Promoting Transition Resilience through Personal Development Planning: An Evaluation of the Perspectives of Preparation for Transition of Final-Year Undergraduate Nursing Students

Jacqueline Leigh*
University of Salford, United Kingdom

Angela Darvill
University of Huddersfield, United Kingdom

Abstract

The experience of transition is of concern to newly registered nurses entering the world of work, and to those seeking to prepare, recruit and retain such nurses. This paper evaluates a final-year preparation for role transition module from the perspectives of final-year student nurses. Focus groups and one-to-one interviews were carried out at three distinct points in time, after the module assessments and after each of the three clinical placements in the final year. Braun and Clarke's inductive thematic analysis was used to analyse the data with four themes emerging: impact/relevance of the personal development plan; development of self; role of the mentor; and transition resilience/taking control. These four themes were then applied to Kirkpatrick's model of evaluation, providing a deductive or theoretical framework for analysing and evaluating the outcomes of the module. Preparation for transition and the development of resilience have been identified as a potential solution associated with the negative experiences and challenges of transition. Resilience is an essential attribute that enables nurses to make sense of their experiences of transition and manage the stress of the workplace. Creating transition-focussed personal development plans to guide learning in the final year enabled the participants to take responsibility for their own learning, and, with the support from a good mentor, participants were able to understand that feeling nervous about transition was normal. This in turn enhanced their confidence, promoting 'transition resilience' as opposed to feelings and experiences associated with the more traditional concept of transition or reality shock.

Keywords: reality shock; role transition; transition focused personal development plan; transition module; transition resilience

Corresponding Author: Jacqueline Leigh, Room MS 1-43 Mary Seacole Building, University of Salford
M6 6PU United Kingdom   *Email:* J.A.Leigh4@salford.ac.uk

Leigh, J. and Darvill, A. (2019) 'Promoting transition resilience through personal development planning: An evaluation of the perspectives of preparation for transition of final-year undergraduate nursing students'. *International Journal of Practice-based Learning in Health and Social Care, 7* (1), 47–63 https://doi.org/10.18552/ijpblhsc.v7i1.513

Introduction, background and literature review

The move from student nurse to the beginning of the professional journey as a registered nurse continues to remain a difficult time for many new nurses nationally and internationally, with significant numbers of graduates being dissatisfied, ultimately considering leaving or exiting the profession (Phillips, Esterman, and Kenny 2015). In October 2018, there were approximately 41,000 vacancies across the nursing workforce in England (Buchan *et a*l. 2019). There is an expectation that new nurses at the point of registration know what to do to practise safely, autonomously and effectively and continue to develop their expertise (Leigh and Roberts 2017, Nursing and Midwifery Council 2018a). A positive experience of this transition is of fundamental concern to newly registered nurses entering the world of work, and to those seeking to prepare, recruit and retain such nurses (Darvill, Fallon, and Livesley 2014). This is because there is evidence of a strong correlation between poor graduate transition and increasing levels of registered nurse attrition (Higgins, Spencer and Kane 2010, Messmer, Bragg, and Williams 2011).

During transition, new graduates engaging in a professional practice role are confronted with a broad range of emotional, physical, intellectual, developmental and socio-cultural changes that can be experienced as reality or transition shock (Boychuk Duchscher 2007, Kramer 1974). Boychuk Duchscher (2007) suggests transition shock occurs within the first four months of being a newly qualified nurse. She maintains that this stage of transition is dominated by an increased awareness of accountability, perceptions of being unprepared for the added responsibility of becoming qualified in clinical practice, and not being fully prepared for some aspects of clinical practice. This is attributed to perceived awareness of the stress of an increase in responsibility and accountability, knowledge, skills and confidence deficits, particularly at the start of the first stage of transition, alongside feelings of stress and shock, and lack of sufficient support (Amos 2001, Brown and Edelmann 2000, Clark and Holmes 2007, Farasat 2011, Faraz 2016, Gerrish 2000, Kumaran and Carney 2014, Morrel and Ridgeway 2014, O'Shea and Kelly 2007, Whitehead 2001, Zamanzadeh *et al.* 2015). Negative experiences include feelings of being unprepared, fear of making mistakes, increased workload, lack of confidence, and changes in responsibility and accountability (Darvill 2013).

There have been a variety of strategies and interventions put in place to support newly registered nurses during their transition. Edwards *et al.* (2015) determined that transition interventions and strategies do lead to improvements in confidence and competence, job satisfaction, critical thinking and reductions in stress and anxiety for new nurses. Other strategies useful for transition include the use of reflection to identify actions that result in the building of confidence (Hardacre and Hayes 2016).

Recent studies identified that preparation for transition can ease some of the detrimental effects of poor graduate transition (Broad *et al.* 2011, Doody, Tuohy, and Deasy 2011, Kaihlanen *et al.* 2013, Morrell and Ridgeway 2014, Nash, Lemcke, and Sacre 2009, Ong 2013). Meleis *et al.* (2000) identified that anticipatory preparation can aid transition whereas lack of preparation can inhibit the process and outcome. Furthermore, Health Education England's 'Reducing pre-registration attrition and improving retention (RePAIR)' project (Health Education England 2018) provides the detailed understanding of the multi-factorial aspects of attrition and retention in pre-registration education. Students reported a rollercoaster experience in their levels of confidence as they prepared for transition from being a final-year student to a newly qualified practitioner.

Improving resilience has also been identified as a potential solution associated with the challenges of transition (Jackson, Firtko, and Edenborough 2007). McAllister and Lowe (2011) claim resilience is an essential skill that enables nurses to make sense of their experiences of transition and manage the stress of the workplace. Nurses are required to be resilient during transition and deal with adversity through taking control of their learning and development and gaining organisational support to enhance their transition experiences. According to Grant and Kinman (2013) resilience

reflects the ability to recover from workplace adversity, react appropriately and bounce back when life gets tough. Despite this evidence, few papers report on strategies that promote the development of resilient nurses making the transition from student to qualified nurse. Reporting on strategies that promote resilience in relation to transition achieved through students engaging with education, and in teaching and learning activities, makes this article timely.

The context for this study was the implementation of a preparation for role transition module introduced at the start of the third year of a UK undergraduate nursing programme at the University of Salford, in the north-west of England. The module aimed to prepare and support undergraduate nursing students for transition, and to ameliorate some of the negative experiences of being unprepared. The module was implemented as a result of an organisational change project to implement a new evidence-based Batchelor of Science undergraduate nursing programme (Warne, Holland, and McAndrew 2011). During the module, students explored the following key areas: professional values; communication and interpersonal skills; nursing practice and decision making; leadership; management; and team working. In preparation for the transition from student nurse to qualified nurse and to enable students to develop as adult learners, the 290 module hours, which consisted of theory and practice learning, utilised a combination of approaches to teaching and learning and these included: traditional lecture or masterclass; action learning sets; and blended learning. The module aimed to develop students' capacities to act professionally and autonomously to manage themselves and others effectively, and to meet the expectations of the UK's Nursing and Midwifery Council (NMC) on registration.

It was expected that students would demonstrate academic, personal and professional development through reflection and self-evaluation. Students studying on this module at the start of year 3 identified their own learning needs through a process of rigorous self-assessment and critical appraisal of their current knowledge, skills and values essential for the successful transition from student nurse to new graduate nurse. Self-assessment frameworks were utilised for this process. Examples of these include 'Standards for Competence for Registered Nurses' (Nursing and Midwifery Council 2010) and self-efficacy scales (Chen, Gully, and Eden 2001). For further examples see Major (2018). Students used the self-assessment information to identify their strengths, weaknesses, opportunities and threats. They then developed transition-focussed personal, professional and academic personal development plans (PDP) and appraised these in relation to their individual learning and development needs for role transition. Students had three placements in the final year and prepared PDPs for each placement.

Concurrently, a Practice Placement Allocation Model had been implemented providing the University of Salford and its partner practice placement healthcare organisations with a framework to shift from a traditional, process-led pre-registration nursing student placement allocation system to a robust, proactive, student-focussed approach (Leigh *et al.* 2014). Development and evaluation of the model culminated in the implementation of a checklist for all final-year students to complete that identified their practice learning development needs linked to their PDP created as part of attending the preparation for role transition module. Key areas of the checklist included delegation, time management, ward coordination, discharge planning, and managing user and carer expectations. The Clinical Placement Unit used the information in the completed checklist to inform the allocation of students' final practice placement (Leigh *et al.* 2014).

Aim and objectives

The aim of the research study was to evaluate a preparation for role transition module from the perspectives of students at the University of Salford. The objectives of this study were to:

(1) Explore the experience of a preparation for role transition module from the perspectives of third-year student nurses who had successfully completed the preparation for role transition module;

(2)   Identify benefits of preparation for role transition for promoting transition resilience.

Study design

A qualitative research approach was chosen as it allowed exploration of the meanings of third-year students' preparation for role transition from their perspectives.

Ethical considerations

In 2015/16 the University of Salford Ethics Committee provided ethical approval and advice for the study. Participation in the study for all participants was voluntary.

Sample

Purposeful sampling was used. Participants were selected based on their experience of undertaking a preparation for role transition module. The two researchers who were module team members contacted students via email to participate in the study. To avoid coercion, students were contacted after they had successfully completed the module and had received their module mark. 216 students successfully completed the module. To manage numbers of participants, students who successfully achieved a module assessment mark of 85% and above were invited to participate ($n = 20$). Students were also provided, via the same email, with a participation information sheet and focus group consent form. It was made explicit that their decision whether or not to participate in the study would not affect their programme. Twelve students consented to participate in the study, the group consisting of one male and eleven female students.

Data collection strategies

The focus group and one-to-one interview were used as the data collection strategy. Focus groups by their nature use semi-structured or very structured protocols to guide the direction of the interview (Silverman 2017). The focus group semi-structured protocol used for this study consisted of seven questions, seeking information from participants about their experiences of preparation for role transition. The same questions were asked in the one semi-structured interview conducted. Green and Thorogood (2018) suggest the focus group interview has the advantage over the one-to-one interview of providing access to interactions between participants and for determining how social knowledge is constructed. This would be beneficial for student nurses collectively sharing their experiences of role transition.

This article reports on the findings of focus groups and a one-to-one interview that took place after the module assessments had taken place and after each of the three clinical placements in the final year. The requirement of the study was that the twelve students who consented to participate would attend a focus group interview at three distinct points in time (post clinical placement):

- Post Placement One: Three focus groups were conducted with a total of twelve students participating;
- Post Placement Two: Two focus groups were conducted with a total of eight students participating;
- Post Placement Three: One focus group with three students and a one-to-one interview with a further student was conducted.

Data analysis

All the interviews were tape-recorded and transcribed verbatim by the two researchers, and coding schemes generated by the same researchers from the line-to-line analysis of the transcripts

(Graneheim and Lundman 2004). The two researchers conducted the analysis independently, both applying Braun and Clarke's (2006) steps towards thematic analysis (see Table 1). This included an initial familiarisation with the data, noting early exploration and associations between attitudes and behaviours about participants' perspectives of preparation for transition, ultimately producing themes that helped to interpret the various aspects of the topic under investigation. The independent coding of the data, and subsequent discussions between the two researchers, and application of Braun and Clark's analytical steps, promoted the trustworthiness, credibility and verifiability of the findings produced. An inductive method to analyse data allowed the themes to arise spontaneously from the data, providing researchers with the opportunity to identify responses and to summarise participants' accounts of the phenomena, thus avoiding pre-existing codes or some of the predetermined issues associated with role transition. This approach also ensured that the emergent themes came from the interpretations of the participants' responses and not from the researcher's theoretical interest in the topic area. The data within the themes was next applied to Kirkpatrick's four levels of evaluation (1983), a theoretical framework specifically used to evaluate outcomes of programmes of education, providing the researchers with an opportunity to analyse deductively the themes through answering education-focussed questions such as 'is this course effective?' (Bates 2004). Kirkpatrick's four levels are:

(1) Reaction: students' initial thoughts and feelings about their education and training experience;
(2) Learning: the resulting increase in knowledge or capability;
(3) Behaviour: extent of behaviour and capability improvement and implementation/application;
(4) Results: the effects on the business or environment resulting from the student's performance.

Table 1: Steps taken in the qualitative data analysis from Braun and Clarke (2006)

Phase 1: Familiarity with the data. Close reading of the transcripts and listening to the data by the two researchers to immerse oneself in the data, noting early features/patterns/significant aspects
Phase 2: manual coding of the data – by looking for incidents and facts which are then coded with a word or phrase. Codes were generated inductively from the data
Phase 3: collating codes into potential themes
Phase 4: searching the data and codes for patterns to develop themes – arising spontaneously from the data
Phase 5: Reviewing of themes – the data within the themes was applied to Kirkpatrick's levels of evaluation
Phase 6: Producing the report – to provide an account of the participants' description

Findings

This article presents evidence relating to levels 1 to 4 of Kirkpatrick's (1983) model. From the thematic analysis four key themes emerged:

- Theme 1: Impact/relevance of the personal development plan
- Theme 2: Development of self
- Theme 3: Role of the mentor
- Theme 4: Transition resilience/taking control.

Each theme is presented so as to correspond to the stages of Kirkpatrick's evaluation model. Firstly, the narrative flow is provided, followed by the table of participant quotations:

Theme 1: Impact/relevance of the personal development plan

All four levels of Kirkpatrick's model were demonstrated within this theme (Table 2). The data indicated that the students ultimately implemented the PDP as a strategy to scaffold their learning between placements. They used this scaffolding specifically to overcome the challenges of transition such as feeling unprepared for the registered nurse role. This was achieved through the content of the PDPs identifying their specific and unique preparation for role transition requirements.

Table 2: Theme 1, Impact/relevance of the personal development plan

Level 1 Reaction	Level 2 Learning	Level 3 Behaviour	Level 4 Results
'PDP should be in first year to learn about self and understanding how to learn' *'[Develop] specific PDP from day 1, especially leadership and delegation-the learning about self and learning styles…didn't understand at time of doing them but now I do'*	*'Doing the PDPs, I've been able to identify strengths and weaknesses but do very, very structured action plans…what I'm going to do from now right up until when I qualify in a timescale'* *'Knowing what I need to learn before getting to placement…focussed on my own development needs'* *'It is up to the student with the PDP to say…I want you to make me do that…I might not want to…but I need to'*	*'Using the PDP as a strategy for role transition'* *'Stretches you with the things [identified actions] that I would shy away from'* *'It's all about yourself. They [mentor] can't read your mind, so for them to know what you want and what you need to do for role transition, you've got to tell them…which is why the PDPs were brilliant'* *'Skills to amend PDP to fit next placement: managing bay to managing 2 patients in an Intensive Care Unit setting'* *'Worked through PDP to learn to be comfortable with a previously uncomfortable situation'* *'PDP states need to do something …so I go and do it'* *'Closing the loop PDP: from one PDP to the next placement'*	*'Think about end goals so I made my PDPs for the end of the programme and then worked backwards for the whole of the final year… scaffolding of activities'*

Theme 2: Development of self

Findings from across the four Kirkpatrick levels provided evidence of how the module's processes enabled students to understand themselves and make better sense of the situation, and how this in turn helped them ultimately to take ownership of their personal learning and be responsible for their development needs (Table 3).

Table 3: Theme 2, Development of self

Level 1 Reaction	Level 2 Learning	Level 3 Behaviour	Level 4 results
'Learning and looking at self but linking it to what I am doing and role transition…making that connection' *'It made me realise a lot about myself and where I want to be because I have kind of "ummed and ahh'd" about so many different things before'*	*'Wake up call – understanding where I am going and understanding self"*	*[Engaging in action learning sets]. 'Sometimes you think that people have done so much more than me, and then you realise when someone asks a question and you can answer it, they did not know that… and I did'* *'Learning to talk about self'* *'When I went into practice, I believed in myself a bit more, so I just feel like it [module attendance] impacted me in that way. I felt better about myself and my skills in both ways, academic and in practice'* *'Can see where I am going wrong and knowing where to improve'* *'Making sense of what is happening to me'* *'Understanding that others feel the same [about role transition] …and having to do something about it'* *'Easier to talk about own development and expectations at interview for first staff nurse post'*	*'Tailor made path for role transition [the self-assessment and the end-point] but understanding self from the outset'* *'Owning own learning'* *'Come out from hiding behind the student uniform and be responsible'*

Theme 3: Role of the mentor

Within this theme the students identified the impact that mentors had on their preparation for transition. This entailed identifying those qualities required of the mentor to support student learning and development effectively, enabling them to prepare for transition in a structured and organised way (Table 4).

Table 4: Theme 3, Role of the mentor

Level 1 Reaction	Level 2 Learning	Level 3 Behaviour	Level 4 Results
No data identified	*'Realisation of the support that can be relied upon'* *'The mentor should have the willingness to teach, the patience, the understanding and the right attitude and the student should as well have the right attitude'* *'The mentor should praise the student and be very honest with their opinion, comments and be very sincere … and if she's not doing well there's constructive criticism'* '*Mentors not very confident to let me do things'* *'My mentor had too much confidence in me, and because of that I feel I have not really learned from her'*	*'Working it out with mentor to implement goals within the placement setting'* *'Supported with interview for job, mentor coached me for mock interview…they went the extra mile, and this really helped'* *'Mentor was the sister of the ward. She's also the placement education leader so she's very, very geared towards students and she's just been amazing. She threw me in at the deep end on my first day and she let me do everything'*	*'Because it was in my last placement, I had a view to getting a job on there [on qualification]. She worked me in the way she wants me to be for that ward, which benefitted me massively, confidence wise* *'I went in and discussed this [PDP] with my mentor. I said can you give me a bay, well actually I asked for three patients to look after and I said can you give me three patients to look after, then it will develop and then I won't be scared of communicating with doctors'*

Theme 4: Transition resilience/taking control

This theme showed that developing the PDP was an integral part of a student's passage to registered nurse (Table 5). Students demonstrated resilience, enabling them to feel better equipped for the role transition, achieved in part through facing their fears. Applying the theory of role transition to practice helped to prepare students for the journey ahead, anticipating transition shock and then planning accordingly.

Table 5: Theme 4, Transition resilience/taking control

Level 1 Reaction	Level 2 Learning	Level 3 Behaviour	Level 4 Results
'Feel nervous, but I am not panicking as I realise that this is a normal feeling but if I hadn't looked at this [transition] I would have thought it was me and that nobody else was feeling like this' *'Do not feel a panic … just a motivation'* *'Terrifying but understanding the theory'* *'Panic is normal…but will be supported'*	*'It was all about role transition, you've got to face your fears. If you don't face your fears and learn to talk about it then it's going to be difficult to move from student to staff nurse. Having this self-belief, believing in yourself, if you don't believe in yourself then it's very hard for others to believe in you'* *'Some people handle stress more than others. Some people have more confidence in them self than others'* *'Thinking about the support that I require at preceptorship'* *'More prepared for what was coming…identify it yourself which is better than someone else identifying it for you'*	*'"Respect the L Plate" – mentors need to understand that students are still learning' 'So I went in and discussed this with my mentor – it's a big thing asking for help. It's leadership'* *'The big one was about taking responsibility, and somebody said if it was stated in your PDP then you felt that you had to do it. So, even though you didn't want to do something like do a ward round, you knew you had to do it because your self-assessment told you to'* *'Controlling, anticipating the transition shock by forward planning'* *'Making sense of what is happening to me'* *'It's a bit scary and you're going to be responsible but because of my final placement and because of what I learnt in role transition about myself, I feel like I've worked on that and I do feel quite confident… I can run a bay'* *'Taking responsibility and accountability'* *'Assertive with time to meet role transition goals'* *'You've got to be able to say what you need. You've got to have the confidence'* *'It's a big one the resilience one…It comes with experience. I think it's no longer a reality shock because you know what you are expecting, and you are already ready for it'*	*'Prepared for what is coming… identify it yourself'* *'Instead of winging it…I know exactly what to do…which has been truly good'* *'I might not want to…but I need to …the handover…if you say make me do it, I don't have a choice'*

Discussion

Following the application of Braun and Clarke's (2006) analytical steps to thematic analysis, four themes emerged: impact/relevance of the personal development plan; development of self; role of the mentor; and transition resilience/taking control. The subsequent analysis of the themes against Kirkpatrick's model of evaluation (1983) provided a deductive or theoretical framework for further analysing and evaluating the results of the preparation for role transition module, providing the researchers with the opportunity to answer education-focussed questions such as 'was this module effective?'.

The findings from this research study exemplified the positive impact that the preparation for transition module had on student learning and development. These findings could influence the contemporary undergraduate nursing curriculum from both theoretical and practice perspectives. For example, one of the aims of the module was to guide students to create transition-focussed PDPs to enable them to identify areas of academic, personal and professional development in preparation for transition to professional practice. PDPs fulfilling students' own learning needs build students' competence, confidence and satisfaction (Major 2010) and meets NMC requirements (Nursing and Midwifery Council 2010, 2018a, 2018b) whereby nurses maintain their own personal and professional development, through reflection and evaluation. Furthermore, the Quality Assurance Agency (2009) established that personal development planning enabled students to demonstrate fitness for employment into their chosen career.

The participants in this research study felt that for the first time they learned the value of PDPs in their professional development. Through undertaking a range of self-assessments, students were clear about their personal transition development needs and this in turn helped them to be assertive and take control of their own learning both in the academic and practice setting. Major (2010) revealed similar findings in a study on the experiences of final-year students whereby students identified that their PDPs enabled them to reflect on their development and identify areas for further development.

The participants learned that PDP development aided the identification of strengths, weaknesses, opportunities and threats. They used the structured PDP as their visual plan of action, identifying both their current situation and where they needed to position themselves. They were able to take control and exploit opportunities to take responsibility for their own learning, and deal with adversity through forward planning. Through implementing the goals and actions of their PDP in clinical practice, this seemed to help them anticipate the broad range of emotional, physical, intellectual, developmental and socio-cultural changes associated with reality or transition shock (Boychuk Duchscher 2007, Kramer 1974).

Health Education England (2018) report on variations in supervisor/mentor support, pointing out that the 'student-mentor' relationship is central to the success of students completing their clinical learning outcomes. Findings from this research study identify how students learned that some mentors could be relied on for support in their preparation for transition. They valued mentors who questioned and pushed them, but did not like mentors who had too much confidence in them and expected them to be able to do everything. They benefited from working in partnership and sharing their PDP with the mentor, being guided and supported especially by a "good" mentor. Mentors unlocking students' potential for learning closely aligns with the concept of coaching, specifically used as an intervention to facilitate another person's performance (Leigh, Rutherford, and Williamson 2017, Whitmore 2009, Willis 2015). Asking the mentors to "respect the L plate" eased the pressure on students, whilst at the same time gave them support and the confidence to build resilience. Within the new UK Nursing and Midwifery Council (NMC) Future Nurse: Standards of Proficiency for Registered Nurses (Nursing and Midwifery Council 2018a, 2018b), the role of the mentor will be superseded by the new roles of practice supervisor and practice assessor. Among the lessons taken from this study is the crucial need for students to receive support from the practice supervisor and assessor, and for

students to seek structured guidance, taking the lead with their transition-related development needs.

It is ascertained that confidence is a key concept in relation to transition (Health Education England 2018) and that it is closely linked to self-efficacy. Indeed, students clearly identified the need to be confident when taking control of their own learning, and this in turn promoted resilience. Self-efficacy refers to belief in one's own ability to succeed in a task (Bandura 1997). Participants felt that creating specific personal development plans enabled them to understand themselves, thus increasing their self-awareness and self-belief in their abilities in clinical practice. They were enabled to evaluate and examine their own developmental needs in preparation for their transition to professional practice. They developed the assertiveness by using the PDP to guide their development in practice, enabling them to create a tailor-made path for transition. They had learned to face their fears and take responsibility for their own learning.

Whilst the lack of confidence is linked to newly registered nurses' feelings of unpreparedness for their new role (Boychuk Duchscher 2007), evidence suggests that the application of preparation for role transition interventions can increase confidence (Edwards *et al.* 2015, Hardacre and Hayes 2016). The participants in this research study reported feeling nervous about their impending transition experiences; however, because of studying about transition and resilience during the module, they realised that it was a normal feeling. Similar findings have been identified by Boychuk Duchscher (2007), Darvill (2013) and Ong (2013). However, an important finding from this research study is that the participants realised that anticipating transition shock by forward planning had specifically helped them. For example, they began to feel better about themselves and their knowledge, skills and attitudes and felt motivated and more prepared for what was coming. They identified what they needed to learn, enabling them to develop transition resilience and deal with adversity through taking control of their transition experiences (Jackson, Firtko, and Edenborough 2007). McAllister and Lowe (2011) claim resilience is an essential skill that enables nurses to make sense of their experiences of transition and manage the stress of the workplace. Resilience is often linked to effective leadership and this is due to the fundamental need to manage oneself and to recognise individual personal qualities and behaviours (Chadwick and Leigh 2018, Leigh, Rutherford, and Williamson 2017). Indeed, Nash, Lemcke, and Sacre (2009) highlighted the importance for final placement students of having the knowledge, skills and confidence to feel ready for practice.

Limitations of the research

It is acknowledged that members of the preparation for role transition module team were the researchers of this study. The applied study methodologies ensured that to avoid coercion students were contacted after the module had been successfully completed and had received their module mark.

To manage numbers of participants, students who successfully achieved a module assessment mark of 85% and above were invited to participate, and this could be perceived as a limitation to the study. Not all students who agreed to participate in the study attended interview at the three distinct points in time (post placement) therefore this is a further limitation of the study.

Conclusion

This study aimed to investigate the experiences and benefits of a preparation for role transition module for promoting transition resilience from the perspectives of students at the University of Salford. Creating transition-focussed PDPs to guide learning in the final year enabled the participants to take responsibility for their own learning, and, with support from a good mentor, they were able to understand that feeling nervous about transition was normal; this in turn enhanced their confidence, promoting 'transition resilience' as opposed to feelings and

experiences associated with the more traditional concept of transition or reality shock. Findings from this study inform the implementation of the NMC Future Nurse: Standards of Proficiency for Registered Nurses (Nursing and Midwifery Council 2018a, 2018b) whereby students, with support from the practice supervisor, assessor and academic assessor, are required to seek structured guidance and take the lead with their transition-focussed development needs.

References

Amos, D. (2001) 'An evaluation of staff nurse role transition'. *Nursing Standard*, 16 (3), 36–41 https://doi.org/10.7748/ns2001.10.16.3.36.c3093

Bandura, A. (1997) *Self Efficacy: The Exercise of Control*. New York: W.H. Freeman

Bates, R. (2004) 'A critical analysis of evaluation practice: The Kirkpatrick model and the principle of beneficence'. *Evaluation and Program Planning*, 27 (3), 341–347 https://doi.org/10.1016/j.evalprogplan.2004.04.011

Boychuk Duchscher, J. (2007) *Professional Role Transition into Acute-Care by Newly Qualified Graduated Baccalaureate Female Registered Nurses*. Unpublished PhD thesis. Edmonton, Canada: University of Alberta

Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology'. *Qualitative Research in Psychology*, 3 (2), 77–101 https://doi.org/10.1191/1478088706qp063oa

Broad, P., Walker, J., Boden, R., and Barnes, A. (2011) 'Developing a "model of transition" prior to preceptorship'. *British Journal of Nursing*, 20 (20), 1298–1301 https://doi.org/10.12968/bjon.2011.20.20.1298

Brown, H., and Edelmann, R. (2000) 'Project 2000: A Study of expected and experienced stressors and support by students and qualified nurses'. *Journal of Advanced Nursing*, 31 (4), 857–864 https://doi.org/10.1046/j.1365-2648.2000.01344.x

Buchan, J., Charlesworth, A., Gershlick, B., and Seccombe, I. (2019) A Critical Moment: NHS Staffing Trends, Retention and Attrition. London: The Health Foundation

Chadwick, A. and Leigh, J. A. (2018) 'Identifying and developing clinical leadership in relation to transition': in *Transition to Nursing Practice: From Student to Registered Nurse*. ed. by Darvill, A., Stephens, M., and Leigh, J.A. London: Sage, 116–133

Chen, G., Gully, S., and Eden, D. (2001) 'Validation of a new general self-efficacy scale'. *Organizational Research Methods*, 4 (1), 62–83 https://doi.org/10.1177/109442810141004

Clark, K.T. and Holmes, S. (2007) 'Fit for practice? An exploration of the development of newly qualified nurses using focus groups'. *International Journal of Nursing Studies*, 44 (7), 1210–1220 https://doi.org/10.1016/j.ijnurstu.2006.05.010

Darvill, A. (2013) *A Qualitative Study into the Experiences of Newly Qualified Children's Nurses During their Transition into Children's Community Nursing Teams*. Unpublished PhD thesis. Manchester, UK: University of Salford

Darvill, A., Fallon, D., and Livesley, J. (2014) 'A different world? The transition experiences of newly qualified children's nurses taking up first destination posts within children's community nursing teams'. *Issues in Comprehensive Paediatric Nursing*, 37 (1), 6–24 https://doi.org/10.3109/01460862.2013.855841

Doody, O., Tuohy, D., and Deasy, C. (2012) 'Final-year student nurses' perceptions of role transition'. *British Journal of Nursing*, 21 (11), 684–688 https://doi.org/10.12968/bjon.2012.21.11.684

Edwards, D., Hawker, C., Carrier, J., and Rees, C. (2015) 'A systematic review of the effectiveness of strategies and interventions to improve the transition from student to

newly qualified nurse'. *International Journal of Nursing Studies*, 52 (7), 1254–1268
https://doi.org/10.1016/j.ijnurstu.2015.03.007

Farasat, H.C. (2011) *The Invisibility of Being a New Nurse: The Experience of Transition from Student to Registered Children's Nurse.* Unpublished doctoral thesis. Southampton, UK: University of Southampton

Faraz, A. (2016) 'Novice nurse practitioner workforce transition into primary care: A literature review'. *Western Journal of Nursing Research*, 38 (1), 1531–1545
https://doi.org/10.1177/0193945916649587

Gerrish, K. (2000) 'Still fumbling along? A comparative study of the newly qualified nurse's perception of the transition from student to qualified nurse'. *Journal of Advanced Nursing*, 32 (2), 473–480 https://doi.org/10.1046/j.1365-2648.2000.01498.x

Graneheim, U. and Lundman, B. (2004) 'Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness'. *Nurse Education Today*, 24 (2), 105–112 https://doi.org/10.1016/j.nedt.2003.10.001

Grant, L. and Kinman, G. (2013) *The Importance of Emotional Resilience for Staff and Students in the 'Helping' Professions: Developing an Emotional Curriculum*. York: Higher Education Academy

Green, J. and Thorogood, N. (2018) *Qualitative Methods for Health Research*. 4th edn. London: Sage

Hardacre, R. and Hayes, L. (2016) 'The transition to becoming a newly qualified nurse: A reflection'. *Journal of New Writing in Health and Social Care*, 2 (2), 32–43

Health Education England (2018) *Reducing Pre-Registration Attrition and Improving Retention' Report.* Leeds: HEE [online] available from https://www.hee.nhs.uk/our-work/reducing-pre-registration-attrition-improving-retention [9 January 2019]

Higgins, G., Spencer, R.L., and Kane, R. (2010) 'A systematic review of the experiences and perceptions of the newly qualified nurse in the United Kingdom'. *Nurse Education Today*, 30 (6), 499–508 https://doi.org/10.1016/j.nedt.2009.10.017

Jackson, D., Firtko, A., and Edenborough, M. (2007) 'Personal resilience as a strategy for surviving and thriving in the face of workplace adversity: A literature review'. *Journal of Advanced Nursing*, 60 (1), 1–9 https://doi.org/10.1111/j.1365-2648.2007.04412.x

Kaihlanen, A., Haavisto, E., Strandell-Laine, C., and Salminen, L. (2018) 'Facilitating the transition from a nursing student to a Registered Nurse in the final clinical practicum: A scoping literature review'. *Scandinavian Journal of Caring Sciences*, 32 (2), 466–477
https://doi.org/10.1111/scs.12494

Kirkpatrick, D.L. (1983) 'Four steps to measuring training effectiveness'. *Personnel Administrator*, 28 (11), 62–74.

Kramer, M. (1974) *Reality Shock: Why Nurses Leave Nursing.* St Louis: Mosby

Kumaran, S. and Carney, M. (2014) 'Role transition from student nurse to staff nurse: facilitating the transition period. *Nurse Education in Practice*, 14 (6), 605–611
https://doi.org/10.1016/j.nepr.2014.06.002

Leigh, J.A., Bulpitt, S., Dean, S., Drury, S., Finnigan, N., Fishburn, N., Hill, P., O'Flannagan, S., Savin, C., Winder, H., and Withnell, N., (2014) 'Innovative placement allocation model for pre-registration student nurses'. *Nursing Times*, 110 (38), 20–22

Leigh, J.A. and Roberts, D. (2017) 'Implications for operationalising the new education standards for nursing', *British Journal of Nursing,* 26 (21): 1197–1199 https://doi.org/10.12968/bjon.2017.26.21.1197

Leigh, J.A., Rutherford J., and Williamson T. (2017) 'Stakeholder perspectives of an approach to healthcare leadership development through use of a multidimensional leadership development conceptual model'. *International Journal of Practice-based Learning in Health and Social Care* [online] 5 (1), 77–97 available from https://doi.org/10.18552/ijpblhsc.v5i1 accessed [3 December 2018]

Major, D. (2010) *Student Nurses in Transition: Generating an Evidence Base for Final Placement Learning-Facilitation Best Practice*. Unpublished MPhil thesis. Manchester, UK: University of Salford

Major, D. (2018) 'Self-assessment of knowledge, skills and attitudinal values through critical reflection'. in *Transition to Nursing Practice: From Student to Registered Nurse*. ed. by Darvill, A., Stephens, M., and Leigh, J.A. London: Sage, 26-46

McAllister, M. and Lowe, J. (2011) *The Resilient Nurse: Empowering Your Practice*. New York: Springer Publishing

Meleis, A.I., Sawyer L.M., Im, E.O., Hilfinger Messias, D.K., and Schumacher, K. (2000) Experiencing transitions: An emerging middle-range theory'. *Advances in Nursing Science*, 23 (1), 12–28 https://doi.org/10.1097/00012272-200009000-00006

Messmer, P., Bragg, J., and Williams, P. (2011) 'Support programs for new graduates in pediatric nursing'. *Journal of Continuing Education in Nursing*, 42 (4), 182–192 https://doi.org/10.3928/00220124-20110324-05

Morrell, N. and Ridgway, V. (2014) 'Are we preparing student nurses for final practice placement?' *British Journal of Nursing*, 23 (10), 518–523 https://doi.org/10.12968/bjon.2014.23.10.518

Nash, R., Lemcke, P., and Sacre, S. (2009) 'Enhancing transition: An enhanced model of clinical placement for final year nursing students'. *Nurse Education Today*, 29 (1), 48–56 https://doi.org/10.1016/j.nedt.2008.06.004

Nursing and Midwifery Council (2010) *Standards for Pre-registration Nursing Education*. London: NMC

Nursing and Midwifery Council (2018a) *Future Nurse: Standards of Proficiency for Registered Nurses*. London: NMC

Nursing and Midwifery Council (2018b) *Part 2: Standards for Student Supervision and Assessment*. London: NMC

Ong, G.L. (2013) 'Using final placements to prepare student nurses'. *Nursing Times*, 109 (3), 12–14

O'Shea, M. and Kelly, B. (2007) 'The lived experiences of newly qualified nurses on clinical placement during the first six months following registration in the Republic of Ireland'.

Journal of Clinical Nursing, 16 (8), 1534–1542 https://doi.org/10.1111/j.1365-2702.2006.01794.x

Phillips, C., Esterman, A., and Kenny, A. (2015) 'The theory of organisational socialisation and its potential for improving transition experiences for new graduate nurses'. *Nurse Education Today*, 35 (1), 118–124 https://doi.org/10.1016/j.nedt.2014.07.011

Quality Assurance Agency (2009) *Personal development planning: Guidance for institutional policy and practice in higher education*. London: QAA

Silverman, D. (2017) *Doing Qualitative Research*. 5th edn. London: Sage

Warne, T., Holland, K., and McAndrew, S. (2011) 'The catcher in the why: Developing an evidence-based approach to the organization, delivery and evaluation of pre-registration nurse educational programmes'. *Nurse Education in Practice*, 11 (2), 131–135 https://doi.org/10.1016/j.nepr.2010.10.008

Whitehead, J. (2001) 'Newly qualified staff nurses' perceptions of the role transition'. *British Journal of Nursing*, 10 (5), 330–339 https://doi.org/10.12968/bjon.2001.10.5.5361

Whitmore, D. (2009) '*Coaching for Performance: Principles and Practices of Coaching and Leadership* (People Skills for Professionals). 4th edn. London: Nicholas Brealey

Willis, P. (2015) *Raising the Bar – Shape of Caring: A Review of Future Education and Training of Registered Nurses and Care Assistants*. London: HEE

Zamanzadeh, V, Jasemi, M., Valizadeh, L., Keogh, B., and Taleghani, F. (2015) 'Lack of preparation: Iranian nurses' experiences during transition from college to clinical practice'. *Journal of Professional Nursing,* 31 (4), 365–373 https://doi.org/10.1016/j.profnurs.2015.01.005