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EXPLORING THE DIFFERENT FACTORS ASSOCIATED WITH BURNOUT

by

NATASSJA J. DEBRA

A thesis submitted in partial fulfillment of the requirements
for the Honors in the Major Program in Nursing
and in The Burnett Honors College
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Orlando, Florida

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Abstract

Maslach and Leiter determined burnout to be caused by three major components: exhaustion, cynicism, and inefficiency. This literature review focuses on factors that directly contribute to new graduate nurse burnout. Major factors discussed in this paper are differences in expectations versus reality, influences from past education, developing professional identity, and the effect of the workplace environment on new graduate transition. Interventions to combat burnout are discussed along with recommendations for future research.

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Introduction

Exploring the Different Factors Associated with Burnout

The World Health Organization (2019) has officially identified burnout as an issue exclusively associated with the work environment. Feelings of burnout are attributed to chronic stress derived from employment and do not reflect situations outside of the workplace. Unrealistic expectations new graduate nurses possess when entering into the workforce make them more predisposed to experiencing burnout (Laschinger, Finegan, & Wilk, 2009; Rudman & Gustavsson, 2011). Understanding and preventing burnout is essential to ensure new nurses have a smooth transition into the workforce.

Background

Maslach and Leiter (1997) summarize six main factors that lead to burnout: work overload, feelings of helplessness or lack of control, beliefs that one's work is not adequately compensated, lack of a supportive work environment, feelings of unfairness, and conflict between expectations and reality. This leads to the development of burnout and ultimately affects the emotions of the individual and leads to workplace strain and unhappiness with one's career. Garrett and McDaniel (2001) also found that workplace uncertainty, which is caused by change implemented in facilities, and lack of supportive environments contribute to burnout. Their study concluded that environmental uncertainty is a factor of burnout, however, a positive social environment can help to counteract or diminish the effects of uncertainty. Nurse supervisors play an important role in helping staff avoid increased levels of burnout by encouraging supportive work environments and ensuring staff feels their work is being recognized.

Burnout is typically defined with three major dimensions: exhaustion, cynicism, and inefficiency (Leiter & Maslach, 2009). Exhaustion can be physical or mental, but when experienced during burnout it relates to feelings of being inevitably tired. Cynicism relates to adopting a negative attitude and distancing oneself from others. Finally, inefficiency is when an individual believes they make no difference and their efforts are pointless. As a result, burnout directly effects the individual experiencing it and leads to increased job turnover rates.

Exhaustion

Exhaustion is the initial component of burnout that an individual will experience as a result of stress derived from the job (Maslach & Leiter, 1997). Research has shown exhaustion is directly associated with workload (Leiter & Maslach, 2009). Emotional exhaustion occurs when

individuals feel they have drained their resources and are unable to cope with the workload and stress that their job places on them (Maslach et al., 1996). In a study where 66% of new graduate nurses experienced burnout, lack of support and decreased work resources were most strongly correlated with emotional exhaustion (Cho, Laschinger, & Wong, 2006). In addition, exhaustion has been found to have negative health implications noting individuals who experience exhaustion are more likely to develop feelings of depression and sleep disturbances (Peterson et al., 2008). Research shows that depersonalization, which is a negative, distancing attitude toward others, is derived from prolonged periods of exhaustion (Maslach et al., 1996). Depersonalization leads into the next component of burnout, cynicism.

Cynicism

Leiter and Maslach (2004) describe cynicism as feelings of negativity and failure. Cynicism is a result of prolonged periods of exhaustion and is an internal struggle that manifests in an insensitive and negative outlook on the workplace and patients. Maslach and Leiter (1997) speculate that cynicism is developed in an effort to cope with feelings of exhaustion. This is where depersonalization develops and allows staff experiencing burnout to disconnect and stop empathizing with the patients they work with (Maslach et al., 1996). In addition, research shows that inconsistency between work and expected rewards or compensation is strongly associated with cynicism (Leiter & Maslach, 2009). The excessive negativity an individual develops through cynicism is what leads to feelings of inefficiency.

Inefficiency

Feelings of inefficiency occur when someone believes they are no longer enough for the job and as a result it becomes increasingly hard to succeed in everyday tasks and projects (Maslach et al.,

1996). Overall discontentment with the job is felt. Inefficiency is a unique aspect of burnout because it revolves around oneself and relates to interpersonal struggles (Maslach & Jackson, 1981). Inefficiency is thought to proceed cynicism because adopting such a cynical attitude hinders the ability to work with engagement and purpose (Maslach & Leiter 1997). As a result, the ability to feel you are effective and contributing to the work environment is lost.

Burnout in Inexperienced Populations

Newer nurses typically experience higher levels of burnout (Leiter, Schaufeli, & Maslach, 2001). Rudman and Gustavsson (2011) developed individual change trajectories and found that almost every fifth new graduate nurse will experience burnout during their first three years of work. Their research focused on how demographics and education prior to entering the workforce influenced new graduate nurses. They concluded that different work environment characteristics have a significant effect on the development of burnout in new graduates. Research has shown that workplace incivility caused by differences in expectations between new graduates and experienced nurses is also associated with burnout (Laschinger et al., 2009). In addition, new graduate nurses who have supportive environments, workplace civility, and feelings of empowerment are less likely to experience burnout.

Interventions

Research has shown that because new graduates enter into the workplace with high expectations. Varying expectations between colleagues may cause workplace incivility which is associated with burnout (Laschinger et al., 2009). Managers should be aware that allowing new graduates to practice in a way that aligns with their educational expectations may significantly

reduce levels of burnout in this population. Nurse managers play a large role in avoiding burnout in new graduate nurses (Laschinger, Grau, Finegan, &Wilk, 2012). They have the ability to make the employees feel appreciated and useful through verbal praise and open communication. In addition, research also shows that bullying contributes to feelings of burnout but can be averted through authentic leadership (Laschinger, Wong, & Grau, 2012). Time should be invested in nurse managers to educate them on leadership skills and prevention methods for workplace bullying. Shaping a positive work environment is essential for transitioning new graduate nurses into the workforce.

Significance

Burnout is crisis that affects all professions and is not limited to healthcare. A survey conducted by the American Psychological Association (2011) found that approximately 36% of workers are stressed throughout their workday. In addition, the survey also showed that one-in-five workers rated stress experienced in the workplace as an eight or higher on a 10-point scale. Malasch and Leiter (1997) relate this to the increased pressure society places on individuals to maintain work and be successful. They discuss how remaining qualified and employed grows increasingly difficult as technology further develops and cheaper labor is sought across seas. Employers often view burnout as an individual problem and avoid involvement because they do not want to be burdened with requests for higher pay and better hours. However, caution in the healthcare industry is warranted because burnout has been associated with poorer patient outcome (Salyers et al., 2015).

With the nursing shortage increasing, understanding burnout and retaining nurses grows increasingly important. The World Health Organization (2013) identifies a healthcare shortage of approximately 12.9 million workers by 2035. Of that projection, in developed countries, it is estimated that 40% of nurses will be resigning. The American Association of Colleges of Nursing (2019) stresses that the shortage of nurses will only intensify in America as the Baby Boomer Generation increases its need for healthcare. This is significant because research has shown that patients in hospitals with high patient-to-nurse ratios have higher risk of 30-day mortality and higher rates of failure-to-rescue which is described as mortality after complications (Aiken, Clarke, Sloane, Sochalski, & Silber, 2002). More patients and less RNs threatens the delivery of safe,

quality patient care. In addition, nurses in hospitals with high patient-to-nurse ratios are twice as likely to develop burnout and job dissatisfaction.

AMN Healthcare performed a survey and found Millennials (for those born between 1982 and 1999) remain with the same employer for an average of 2.8 years, in contrast to older generations, which stay for approximately 10.1 years (AMN Healthcare, 2018). This is significant because with the arising shortage of nurses, it is important to retain new employees (American Nurses Association, n.d.). Millennials also share new ideas and expectations of healthcare and the work environment they enter (AMN Healthcare, 2018). The AMN Healthcare report (2018) showed that 68% of Millennials agreed that the atmosphere of a work environment and the healthcare organization's goals were related to patient care quality, in comparison to 62% of Generation X, and 57% of the Baby Boomers. In addition, 77% of Millennials reported the value of an impactful leader. This relates to previous research supporting the benefit of authentic leadership in decreasing the prevalence of burnout in new graduate nurses (Laschinger, Wong, & Grau, 2012). As Millennials enter into the workforce, it is important for nurse managers to help new graduates avoid workplace incivility and be aware of conflicting values (Laschinger et al., 2009). This will help create happier, more productive nurses.

Problem

New graduate nurses have been associated with a greater risk for experiencing burnout due to lack of experience and conflicting expectations upon entering the workforce (Laschinger et al., 2009; Rudman & Gustavsson, 2011). To provide the best patient care possible, factors associated with burnout must be identified in order to create effective interventions and tools that help new graduate nurses succeed in the workplace.

Purpose

The purpose of this literature review is to identify the different factors associated with burnout in new graduate nurses and to recommend interventions that may reduce its prevalence in the workplace.

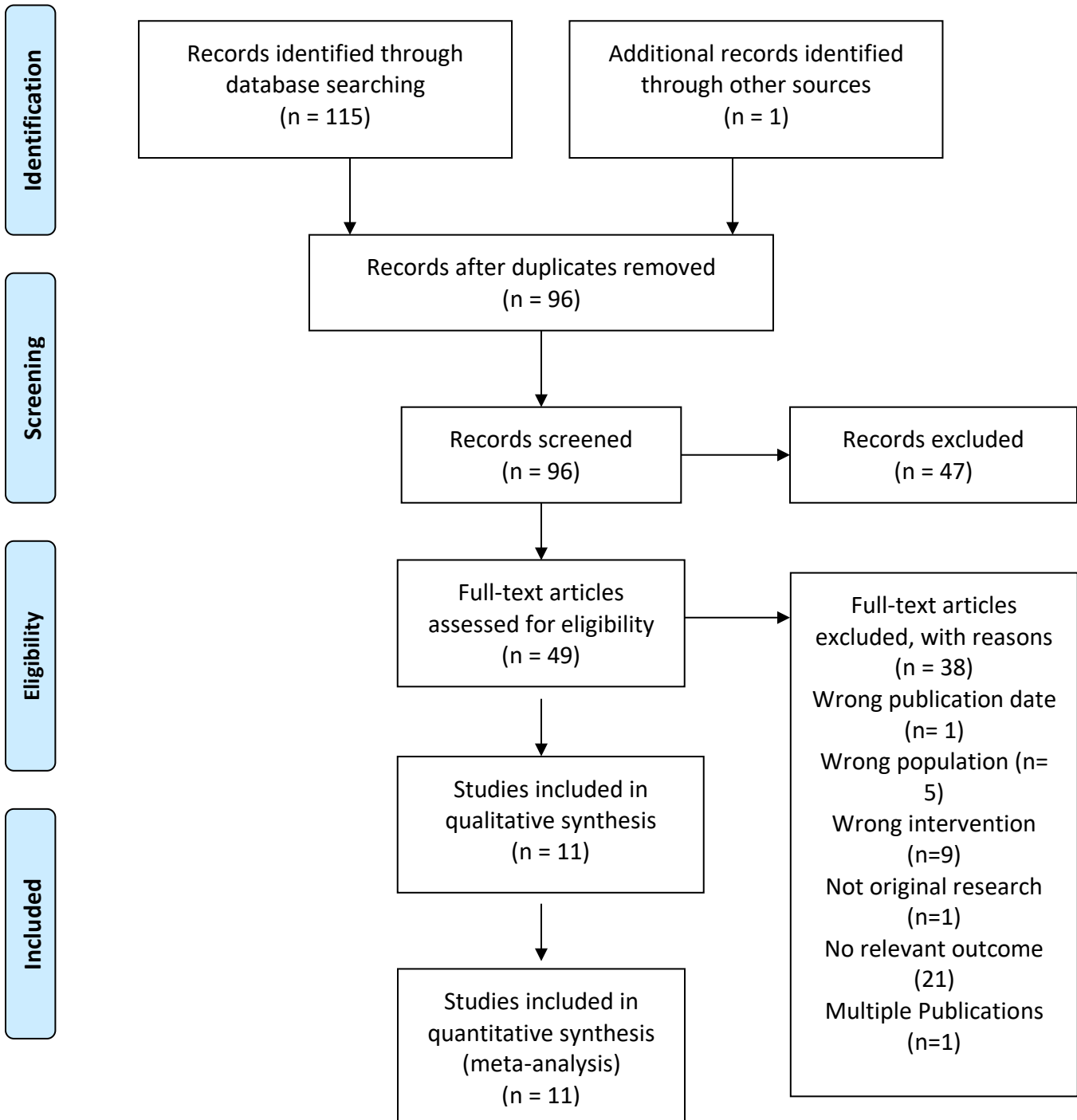
Methodology

A literature review was performed using the databases MEDLINE, CINAHL Plus with Full Text, PsycARTICLES, and PsycINFO. The key words “new graduate nurses” or “novice nurse” were used along with “burnout professional, and burnout”. Not compassion fatigue was also specified. To be included in the review, selected studies must be published in scholarly (peer reviewed) journals, written in the English language, published between 2008-2019, and address the topic of burnout. Articles examining compassion fatigue and literature reviews were excluded from the review. Reliable websites such as the World Health Organization (WHO), American Nurses Association, American Association of Colleges of Nursing, and the U.S. Department of Health and Human Services were used to collect relevant statistics and data reports. The reference lists of selected articles were reviewed for any relevant content that may have been missed during the initial search. Articles were not limited to studies conducted in the United States since burnout is a worldwide phenomenon.

One hundred and fifteen articles were retrieved from the designated search and one was from an additional source. Ninety-six articles were screened after duplicates were removed from the search (Figure 1). Of those, 47 articles were excluded, and 49 full-text articles were assessed for eligibility. One article was excluded for a wrong publication date, five articles were excluded for the wrong population, nine articles were excluded for interventions not focused on burnout related to new graduate nurses, one article was excluded for being a literature review, one was a duplicate publication, and 21 were excluded due to outcomes not contributing to the purpose of this review. Eleven studies were included in this literature review relating to different factors that

contribute to burnout in new graduate nurses (Appendix). Major topics addressed included environmental factors, expectations verses reality, role of professional identity, and influences of past educational experiences. Studies selected for review were conducted within the past 10 years and focused on the new graduate nurse population. A new graduate nurse was generally defined as a registered nurse with less than five years of experience. Two of the articles where phenomenology studies, two were observational studies, two were surveys, two were longitudinal studies, two were mixed-method studies, and one was a descriptive correlational design.

Figure 1



Findings

Expectations versus Reality

New graduates reported feeling a sense of accomplishment after completing their academics and becoming newly registered nurses (Roziars, Kyriacos, & Elelwani, 2014). However, in anticipation of beginning their new careers graduates reported fear of their new role. In addition, six out of the eight participants from the study, reported feeling reality shock once on the unit. Reality shock is described as feeling uncertainty and anxiety towards the new workplace. Factors such as staff attitudes, work environment, or having high acuity patients can influence feelings of reality shock for new graduates during the adjustment period. Major factors that contributed to feelings of reality shock included feeling inadequately prepared to handle conflicts related to difficult workplace environments or improper preparation through orientations that had been cut short due to short staffing. This evidence was supported by another study where 45% of respondents reported high to extreme stress related to workplace role expectations (Parker, Giles, & McMillan, 2014). In addition, 26% of participants questioned if they possessed all the necessary information needed to perform their job. Lack of support compared to expected workplace support was a critical factor throughout the study that participants attributed to both an emotionally and physically stressful workplace transition. Another study conducted by Pellico, Brewer, & Kovner (2009) exploring the experience of new graduate nurses found expectations not meeting reality was a widespread issue. Participants expected more cooperation and assistance from management and anticipated having a voice in the workplace. In addition, many new graduates felt they were not adequately prepared to handle all the nursing skills they encountered.

This was associated with perceptions of a lack of preparation in nursing school.

Effects of Education

In the study conducted by Pellico et. al. (2009), new graduates felt that they had been inadequately prepared for nursing skills during their college careers. In addition, many students felt that nursing school had painted unrealistic ideations about how nursing in the real world would progress. Nurses in this study suggested that nursing schools implement communication activities for working interdisciplinary team members and eight-hour clinical days involving a more realistic nurse-patient ratio to better prepare for the real work environment. Alternate studies found that a nursing student's feelings during education can influence how they feel during their career (Rudman & Gustavsson, 2011; Rudman, Gustavsson, & Hultell, 2014). For example, students who experienced stress during their studies were more likely to perceive their education as insufficient and as a result felt unprepared to be a nurse. Perception of educational sufficiency reflected how new graduates felt about entering the workforce. One study focused on differences between stress experienced in nurses who graduated with a BSN degree compared to an ASN degree (Wu, Fox, Stokes, & Adam, 2012). New BSN nurses had higher levels of stress overall while ASN students struggled more with hospital involvement issues. BSN nurses reported more stress associated with nursing skills than ASN students. Researchers speculate this may be attributed to the different focuses within each of the curriculum. Additional research by Rudman & Gustavsson (2011) supports these findings by concluding that lack of interest in studies and feelings of unpreparedness in the final year of nursing education was correlated with burnout. New graduates who reported moderate to higher levels of burnout expressed more dissatisfaction toward their education than

new graduates who reported lower levels of burnout. Graduates with lower levels of burnout believed that they had been adequately prepared by their nursing program.

Role of Environment

Workplace mistreatment or bullying has been identified as a significant factor that affects nursing satisfaction and burnout (Pellico et al., 2009). Nurses reported mistreatment from physicians, seasoned nurses, and management which contributed to stress and frustration. Chronic work stress has been identified as a significant factor leading to burnout and dissatisfaction (Cheng, Liou, Tsai, & Change, 2014). Workload was another common factor that lead to job dissatisfaction (Pellico et al., 2009). Many nurses felt their orientations were cut short and they were not ready to handle the workloads they were expected to manage. Workload played another significant role in a study by Parker et al. (2012) where new graduates felt themselves and their colleagues were overwhelmed. This made it difficult for them to seek help. New graduates also reported poor attitudes directed toward them by staff. Another study by Lashigner et al. (2016) that compliments these findings found that 90% of participants felt that having a preceptor was extremely beneficial. Nurses in this study felt they had workplace support and reported higher levels of satisfaction. However, workplace incivility was still a problem and was reported by 24-42% of nurses at the workplace.

Professional Identity

Martin and Wilson (2011) identify two main challenges that new graduates must overcome: adapting to nursing culture and developing professional responsibilities. Adapting to nursing culture can be described as the process new graduates undergo when becoming accustomed to their

new environments and roles. If new graduates are unable to adapt to this new culture, reality shock may develop. Developing professional responsibilities goes one step further and can be defined as working through being a novice nurse, finding excitement in becoming a mature nurse and becoming competent in your practice. Factors such as personality, experience, and self-awareness were found to influence how new graduates developed professional responsibilities. Having positive relationships with coworkers was found to aid new graduates in developing their professional identity. A study by Rainbow and Steege (2018) supports these findings and noted that a major theme new graduates struggled with was describing the nurse's role. Participants struggled to describe the nursing role and recognized their uncertainty as stressors. Another study noted professional identity as a major factor that contributed to new graduates' intention to leave predominantly during their transition year (Zhang, Wu, Fang, Zhang, & Wong, 2017). Together occupational stress and professional identity were the main factors contributed to 59.4% of the variance of intention to leave.

Discussion

The purpose of this literature review was to explore factors that contribute to burnout in new graduate nurses in order to identify possible interventions. It was made evident throughout this review that a combination of significant factors contributes to an increased rate of burnout. Many of the findings were heavily supported in previous literature and others appeared to be newer concepts that are still being explored. Factors like the workplace environment and expectations not meeting reality have been widely supported in the literature whereas concepts such as education and developing professional identity are factors that would benefit from further research.

In this literature review, workplace mistreatment towards new graduate nurses was a significant finding in burnout development (Pellico et al., 2009). Additional studies support the finding that workplace bullying has a significant effect on new graduates' work experiences (Laschinger et al., 2009; Laschinger et al., 2012). New graduates who experience workplace mistreatment have less job satisfaction and are more predisposed to developing burnout. Emotional exhaustion, which is a core element of burnout, is linked to lack of workplace support and is associated with poorer health outcomes (Cho et al., 2006). Other environmental factors such as workload, was found to be a significant factor contributing to burnout (Pellico et al., 2009). Like workplace mistreatment, workload is directly linked to exhaustion (Leiter & Maslach, 2009). Both of these factors work together to evolve into cynicism which is a result of prolonged periods of exhaustion (Leiter & Maslach, 2004). Cynicism threatens new graduate nurses from providing quality care because disconnect and lack of empathy for patients develops (Maslach et al., 1996). Creating positive and supportive work environments through authentic leadership helps diminish

the prevalence of burnout (Laschinger et al., 2012). In addition, this study showed that 90% of new graduates felt being involved in a preceptor program help them transition into the work environment, but workplace bullying was still a prevalent issue in this study. This is significant because incivility and bullying are linked to cynicism which is a core element of burnout. This study recommends that nurse leaders be made more aware of the appropriate ways to interact with new graduates in order to build trust. In addition, interventions such as a zero-tolerance policy towards bullying and regular staff meetings to improve relationships can be implemented to create a supportive work environment.

Other research goes further and suggests implementing a combination of person- and organization-directed interventions (Awa, Plaumann, & Ulla, 2010). Person-directed interventions include individual focused support such as counseling, relaxation techniques, or skills training. In contrast, organization- directed interventions place an emphasis on the organization itself and how it is structured. Interventions for this may include job evaluations or work performance appraisals. This study saw a reduction in burnout which lasted up to one year in 80% of the combined interventions. Supportive work environments also benefit new graduates who are struggling to develop their personal identity (Martin & Wilson, 2011). Adaptation skills are directly affected by the work environment and relationships formed with colleagues. Martin and Wilson (2011) described how professional identity is developed through new work experiences and how novice nurses choose to adapt to different situations. This research emphasizes that the quality of relationships built in preceptor and mentor programs has a large influence on the ability of new graduates to successfully adapt to the nursing culture and develop their professional identity.

Rainbow and Steege (2018) support this claim in their research and recommend there are still adjustments that need to be made in residency programs to help new graduates be successful in the workplace. Martin and Wilson (2011) include recommendations of further education for staff and nurses in the academic field. In school, students should be taught about “real world” nursing. Staff should be trained to properly interact and implement appropriate programs and interventions to help new graduates succeed.

Perceptions of work-life can be formed during educational experiences before new graduates even enter into the workforce (Rudman & Gustavsson, 2011; Rudman, Gustavsson, & Hultell, 2014). Studies have shown that students’ feelings toward the quality of their education can be mirrored in how they view their skills and capability in the workplace. New graduates may struggle in the workplace due to preconceptions they formed as students in nursing school. Studies recommend new graduates finish rotation with preceptors and have more comprehensive orientation programs to aid them in successfully transitioning into the workplace (Pellico et al., 2009). Additional research supports that similar interventions such as immersive orientation programs that offer clinical scenarios will help to reduce new graduate expectations conflicting with reality (Roziars et al., 2014). By providing new graduates with realistic work expectations and limiting feelings of uncertainty, reality shock can be avoided. Interventions such as these would assist in the adjustment period of integrating new graduates into the workforce. However, programs such as these must be executed properly or new graduates will feel disappointment when the promised support is not received (Parker et al., 2014). Participants in this study by Parker et al. (2014) reported having little interaction with their mentors and mentors not taking initiative to

connect with them. If mentors were more present and provided helpful feedback, participants believe they would have greatly benefited. Through these interventions, stress related to the job can be decreased thus avoiding exhaustion which is a core element of burnout (Maslach & Leiter, 1997).

Limitations

The primary limitation of this study was the self-reported nature of the data collected for the identified studies. Surveys and self-reported data are sometimes subject to possible bias (Polit & Beck, 2017). In addition, the size of the samples used in the studies is a limitation. Three of the articles incorporated in this literature review had less than 20 participants. Limited sample sizes may cause problems in identifying relationships between factors and producing statistically significant data. Five of the articles identify using convenience samples which may affect the ability of the data to be representative of the entire population. Finally, as a new researcher the author's interpretation of the literature may be limited.

Recommendations

The work environment which encompasses workload, employee relationships, available resources, and work hours has been found to be a major contributing factor to burnout (Pellico et al., 2009). Throughout this study data was collected based on nurses' experiences and perceptions. The above factors were repeatedly identified as causing stress and decreased job satisfaction. Interventions identified to help new graduates during the transition into the workplace include lower patient-to-nurse ratios, reevaluating expectations on the unit for new graduates, and creating more interactive, extensive orientation programs. In addition, teaching new coping strategies should be incorporated into orientations of new graduate nurses since increased levels of stress are associated with poor coping mechanisms (Wu et al., 2012). Activities such as role play, simulation, or case studies can be used during orientations to promote more effective coping in the workplace. Additional transitioning tools may include residency programs, mentor programs, or programs that match new graduate nurses with preceptors (Martin & Wilson, 2011).

Educational influences were also identified as a significant factor effecting new graduates' transition into the workplace (Rudman & Gustavsson, 2011; Rudman, Gustavsson, & Hultell, 2014). Feelings of education inadequacy may reflect on new graduates' perception of their clinical abilities. Research recommends incorporating activities such as rounding with physicians, charting, and participating in report to improve communication skills (Pellico et al., 2009). Participants from this study also voiced that eight-hour clinical days and patient-nurse ratio mimicking work life would be beneficial if introduced to nursing programs. Another recommendation is different programs should collaborate with each other to enhance and

complement each other's curriculum. This is supported by a study that focused on preparedness between new graduates from BSN and ADN programs (Wu et al., 2012). In addition, nursing schools would benefit from working with hospital nurse educators to ensure that programs are up to date with the technology students are using. Entering into the workforce with no knowledge of how to operate basic medical technology is a source of stress for new graduate nurses and can be avoided by integrating these skills into the educational programs. Helping new graduate nurses develop professional identity is important in avoiding intention to leave and improving quality of care provided to patients (Zhang et al., 2017). Research has shown the most effective way to guide new graduates in developing a positive professional identity is to ensure they have good role models and mentors to provide support as they learn how to adapt to the work environment. Having mentors or preceptors is also recommended to avoid reality shock (Roziars et al., 2014). Supportive colleagues that promote a positive work environment is essential for promoting a successful transitional and optimal learning. This study also recommends future research on clinical coaching which has been a successful learning tool, yet few studies have been conducted on its methods and effectiveness.

Conclusion

There are many factors that relate to burnout developing in new graduate nurses. Significant factors identified included the overall work environment, expectations not meeting reality, impact related to the educational environment, and development of professional identity. Interventions were identified to help ease new graduates' transition into the workplace. These interventions include longer orientation time, preceptorship, and effective, authentic leadership that creates an open learning environment. Recommendations include further review of academic curriculum to ensure students are being adequately prepared for the workforce and clinical coaching as a learning tool. In addition, orientation should be modified to include extra adjustment time for new graduates and introduce effective coping mechanisms for work life.

Appendix

Appendix

Year	Author	Title	Purpose	Methods	Significant Findings
2014	Roziars, Ramugondo, Kyriacos	Newly Qualified South African Nurses' Lived Experience of the Transition From Student to Community Service Nurse: A Phenomenological Study	Research newly qualified nurse's preparedness for transitioning into a community nurse role	Husserlain descriptive phenomenology	Students felt achievement after completing their studies, but experienced uncertainty and fear about the future and reality shock
2014	Rudman, Gustavsson, Hultell	A Prospective Study of Nurses' Intentions to Leave the Profession During their First Years of Practice in Sweden	Investigate new graduates' intention to leave the nursing profession during the first five years, and study the impact of various factors on the intention to leave	Longitudinal observational study	Increased levels of burnout are associated with an increased intention to leave
2011	Rudman, Gustavsson	Early-career burnout among new graduate nurses: A prospective observational study of intra-individual change trajectories	To compare various change trajectories and how they relate to burnout in new graduate nurses	Prospective observational study	Eight change trajectories were identified with seven showing significant changes in burnout development
2014	Cheng, Liou, Tsai, Change	Job stress and job satisfaction among new graduate nurses during the first year of employment in Taiwan	Identify the connections between job satisfaction, job stress, and related factors in new graduate nurses	Longitudinal design	Different generations may play a role in fluctuating job stress and shift preferences in new graduate nurses

2014	Parker, Giles, Lantry, McMillan	New graduate nurses' experiences in their first year of practice	Focuses on new graduate nurses transition into the workforce and how factors affect transition, satisfaction, and retention	Mixed method cross sectional design	Factors such as environment, available support, amount of experience, and reality versus expectation affected satisfaction most significantly; overall graduates were content with recruitment and support
2017	Zhang, Wu, Fang, Zhang, Wong	Newly graduated nurses' intention to leave in their first year of practice in Shanghai: A longitudinal study	Identify factors related to the intention to leave within the first year	Longitudinal study	New graduates are associated with higher intentions to leave within the first year; occupational stress and professional identity were the two most significant factors
2011	Martin, Wilson	Newly Registered Nurses' Experience in the First Year of Practice: A Phenomenological Study	To understand the experience of new graduate nurses during the first year	Phenomenological study	Developed two theme categories: <i>Adapting to the Culture of Nursing</i> and <i>Development of My Professional Responsibilities</i> with underlying sub-themes

2016	Laschinger, Cummings, Leiter, Wong, MacPhee, Ritchie, Wolff, Regan, Rhe'aume-Bru'ning, Jeffs, Young-Ritchie, Grinspun, Gurnham, Foster, Huckstep, Ruffolo, Shamian, Burkoski, Wood, Read	Starting Out: A time-lagged study of new graduate nurses' transition to practice	To explore factors relating to both new graduate nurses' successful transition and find predictors on turnover, career satisfaction, and job satisfaction.	National two-wave survey	Incivility, emotional exhaustion, and cynicism were all factors reported throughout the study, in addition, Psycap predicted satisfaction and turnover intentions.
2018	Rainbow, Steege	Transition to practice experiences of first-and second-career nurses: A mixed-methods study	To explore experiences of first and second career nursing students after the first year of practice	Mixed-methods study	Three major themes were identified: Prevalence of Burnout and Presenteeism, Stressors and Coping, and Difficulty Describing Nurses' Role
2009	Pellico, Brewer, Kovner	What newly licensed registered nurses have to say about their first experiences	To gain improved understanding of Newly Licensed RNs work life through comments provided	Cross-sectional mailed survey	Newly Licensed RNs expressed workload issues, lack of management support, and relationship conflicts; dissatisfaction with time constraints such as limited orientation were expressed

2012	Wu, Fox, Stokes, Adam	Work-related stress and intention to quit in newly graduated nurses	To explore stress associated with work, factors that affect stress levels, and coping strategies in new graduate nurses and intentions to leave	Descriptive correlational design	Educational programs and amount of experience are associated with types of stressors experienced during the first three years.
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References

- Aiken, L. H., Clarke, S. P., Sloane, D. M., Sochalski, J., & Silber, J. H. (2002). Hospital nurse staffing and patient mortality, nurse burnout, and job dissatisfaction. *Journal of the American Medical Association*, 288(16), 1987. doi:10.1001/jama.288.16.19
- American Association of Colleges of Nursing. (2019). *Nursing shortage*. Retrieved from <https://www.aacnnursing.org/News-Information/Facts-Sheets/Nursing-Shortage>
- American Nurses Association. (n.d.). *Workforce*. Retrieved from <https://www.nursingworld.org/practice-policy/workforce/>
- American Psychology Association. (2011). *Stress in the Workplace*. Retrieved from <https://www.apa.org/news/press/releases/phwa-survey-summary.pdf>
- AMN Healthcare. (2018). *Survey of millennial nurses: A dynamic influence on the profession*. The Center for the Advancement of Healthcare Professional.
- Awa, W. L., Plaumann, M., & Walter, U. (2010). Burnout prevention: A review of intervention programs. *Patient Education and Counseling*, 78(2), 184–190. doi: 10.1016/j.pec.2009.04.008
- Cheng, C.-Y., Liou, S.-R., Tsai, H.-M., & Chang, C.-H. (2014). Job stress and job satisfaction among new graduate nurses during the first year of employment in Taiwan. *International Journal of Nursing Practice*, 21(4), 410–418. doi: 10.1111/ijn.12281
- Cho, J., Laschinger, H. S., & Wong, C. (2006). Workplace empowerment, work engagement and organizational commitment of new graduate nurses. *Nursing Leadership*. 19(3), 43-60. Doi:10.12927/cjnl.2006.18368

- Garrett, D. K., & Mcdaniel, A. M. (2001). A new look at nurse burnout. *JONA: The Journal of Nursing Administration*, 31(2), 91-96. Doi:10.1097/00005110-200102000-00009
- Laschinger, H. S., Finegan, J., & Wilk, P. (2009). New graduate burnout: The impact of professional practice environment, workplace civility, and empowerment. *Nursing Economics*, 27(6), 377-383. Retrieved from <http://search-ebSCOhost.com.ezproxy.net.ucf.edu/login.aspx?direct=true&db=rzh&AN=105262489&site=ehost-live&scope=site>
- Laschinger, H. K., Grau, A. L., Finegan, J., & Wilk, P. (2012). Predictors of new graduate nurse's workplace well-being. *Health Care Management Review*, 37(2), 175-186. doi:10.1097/hmr.0b013e31822aa456
- Laschinger, H. K., Wong, C. A., & Grau, A. L. (2012). The influence of authentic leadership on newly graduated nurses' experiences of workplace bullying, burnout and retention outcomes: A cross-sectional study. *International Journal of Nursing Studies*, 49(10), 1266-1276. doi:10.1016/j.ijnurstu.2012.05.012
- Laschinger, H. K. S., Cummings, G., Leiter, M., Wong, C., Macphee, M., Ritchie, J., ... Read, E. (2016). Starting Out: A time-lagged study of new graduate nurses' transition to practice. *International Journal of Nursing Studies*, 57, 82-95. doi: 10.1016/j.ijnurstu.2016.01.005

- Leiter, M. P., & Maslach, C. (2004). Areas of worklife: A structured approach to organizational predictors of job burnout(91st ed., Vol. 3, Ser. 134). doi:10.1016/S1479-3555(03)03003-8
- Leiter, M. P., & Maslach, C. (2009). Nurse turnover: The mediating role of burnout. *Journal of Nursing Management*, 17(3), 331-339. doi:10.1111/j.1365-2834.2009.01004.x
- Leiter, M. P., Schaufeli, W. B., & Maslach, C. (2001). Job burnout. *Annual Review of Psychology*, 52, 397-422. doi:10.1002/9781118785317.weom110006
- Martin, K., & Wilson, C. B. (2011). Newly Registered Nurses' Experience in the First Year of Practice: A Phenomenological Study. *International Journal of Human Caring*, 15(2), 21–27. doi: 10.20467/1091-5710.15.2.21
- Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of Organizational Behavior*, 2(2), 99-113. doi:10.1002/job.4030020205
- Maslach, C., Jackson, S. E., & Leiter, M. P. (1996). *Maslach Burnout Inventory* (3rd ed.) Palo Alto, CA: Consulting Psychologists Press.
- Maslach, C., Jackson, S. E., & Leiter, M.P. (1996). *Maslach Burnout Inventory* (3rd ed.). Palo Alto, CA: Consulting Psychologists Press.
- Maslach, C., & Leiter, M. P. (1997). *The truth about burnout: How organization cause personal stress and what to do about it*. San Francisco, CA: Jossey – Bass.

- Parker, V., Giles, M., Lantry, G., & Mcmillan, M. (2014). New graduate nurses experiences in their first year of practice. *Nurse Education Today*, 34(1), 150–156. doi: 10.1016/j.nedt.2012.07.003
- Pellico, L. H., Brewer, C. S., & Kovner, C. T. (2009). What newly licensed registered nurses have to say about their first experiences. *Nursing Outlook*, 57(4), 194–203. doi: 10.1016/j.outlook.2008.09.008
- Peterson, U., Demerouti, E., Bergstrom, G., Samuelsson, M., Asberg, M., & Nygren, A. (2008). Burnout and physical and mental health among Swedish healthcare workers. *Journal of Advanced Nursing*, 62(1), 84-95. doi:10.1111/j.1365-2648.2007.04580.x
- Polit, D. F., & Beck, C. T. (2017) *Essentials of Nursing Research: Appraising Evidence for Nursing Research*, (9th Edition). Philadelphia: Wolters Kluwer. ISBN: 9781496351296
- Rainbow, J. G., & Steege, L. M. (2018). Transition to practice experiences of first- and second-career nurses: A mixed-methods study. . *Journal of Clinical Nursing*, 28(7-8), 1193–1204. Retrieved from <https://doi.org/10.1111/jocn.14726>
- Roziars, R. L., Kyriacos, U., & Ramugondo, E. L. (2014). Newly Qualified South African Nurses' Lived Experience of the Transition From Student to Community Service Nurse: A Phenomenological Study. *The Journal of Continuing Education in Nursing*. doi: 10.3928/00220124-20140122-01

- Rudman, A., & Gustavsson, J. P. (2011). Early-career burnout among new graduate nurses: A prospective observational study of intra-individual change trajectories. *International Journal of Nursing Studies*, 48(3), 292-306. doi:10.1016/j.ijnurstu.2010.07.012
- Rudman, A., Gustavsson, P., & Hultell, D. (2014). A prospective study of nurses' intentions to leave the profession during their first five years of practice in Sweden. *International Journal of Nursing Studies*, 51(4), 612–624. doi: 10.1016/j.ijnurstu.2013.09.012
- Salyers, M. P., Fukui, S., A. L., Firmin, R., Gearhart, T., Noll, J. P., ... Davis, C. J. (2015). Burnout and self-reported quality of care in community mental health. *Administration and Policy in Mental Health and Mental Health Services Research*, 42(1), 61-69. doi:10.1007/s10488-014-0544-6
- World Health Organization. (2013). *Global health workforce shortage to reach 12.9 million in coming decades*. Retrieved from <https://www.who.int/mediacentre/news/releases/2013/health-workforce-shortage/en/>
- World Health Organization (2019). Burn-out as an “occupational phenomenon: International Classification of Diseases. Retrieved from https://www.who.int/mental_health/evidence/burn-out/en/
- Wu, T.-Y., Fox, D. P., Stokes, C., & Adam, C. (2012). Work-related stress and intention to quit in newly graduated nurses. *Nurse Education Today*, 32(6), 669–674. doi: 10.1016/j.nedt.2011.09.002

Zhang, Y., Wu, J., Fang, Z., Zhang, Y., & Wong, F. K. Y. (2017). Newly graduated nurses intention to leave in their first year of practice in Shanghai: A longitudinal study. *Nursing Outlook*, 65(2), 202–211. doi: 10.1016/j.outlook.2016.10.007