

## Perceptions of Role Transition among Nursing Interns at Tanta University

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### Abstract:

**Background:** The transition from nursing student to staff nurse can be exciting, stressful and challenging.

**The aim** of the present study is to assess nursing interns' perception about role transition.

**Research Design:** Descriptive design was used.

**Setting:** the study was conducted at Tanta University main hospital.

**Subjects:** Convenient sample of nursing interns students (N= 113) at Tanta University's main hospital and willing to participate in the study.

**Tool for data collection:** Modified perceptions and expectations of role transition questionnaire were used.

**Results:** Regarding total score of role transition, more than fifty (54.86%) of nursing interns perceived moderate level of role transition, almost fifty of nursing interns perceived low role transition in role preparation and organization and support domains (42.28%) and (49.56%) respectively. However, the majority of nursing internship (62.83%) perceived high role transition in role competency.

**Conclusion:** This study concluded that nursing interns at Tanta University main hospital perceived level of role transition moderate, majority of them perceived high role transition in role competency domain while almost fifty of nursing interns perceived low role transition in role preparation and organization and support domains.

**Recommendations:** Further attention should be paid to academic preparation of nursing interns to promote their perceptions about role transition. Restructuring of orientation programs in terms of content and duration for nursing interns will contribute to their awareness about role transition.

**Keyword:** Role transition, Nursing interns.

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### I. Introduction

Transition from student to qualified nurse is a stressful experience due to the increase in the newly graduated nurse responsibility and accountability<sup>(1)</sup>. New nurses described transition as have feeling of incompetence; having overwhelming sense of responsibility; being fearful from physicians; and finding difficulty in organizing, prioritizing and delegation<sup>(2)</sup>. Transition is a period of learning, adjustment and socialization, when the nurse applies, consolidates and increases their existing knowledge, gaining competence (knowledge, skills and attitude) that is applicable to the nursing practice of the clinical setting or patient population in which they are expected to perform<sup>(3)</sup>.

A period of transition occurs when any nurse or midwife commences in a new clinical area. There is no specific time period in which transition occurs – it is an individual process. For nurses or midwives undertaking transition to professional practice as well as a new context, additional support will be focused on the first three to six months of practice<sup>(4)</sup>. During the transition period, newly graduated nurses encounter many distressing events, including extra loads of work and responsibility, the fear of doing mistakes, clinical skills deficits, inconsistent preceptors, having to cope with patients' deaths, working in emergency departments and time management<sup>(5)</sup>. Role transition involves transforming one's professional identity. A new graduate makes a transition from student role to nurse role. Expectations of students are clearly specified in course and clinical objectives however, expectations of new nurse as an employee may not be clear<sup>(6)</sup>.

Role transition attributes include: awareness of the existence for new and old role; a set of expectations that define the behavior deems appropriate for the position; changing the way of thinking, abilities acts; and a process of changing from one state to another<sup>(7)</sup>. The new nurses work adaption process over the first three-month period included three stages : The *first stage* is Understanding: New nurse's knowledge and skills are inadequate to handle routine work, adjusting to the role transition is difficult. Feelings of anxiety emerge related to fears of incompetence, communication difficulties must be faced in the handover process. New nurses adopt feelings of attachment to their preceptors, they must work to adopt appropriate attitudes and approaches to

nursing practice, and support is sought from family, teachers and friends. *The second stage* is Acclimation: Learning to care for patients independently, seeking role models, learning to adapt to night shifts, trying to identify with co-workers, and seeking support from colleagues, preceptors and head nurses; and *The third stage* is Acceptance: Managing nursing work better in terms of time and organization, feeling gradual acceptance from co-workers, restoring personal enthusiasm for work, starting to consider other, non-work related matters, experiencing and appreciating the support of co-workers and head nurses<sup>(8)</sup>. Support during a period of transition is essential for any nurse or midwife. Transition support will be an individualized, planned process and include quality induction and orientation to the new work context, meeting the requirements of the department's performance management Framework. A high level of additional support assists in a soft and positive transition to the practice setting as well as to the new role<sup>(4)</sup>. Several strategies can be helpful in easing and speeding the process of role transition. These strategies include: strengthening internal resources, assessing the organization's resources, culture, and group dynamics, negotiating the role, growing with a mentor and developing management knowledge and skills<sup>(9)</sup>.

## **II. Significance of the study**

Nursing interns are baccalaureate student nurses who start the role transition from senior student to professional nurse through an internship training program. One of the mechanisms designed and implemented to support new graduate nurses in the work place is internship program which is offered by most hospitals in various formats.<sup>(9)</sup> At Tanta Faculty of Nursing, interns are usually trained in the University Hospitals. They may rotate among several intensive care units as (Neurological, Medical, Neonatal, and Cardiac) and scheduled shifts as part of their clinical training (Ramadan 2004)<sup>(10)</sup>. Intensive care unit is specialized recovery area, which receive the patient immediately, from operating room after major operations like open heart surgeries by specialized nursing staff. The intensive care unit is an area in a hospital that constitutes substantial risk of morbidity and mortality<sup>(11, 12)</sup>. Further, intensive care unit is widely perceived as one of the most inherently stressful areas, often characterized by high levels of uncertainty and instability. This may lead to physical and emotional exhaustion, a sense of inadequacy and frustration, which can be manifested as unsuccessful transition from student nurse to qualified nurse<sup>(13)</sup>. So, this study aimed to assess nursing interns' perception about role transition to prevent turnover and early burnout. Role transition helps the individual manage their feelings and fears.

### **Aim of the study:**

The aim of the present study is to assess nursing interns' perception about role transition

### **Research questions:**

What are levels of nursing interns' perception about role transition?

## **III. Materials and method**

### **Materials**

**Design:** Descriptive design was utilized in this study.

**Setting:** the study was conducted at Tanta University's main hospital. Intensive care units comprising of Medical, Neurological, Cardiology ICU, Neonate care unit and Emergency Intensive Care Units.

**Subjects:** Convenient sample of nursing interns students (N= 113) at Tanta University's main hospital and willing to participate in the study. The nursing intern students distributed across the ICUs were: 25 nursing intern students from medical ICU, 25 from Emergency Hospital ICU, 27 from neurology, 26 from cardiology care unit and 10 nurses from neonate care unit. The sample size was calculated using a software program.

### **Tool of data collection:**

To achieve the aim of this study the following tool was utilized

**Tool: Modified perceptions and expectations of role transition questionnaire** by Doody et al (2012)<sup>(14)</sup> was used for data collection. The tool consisted of two main parts:

**A-Part one:** This part is concerned with Socio-demographic characteristics e.g. age, gender, residence, and department.

**B-Part two: Nursing interns' perceptions and expectations of role transition questionnaire** composed of 28 items covered three subscales:

1. Role preparation contain 7 items such as, I'm ready to be a professional nurse, I've given the opportunity to develop my administrative skills and I expect that the transition from student to nurse will be without problems
2. Role competence contain 8 items such as, I work competently in multidisciplinary systems, I'm trusted in my ability to manage workloads and I've the ability to make ethical decision making
3. Organization I & support contain 13 items such as: I'll be supported from staff nurses in the department, my contributions to nursing team will have a value, there will be open channels of communication and support in the department, unit, Work hours will be flexible and I'll be oriented to the department work

**Scoring system:**

The subject's responses were on five point likert scale ranging from strongly agree to strongly disagree(5-1), strongly agree (5), agree(4), neutral(3), disagree(2) and strongly disagree(1). The role transition score is classified into three levels High (4-5), Moderate (3), Low (1-2).

**Method**

**Ethical& administration considerations:-**

1. An official permission to carry out the study was obtained from responsible authorities at Tanta University's Main Hospital.
2. The purpose of the study was explained and made clear to the nursing staff and interns of study setting to get their co-operation and acceptance.
3. Ethical consideration: all participants interviewed for explaining the purposes and procedures of the study, and they have the right to withdraw from the study at any time of the study.

**Field work:-**

1. Tool was translated into Arabic. Content validity of the tool was performed by five experts in the field of nursing administration, medical surgical nursing was done.
2. Pilot study was conducted on 10% from nursing interns students (who were excluded from the study population), to identify the obstacles and problems that may be encountered in data collection. Pilot study assisted the researchers to determine the ambiguity/clarity of the instruments.
3. Cronbach's alpha coefficient was computed to ascertain the internal consistency of the instrument; was achieved (.972) representing an acceptable degree of reliability.
4. The questionnaires were distributed to nursing interns (n = 113) in their work setting. The researchers were present during collection of data for any needed guidance and clarification. The questionnaire collected immediately after filled.
5. The data collection were completed during the period of 1 month (July) 2015.
6. Responding times to all questions in the tool consumes 15 minute.

**IV. Results**

**Table 1: Socio-demographic characteristics of the nursing interns (n=113)**

Variables	No	%
<b>Age in years</b>	<b>Mean + SD= 22.5± 2.5</b>	
<b>Gender</b>		
Male	13	11.5
Female	100	88.5
<b>Marital status</b>		
Single	64	56.6
Married	49	43.4
<b>Residence</b>		
Rural	55	48.6
Urban	58	51.4
<b>Total</b>	<b>113</b>	<b>100.0</b>

This table (1) showed sociodemographic data of the studied students of intern. The mean age of intern students were 22.5± 2.5 years. Majority of intern students 93.5% were female. In relation to marital status and residence more than half of interns' students 59.3 % and 51.3% were single and live in urban areas

**Table (2). Percentage distribution of nursing intern according to their perception levels of role transition.**

Role transition Subscale	Nursing students No= 113						x <sup>2</sup>	P
	High		Moderate		Low			
	No.	%	No.	%	No.	%		
Role preparation	21	18.58	44	39.39	48	42.28	63.1	0.001**
Role Competency	71	62.83	30	26.54	12	10.63	61.3	0.001**
Organization and support	15	13.27	42	37.17	56	49.56	79.9	0.001**
Total score	27	23.89	62	54.86	24	2125.	42.9	0.8

\* statistical significant at p< 0.05

Table (2) shows percentage distribution of nursing students at final year according to their perception levels of role transition. There are statistical significant differences between study subjects regarding all domains of role transition. According to the table, almost fifty of nursing interns perceived low role transition

in role preparation and organization and support domains (42.28% and 49.56% ) respectively. However, majority of nursing internship (62.83%) perceived high role competency. Regarding total score of role transition, more than fifty(54.86%)of nursing interns perceived moderate level of role transition.

**Table (3) Percentage distribution of nursing interns according their perception of role preparation transition**

Role preparation transition items	Nurse interns (n = 113)						x <sup>2</sup>	P
	Agree		Neutral		Disagree			
	No.	%	No.	%	No.	%		
1-I'm ready to be a professional nurse.	85	75.2	12	10.6	16	14.2	80.5	0.001**
2-Study subjects are correlated to my future role as a nurse	39	34.5	23	20.4	51	45.1	18.1	0.001**
3-I've given the opportunity to develop my skills as a nurse	18	15.9	19	16.8	74	65.5	92.2	0.001**
4-I've given the opportunity to develop my administrative skills	13	11.5	13	11.5	87	76.9	77.9	0.001**
5-I've given the opportunity to discuss the transition of my role from student to nurse	12	10.6	13	11.5	88	77.9	86.6	0.001**
6-I expect that the transition from student to nurse will be without problems	12	10.6	14	12.4	87	76.9	76.4	0.001**

\* Statistical significant at p< 0.05

Table (3): Percentage distribution of nursing interns according to their perception of role preparation transition. According to table 2 there are statistical significant differences between study subjects regarding all items of role preparation transition. It was observed that high percent of nursing students ranged from45.1% to77.9% disagree with all items of role preparation except the item of " I'm ready to be a professional nurse" 75.2% of them agree with it.

**Table (4) Percentage distribution of nursing interns according to their perception of role competences transition**

Role competences transition Items	Nurse internship (n = 113)						x <sup>2</sup>	P
	Agree		Neutral		Disagree			
	No.	%	No.	%	No.	%		
1-I work competently in multidisciplinary systems	22	19.5	18	15.9	73	64.6	48.1	0.001**
2-I've good time management skills	46	40.7	28	24.8	39	34.5	34.1	0.001**
3-I'm trusted in my ability to manage work loads	47	41.6	32	28.3	34	30.1	33.9	0.001**
4-I'm able to prioritize patient care activities	63	55.8	29	25.7	26	23	56.8	0.001**
5-I'll be able to delegate tasks to my colleagues	67	59.3	28	24.8	18	15.9	73.1	0.001**
6-I've effective human relation skills	71	62.8	24	21.2	18	15.9	65.2	0.001**
7-I've the ability to make ethical decision making	77	68.1	21	18.6	15	13.3	101.2	0.001**
8-I've the ability to educate the patient and his family about health status	77	68.1	22	19.5	14	12.4	127.7	0.001**
9-I've the ability to educate the patient and his family about health care issues	77	68.1	23	20.4	13	11.5	59.3	0.001**

\* Statistical significant at p< 0.05

Table (4): shows distribution of nursing interns according their perception of role competences transition. There are statistical significant differences between the studied subjects regarding all items of role competences transition. It was noticed that high percent of nursing students ranged from 40.7% to 68.1% agree with all items of role competency except item "I work competently in multidisciplinary system" 64.8% of them disagree with it.

**Table (5) Percentage distribution of nursing interns according to their perception of organization and support role transition.**

Organization and support role transition Items	Nurse internship (n = 113)						x <sup>2</sup>	P
	Agree		Neutral		disagree			
	No.	%	No.	%	No.	%		
1- I'll be supported from staff nurses in the department	14	12.4	21	18.6	78	69	83.1	0.001**
2- I'll be supported from the head nurse	5	4.4	18	15.9	90	79.6	103.8	0.001**
3- I'll be supported from members of the health care team	3	2.7	19	16.8	91	80.5	175.3	0.001**
4-I'll receive constructive feedback from staff nurses in my department	7	6.2	15	13.3	91	80.5	173.9	0.001**

5-I'll receive constructive feedback from head nurse	10	8.8	6	5.3	97	85.8	233.9	0.001**
6-My contributions to nursing team will have a value	28	24.8	23	20.4	62	54.9	35.9	0.001**
7-My contributions to health care team will have a value	34	30.1	23	20.4	56	49.6	18.2	0.001**
8-There will be evidence based practice initiatives	33	29.2	25	22.1	55	48.7	9.6	0.04*
9-I'll feel respected from others	37	32.7	26	23	50	44.2	9.3	0.001**
10-There will be open channels of communication and support in the department/ unit	27	23.9	31	27.4	55	48.7	18.9	0.001**
11-There will be open channels of communication and support in the hospital	21	18.9	28	24.8	64	56.6	27.4	0.001**
12-Work hours will be flexible	14	12.4	22	19.5	77	68.1	45.4	0.001**
13-I'll be oriented to the department work	11	9.7	16	14.2	86	76.1	76.4	0.001**

\* statistical significant at  $p < 0.05$

Table (5): shows percentage distribution of nursing interns according their perception of organization and support role transition. There are statistical significant differences between study subjects regarding all items of role transition. The table declared that high percent of nursing students ranged from 44.2% to 85.8% disagree with all items of organization and support role transition.

### V. Discussion

The period of transition from student to newly qualified nurse can be stressful. "Shock" is a common experience in newly qualified nurses who find themselves in work situations for which they feel inadequately prepared. Many nursing colleges rely on internship programs to train novice registered nurses into the ranks of critical care. This practice places additional demand on already exhausted resources. As more new graduates are placed into positions of providing direct and independent patient care faster, there are concerns of about performance ability and experience in taking care of complex patients; negative patient outcomes may result<sup>(15)</sup>.

Therefore, the ultimate goal of transition programs is to increase competence of new nurses and consequently augment the quality and safety of healthcare provided to all patients. The transition period is a time when nurses' knowledge and skills are consolidated, and adapt to their new role. The potential benefits of easing this transition could be reduction in stress and anxiety, enhanced job satisfaction and improved retention rates<sup>(16)</sup>. So, the aim of the present study was to assess nursing interns' perception about role transition. The finding of the present study showed that more than fifty of nursing interns' perceived their role transition moderate. This may be related to that nursing educators offer to nursing intern students' clear professional advice, guidance and a range of orientation programs that aim to assist and support nursing students in their transition to professional roles through integrating theory and practice. They exposure student to a variety of clinical settings and provide support and educational opportunities to assist with their adjustment from student to registered nurse in the fast paced, ever changing clinical environment.

Beside faculty established committees for nursing intern students and graduates to cooperate with hospital place more emphasis on clinical placements; ensuring nursing intern students encounter the real world of nursing by enabling them to experience various shifts and working weekends. The findings of the present study agree with Worlsook etal (2014)<sup>(17)</sup> who found that the subjects perceived the nurse role transition averaged. The findings of the present study indicate that more than forty of nursing intern students perceived low role transition in role preparation. This means that those nursing students are lacking the opportunity to develop my skills as a nurse, administrative skills and to discuss the transition of from student role to nurse. They are not aware of problematic nature of the transition in particular related to shift work, reality shock and having unrealistic assumptions. Although, they are ready to be professional nurse as evidenced in table (3). They need to be more prepared for the realities of being a nurse.

Accordingly, nursing education and health service institutions should provide preparatory theory about role transition, provide structured mentorship program and extend workplace orientation in an effort to ease and promote the new graduates professional adjustment. Such programs should include: clinical, organizational and management skills; support from nurses; constructive feedback; socialization; and role development<sup>(18)</sup>.

Simmons (2011)<sup>(19)</sup> mention that the graduate claimed that they had never been prepared to their roles or allowed to practice it during their undergraduate education. Research suggests that nursing graduates are not fully prepared for the shift work, workplace culture, high acuity of patients, fast-paced technological environment and clinical challenges they are presented with in their first year of clinical practice. Some researchers argue this is because undergraduate students have limited clinical placement experience and are rarely given responsibility for a full patient workload throughout the entirety of their program<sup>(20)</sup>. However, Williams (2013)<sup>(21)</sup> indicates that 90% of academic nursing leaders believed graduates were well-prepared, as opposed to 10% of hospital-based nurse leaders.

The finding of the present study agree with Missen et al (2014)<sup>(20)</sup> who found that the subjects perceived role preparation lower. Azimian et al. (2014)<sup>(22)</sup> found that most participants highlighted that they had not been adequately prepared for transition due to unpreparedness for transition was the inefficiency of university system. The findings were in contrast with Doody et al. (2012)<sup>(14)</sup> who found that over half of nursing students said they were adequately prepared for the post of registered nurse. Simmons (2011)<sup>(19)</sup> found that senior nursing students of John Fisher College perceive they are prepared to graduate and enter the workforce as new graduate registered nurse. Feeling unprepared for the role transition can cause stress so supportive measures are needed to reduce stress during the transition period<sup>(14)</sup>. Support is important for nursing students to assist in the effective transition to their new role. Support can be provided by the organization or individuals. Colleagues may provide support such as feedback, debriefing and praise. Organizations may support new students nurses by offering structured preceptorship programs, which can improve job satisfaction, reduce stress and anxiety, and increase confidence<sup>(23)</sup>.

The finding of the present study describes that more than forty of nursing intern students perceived low role transition in organization and support. This result indicates that nursing intern students feel a great need for support from their educators, managers, experienced nurses and colleague's. They are lack of strong relationships between nurses and other care providers. They have not able to establish good relationships with other colleagues as evidenced in table (4). Findings also suggested that the lack of preparation is not limited to clinical skills but there are some defects in other skills of person especially communication and management of others.

In this respect, Honour (2015)<sup>(24)</sup> reported that a widespread practice to support new graduates to work is the use of preceptors, experienced clinical nurses who steer new nurses through orientation. Preceptors' responsibilities include helping new graduates to learn information and skills required to provide patient care and their professional role as nurse. The advice and support that nursing faculty provides students and graduates can make a significant difference in maintaining their optimism and staying engaged in the profession<sup>(25)</sup>. Dyess and Parker (2012)<sup>(26)</sup> reported that educational support had positive effects on nurses' professional skills, retention in the profession, and coping with transition. Studies have shown that peers, families, spouse, and parents are the main sources of emotional support for nurses. Financial support can also help novice nurses effectively cope with transition-related difficulties. Accordingly, nurse managers can help nurses cope with transitions by providing them with different types of support<sup>(22)</sup>.

The finding of the present study agree with Azimian (2014)<sup>(22)</sup> who found that the subjects perceived the supporting and organization lower and most participants noted that nurses usually do not receive adequate support from their managers, colleagues, peers, and friends during transition. On other hand, Chandler et al (2012)<sup>(2)</sup> found that, the first-year nurses knew the support they needed to be successful. Also the findings of Chandler (2012)<sup>(2)</sup> indicated the critical importance of welcoming the new nurse into an inquisitive, supportive environment where good staff relationships flourished. The wise preceptor and sophisticated staff know that inclusion, supportive behaviors, and constructive feedback are the approach to take to develop the new nurse.

The finding of the present study displays that the majority of nursing intern students perceived high role transition in role competency. This means that those nursing intern students may have the ability to demonstrate and relate the knowledge, skills, judgment, and professional ethics and values to reach the desired outcomes or, they may be over rated themselves competent due to their limited experience and understanding for their working role demand. This finding is consistent with Doody et al. (2012)<sup>(14)</sup> who found that most respondents generally perceived themselves to be competent. Akel (2011)<sup>(27)</sup> found that high percent of nursing interns have high level of total nursing competences. The findings of the present study agree with Worlsook et al (2014)<sup>(17)</sup> who found that the subjects perceived role-specific competencies average.

## **VI. Conclusion**

In the light of the results of the present study, it was concluded that nursing interns at Tanta University's main hospital perceived moderate level of role transition, majority of them perceived high role transition in role competency domain while almost fifty of nursing interns perceived low role transition in role preparation and organization and support domains.

## **VII. Recommendations**

Based on the study results the following recommendations are advised that:

- Further attention to academic preparation of nursing interns to promote their perceptions about role transition.
- Restructuring of orientation programs in terms of content and duration for nursing interns will contribute to their awareness about role preparation transition
- As a result of this study, a number of future researches must be made to improve perceptions of nursing interns about role transition.

- Preceptorship program in the work place should be presented to foster supportive work environments for the nursing intern and increase their satisfaction and improve patient care.

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