clearly make a case for the help they need. Personal and professional development modules focused on study skills are common in many professional preparation programmes but often sit in the first year (Rush et al., 2013); using industry-education collaboratively developed scenarios to enable students to apply these skills when their minds are focused on transitioning to professional practice may be valuable.

#### 4.5. Support

Our findings report that support during education and post-qualification, is a key coping mechanism to affect intent to stay. One strong method of support was peer support. Many professional programmes incorporate Peer-assisted learning (PAL) schemes (Bournemouth University, 2001) where such skills may be developed. However, independent learning is another facet to consider (Foster et al., 2012). Despite these initiatives, support issues particularly related to health and social care profession students persist (HEE, 2019). Health and wellbeing for staff needs to be specifically explored with students so that the concept of seeking and accessing help is role-modelled and normalised. Occupational health departments in University and health care provider organisations could work collaboratively to provide easier access to resources via any internet enabled devices.

#### 4.6. Limitations

Although this review has suggested key areas that are in need of further investment within undergraduate nurse and social work education, there were limitations present. One key limitation was the quantity of peer-reviewed research within this area. This limited the strength in providing a more thorough finalised review. The second

limitation was the quality of the literature. A high-standard of published research included was not consistent and therefore limited relevant and rigorous insight on the topic.

## 5. Conclusion

Given the global shortage of nurses and the apparent haemorrhaging of expensively trained staff from the workforce, it seems incumbent upon educators, regulators and health service providers to urgently work together in order to strengthen programmes and support mechanisms, before, during and after qualification. This scoping review provides a simple, but evidence-based framework, known as TRACS, which could be adopted and adapted to suit all nursing programmes, and could go some way to addressing the crisis in the global nursing workforce.

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## Ethical approval

Not applicable.

## Declaration of competing interest

None declared.

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