

The Doubting Thomas: Sentiments of New Registered Nurses During Covid-19 Pandemic

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Abstract— *With the delays in the nurse licensure examination and the disruptions related to work upon employment, new registered nurses began to question their competencies whether they could practice professional nursing with competence and confidence. A descriptive qualitative research design was employed to recount the transitional experiences of new registered nurses. Combined purposive and snowball sampling techniques in selecting qualified participants who passed the nursing licensure examination in 2021. Meanwhile, a written interview was conducted with 15 participants, and the collected data was treated using thematic analysis.*

The following themes emerged in the analysis of the data: (1) constraints and limitations in the clinical preparations during baccalaureate undertaking; (2) pandemic-challenged in clinical nursing practice; and (3) coping mechanisms in facing the pandemic-induced transitional events during actual clinical nursing practice. Generally, feelings of uncertainty and professional inadequacy transpired among the new registered nurses.

Considerably, nursing theory-based interventions must be developed and facilitated to enhance the overall well-being of new registered nurses as they embark on their professional nursing practice amidst the pandemic. Likewise, both hard and soft skills reinforcement programs must be fostered to nurture and aid new registered nurses to practice professional nursing with more competence.

Index Terms - Confidence, Competence, Covid-19 Pandemic, New Registered Nurses, Transitional Experience.

I. INTRODUCTION

Nurses are undoubtedly one of the most valuable members of the healthcare team. As newly registered nurses become a product of the disturbance and disruption precipitated when the COVID-19 pandemic started, pressure to adapt to the current situation while expected to become competent in their profession places them in the grim of unfortunate events. NRNs experienced discrepancies between what was taught in the academe and the experience embarked during their deployment in the clinical setting [32]. When the covid-19 started, registered nurses while still adapting and contemplating what lies ahead of them, the heavy workload and constraint caused them to become more vigilant. Especially in enforcing the sudden changes in hospital policies, restrictions, and contemporary practices in the new normal [21].

To be resilient with grit is what nurses are trained for. Being adaptable in any circumstance is what makes nursing a unique profession. With any situation placed in their scope of responsibility, they ought to provide the most efficient and effective way to care for their patients. Nurses being labelled as heroes amidst the pandemic is a great recognition for the profession [39]. On the contrary, many of these nurses' experiences have not been voiced out or told about to people who are not associated with the field, from wearing a clean white uniform to becoming covered with multiple fabrics of PPE. From working a standard 8-hour shift to working longer hours until the day after. Sacrificing a lot, not just for themselves but also for their families, is ponderous for them

to be labelled as heroes.

Many countries were looking to hire NRNs, even those who had no clinical experience. Considering that even before the pandemic began, thousands of nurses were being deployed in different countries. Many opportunities and experiences lay ahead in this profession's means, thereby offering a wide array of job security and opportunities. The nursing profession's complexity makes them flexible and dynamic in their chosen field [20]. It was also pointed out that graduates do not feel compelled, confident, secure, or protected throughout the first year of their professional career, and they quickly become emotionally and physically exhausted [60]. Adjustments in life patterns and routines have also developed leading to unforeseen burdens, especially for Newly graduated nurses who have difficulty adjusting.

The transitional experience of NRNs comes with a lot of challenges associated with their environment. As they undergo between these two occurrences, require an in-depth assistance, and strict guidance in order to protect them and lead them, to become advanced in the nursing profession [44]. At this moment, challenges may be unanticipated due to the pandemic. Ergo, the process of transition for NRNs may be tough, but could also be substantial for them to enhance their skills and knowledge in the clinical area during the covid-19 outbreak. With proper training and preparation, NRNs during the pandemic may become more resistant to stressors present in their environment. The world disruption of education caused by the COVID-19 pandemic led to a new norm in education provision. Traditional face-to-face nursing

education has abruptly changed to a virtual and online educational setting, to minimize further virus spreading. NRNs encounter several barriers that can obstruct their successful transition to the profession [41].

Numerous studies have shown how difficult the first year of employment is for fresh graduates who may feel exposed and worried as they struggle to adjust to a heavy workload and thus face high stress levels from their own and the team's expectations [26]. In this matter, it is essential to keep in mind that nursing students have missed out on study-to-work shifts and months of practice in the clinical setting that could have developed their skills in specialized services. These students now have to engage in a stressful environment in a healthcare system that had never witnessed such increased patient mortality rates and had to modify treatment protocols regularly. Recent virus outbreaks have already had harmful consequences on health professionals' mental and physical well-being, particularly nurses. according to numerous reports [46]. Feelings of loneliness, anxiety, depression, fear, sleep disturbances, and post-traumatic stress have been described.

With the impact of the COVID-19 pandemic, pressure to perform skillfully in the clinical area dramatically increased as new modes of practice were introduced in the contemporary setting, with over 500,000 nurses on the verge of retirement. In the best of times, the transition from formal education to nursing practice is stressful for inexperienced nurses and those transitioning into new advanced practice roles. Heavy workloads, a lack of mentoring, and feeling unprepared to practice, especially when caring for patients with complex medical conditions, are all factors that new graduates blame for their stress [13]. It is reasonable to presume that the COVID-19 pandemic has resulted in the creation of newer stressors. Additional research is necessary to comprehend further the short and long consequences of the COVID-19 pandemic on nurses transitioning to practice or new training positions during the pandemic. With this in mind, the study aims to explore the experiences of NRNs, specifically, the batch of 2021 towards becoming more diversified in working to support the health care system. The study desires to know the contemporary aspects of NRNs transitioning to clinical practice amidst the wreaking havoc of the covid-19 pandemic, to focus the attention on the necessary nursing knowledge and skills in preparation for the deployment of future nurses transitioning from bacalaureate nursing undertaking to practice.

II. RESEARCH METHODOLOGY

A. Research Design

The descriptive qualitative research design was utilized to delineate the transitional experiences of new registered nurses from the context of being students to becoming professional nurses during the start of the COVID-19 pandemic, the world's current public health crisis.

B. Population and Sample

The intended participants in the study were new registered nurses who took the nurse licensure examination in the year 2021. This group was particularly chosen as they were the ones who experienced the disruptions and delays brought by the pandemic. Meanwhile, as the study had reached up to 15 participants, data saturation was met.

C. Sampling Technique

The study utilized both purposive and snowball sampling, a non-probability sampling employed to obtain rich information from the intended participants.

D. Method or procedure

With the approval of the author, an adapted questionnaire was used to identify and extract valuable information which revealed significant results. First and foremost, consultation and peer group discussion took place to seek valuable comments and suggestions. The revised questionnaire was then formulated and distributed, utilizing the online platform through the use of Google Forms. Meanwhile, consent was provided to the intended participant to ensure that conforming standards were met and no violation was implicated. During this process, the researchers have sought questions for clarifications by reaching out to the participants using online communication platforms. Afterwards, the gathered responses were read and reviewed by each member of the research team to which the data had been consolidated, coded, and analyzed using the thematic analysis by Braun and Clarke. Finally, with the data drafted, revised, and finalized, a final report was written and presented to the panel members.

E. Instrumentation

The researchers implemented a written interview containing a 2 part questionnaire composing of (1) demographic information and (2) open-ended questions. Open-ended questions was employed for the participants to describe and identify their experiences in the clinical training during their undertaking, their experiences working in the clinical setting during the pandemic, and their coping strategies. It was ensured that the participants were properly oriented with regards to the risk and benefits brought about by the study. Moreover, the liberty to withdraw or willingly participate in the study fully relies on their decision with no constraints implied. To protect the identity of the participants, pseudonyms were used referring to each as P1, P2, P3, and so on.

F. Data treatment and analysis

The collated data was treated and analyzed using thematic analysis were in the 6 phase method was followed coming up with themes which captured the transitional experiences of NRNs. To begin with, the data responses were reviewed and familiarized, noting down similarities in the participants'

answers to the questions provided. After which, the codes were generated to conclude the shared experiences by NRNs. Themes were then searched that would be appropriate to sum up the described experiences of each participants. Thereafter, the themes were reviewed to check for accuracy and relevancy from the codes that were generated. The name of the themes were then rectified coming up with clear definitions. Finally, a report was written to present the final analysis of generated themes from the extracted codes.

G. Trustworthiness

To guarantee and secure the trustworthiness of the study, member checking was done wherein the researchers sought for clarifications to validate the responses of the participants. Meanwhile, the triangulation process were taken into account, utilizing two or more methods of data collection to examine the experiences of NRNs reckoned from each member of the research team.

H. Ethical considerations

The study was submitted, reviewed and approved by the panel of research evaluators in compliance with the ethical considerations that was followed throughout the completion of the study. Concurrently, the template provided by the World Health Organization was used to create the informed consent which was then distributed and signed by each of the participants. Moreover, the study sought approval from the Research Ethics Committee and was granted to pursue the collection and analysis of data.

III. RESULTS

1. Demographic Characteristics of the participants

The participants of the study were newly registered nurses who took the nurse licensure examination in the year 2021. From various health institutions and departments, 15 participants consents to willingly participate in the study. Namely, P1, 24-years old male with 6 months clinical experience; P2, 22-years old female with less than 6 months clinical experience; P3, 22-years old female with less than 6 months clinical experience; P4, 24-years old female with 6 months clinical experience; P5, 25-years old female with 6 months clinical experience; P6, 31-years old female with 6 months clinical experience; P7, 30-years old male with less than 6 months clinical experience; P8, 40-years old female with 1 year clinical experience; P9, 24-years old male with less than 6 months clinical experience; P10, 23-years old female with less than 6 months clinical experience; P11, 23-years old female with less than 6 months clinical experience; P12, 23-years old male with less than 6 months clinical experience; P13, 23-years old female with 6 months clinical experience; P14, 24-years old female with less than 6 months clinical experience; P15, 22-years old female with 6 months clinical experience.

2. Transpired feelings of uncertainty and professional inadequacy

Most of the participants initially expressed feelings of uncertainty during their period of transition from being students to becoming professional nurses. Some have mentioned that despite the challenges in this role-altering experience, at the end of the day, they get to achieve a sense of fruition from being able to help patients towards the process of their recovery. As NRNs who were deployed amidst the surge of covid-19 cases, the complexity of their transition to the profession has exacerbated their feelings of uncertainty about the stressors present under the new normal.

“The first thing I feel is pure excitement then quickly changed to being challenged. The transition for SN to being a full pledge nurse is not a joke, it's like a pill that is hard to swallow. But all in all, it's fun learning new experiences.” (P1)

“The transition of a student to a Full pledged nurse is hard and challenging. Since i work in a Government Hospital the idealistic foundation we learned at school many of it can't be applied at the area I'm working at so yeah there's a big gap to it but i am hoping to get used to it.” (P12)

3. Constraints and limitations in the clinical preparations during baccalaureate undertaking

3.1 Shortcomings on nursing KSA's during pandemic.

With the covid-19 virus newly introduced to the public. The knowledge, perception and preventive measures were studied and stipulated by international and local authorities to try and lessen the number of covid-19 cases. Be as it may, the current status of nursing education was upheld by lockdown, suspension of classes, and immediate switch to conducting classes virtually, limiting the option for student nurses to learn and get used to the skills, most utilized during this unfortunate event. NRNs at this point expressed perceived threat regarding the lack of knowledge about the virus prior to becoming professional nurses during the pandemic

“Theoretical-wise, I have learned the ideals however when you put those in the real setting there will come a difference of what was taught and what is practical at the most. Let say for example the concept of wearing PPE. I know exactly the sequence of wearing the PPE but since the resources are limited in the hospital, nurses have no choice but to again embrace resiliency” (P4)

“Pandemic creates chaos in the world and honestly even Health organizations were shock because we did not see covid 19 coming however we adapt in vulnerability and survive. we covered everything at school like (triaged, diseases, ect) but in reality it's hard to execute things all at once where we are not prepared and all our lives are on the line.” (P13)

“The Covid-19 virus was not yet present when I was a student nurse, that's why we do not have enough knowledge about the virus back then. But now that there are a lot of doctors, scientists and researchers who continue to study the origin, causes and transmission of Covid-19, I must say that it is important that the community should also do their part in researching about the virus even if they are not medically inclined.” (P14)

4. Pandemic Challenged Clinical Practice

4.1 Versatility and flexibility to work under pressure

Newly registered nurses who are engaging in experiences are able to apply what they have learned in the university to real-world settings. Some of the participants stated that more skills are yet to be learned when placed in the clinical setting, compared to the limited RLE skills done during their baccalaureate undertaking. With the Covid-19 pandemic increasing the number of cases, NRNs face greater work pressure, workload, and endless responsibilities in the workforce. Regardless of these challenges, NRNs were able to adapt and adjust as they get used to working under the new normal circumstances.

“Working as a nurse i learned more because i got to know more of your patients status, widen learnings and skills, working area familiarity of equipments and working area as a nurse more than a nursing student that you are only exposed to limited learnings, equipments and skills” (P1)

“Being versatile, workloads in the field are endless. Changes are constant, you should know how to handle time while adapting to changes 'cause if not, you will not just harm your patient but also yourself/license.” (P3)

“Work under pressure” (P12)

4.2 New Normal Working Conditions

In light of being placed in such difficult circumstances, the development of their professionalism may transpire to what they have acquired during clinical training, and now, in their clinical practice during the covid-19 health crisis. The participants put forward that despite the crisis, they were able to utilize the concepts taught, the knowledge acquired, and the skills demonstrated during their undertaking. Working like how they were taught during their clinical training.

While there was no big difference in that context, NRNs pointed out that there had been some changes in the clinical setting ever since the pandemic began. Under the new normal working conditions, modified hospital policies, and protocols were one of the most challenging changes present as they entered the workforce. The hassled effort of nurses to wear what is now called the Level 4 PPE turned out to be very inconvenient for nurses to efficiently do their job.

“Yes, even in dire situation we should follow the proper clinical practice. In recent years, you can talk to patient without worrying about your health. But now, every move requires caution” (P1)

“Well I do the things what the school taught but since I work at govt. Hospital and the area which is a fast phased one is certainly not all of it has been followed since you need to sacrifice some of it to balance the efficiency and quality of care you need to give while it's still on the line of standards of care” (P5)

“Yes of course for example we were taught like one of the most important is proper handwashing when pandemic starts it did not changed but rather improved wearing protective equip properly and proper waste disposal” (P6)

Nurses, despite their heavy workload, exposure to health hazards, and various roles in the hospital setting have not been given attention and provided solutions pre-pandemic. Even more so today, wherein nurses are understaffed, leads them to assume more responsibilities.

4.3 Unanticipated Stressors Entering the Workforce

As a result of the COVID-19 pandemic, nurses have been challenged with situations that risks their health and their ability to work efficiently. Nurses in particular, confront stressors while catering to an increased number of patients admitted, tight fitting schedule, overtime, and the fact that they are still novice nurses in the field, contributes to this matter. The participants shared some pandemic-related stressors augmented during the peak of COVID-19. The theme captured the aggravating factors on situations dealt everyday by NRNs that had an impact on their productivity.

“The number of patients everyday” (P3)

“Adjustment for sleeping schedule and duty hours” (P8)

“Too much workload that needs to be done during my shift” (P5)

“People who does not follow health protocols, short staffing, sobrang gulo na working hours, toxic relatives, bad seniority system among co-workers” (P10)

Nurses had been in demand for the longest time, despite the number of nursing graduates becoming RNs, the number of nurse-to-patient ratio in hospital settings continues to increase and thereby, placing hospitals and other health care facilities to hire more nurses accordingly. Understaffing can be defined as the scarcity of qualified nurses capable of carrying out the tasks that were expected of them. Some of the participants stated that not having enough nurses in the workforce, results in an even more piled up responsibilities to accomplish daily. The theme further encapsulates shortage in staff nurses as one of the stressors upon entering the workforce.

“Sleepless because of understaffing in our area.” (P2)
“The workforce is really not enough or the staffing that need to cater the patients.” (P9)

The participants also mentioned concerns about their safety when exposed to covid-19 patients. The highly transmissible virus became a source of anxiety in a way wherein nurses are not perfectly secured of their compliance with the precautionary measures done, despite being vigilant. On the other hand, The added protection, requires additional coveralls and layers of PPE underneath which made it harder for nurses to work comfortably.

“Some circumstances we had patients that are positive covid 19 that we need to be more careful handling them because we dont know when and where the covid will get to you even though we are protected by PPEs equipment.” (P6)

“Wearing PPE is really hard, its hard to breathe, it’s hot under the PPE suit. I’m all covered during shifting hours and demanding patients..” (P13)

“Risking my health in instances where we handle patients who are positive for Covid-19. We use PPEs during the procedure but I think it’s not enough to protect ourselves from the virus.” (P14)

4.4 Achieved a sense of fulfillment despite mental and physical exhaustion

It is fairly given that the scope of nursing practice extends to a wide array of professional commitment and career advancements. However, the demands imposed on the job as nursing professionals during a crisis can be debilitating to one’s mental and physical well-being. NRNs expressed and described their infirmity in the new normal working conditions. Mainly, the long hours of duty and shortage of staff nurses contribute to their day-to-day work, strongly being described as exhausting, tiring, and stressful. Nonetheless, they still experience a sense of fulfillment doing their job no matter how demanding or stressful it is. NRNs see their challenges as an opportunity for growth and improvement towards their career advancement considering that they are starting off as novice nurses.

“Demanding. As I have previously stated. I have to work overtime because nurses are lacking and the job requires my time that I am unable to rest in a day.” (P4)

“Stressful when 12 hours duty strikes but happy if not toxic duty of course.” (P8)

“It’s really stressful and tiring” (P9)

“I don’t want to lie, working in a hospital is very toxic and also very challenging which provides learning and growth as everyday work as I practice my profession.” (P10)

“It may be exhausting but I can manage. At this kind of scenario, you need to be steadfast and equipped with a heart of steel so that it may not affect you and your work” (P12).

5. Coping mechanisms in facing the pandemic-induced transitional events during actual clinical nursing practice

5.1 Positive affiliations and frailty in professional maturity

Knowing the self is a step toward achieving the highest form of psychological maturation. Nurses, as they were meant to become resilient in spite of the endless unanticipated turn of events, require self-assessment of what motivates them and encourages them to pursue and hold on to their commitment to the profession. Knowing their own strength and weaknesses allows them to reevaluate how they were able to cope amidst the challenges present.

NRNs expressed their sentiments about the positive affiliations they receive from their friends, families, instructors, and most especially, with themselves. Aside from the support provided by their loved ones. What stands out the most, is the pronounced strength from their own unique capabilities and initiatives, which motivated them to stay inspired and carry on the job they are expected to, no matter how stressful it is to work under a lot of pressure.

“My biggest strength is my great self-confidence” (P2)

“Strength would be my desire to learn and the confidence that I can be a competitive nurse” (P3)

“My biggest strengths would be my eagerness to learn and my communication skills” (P5)

“My strength is I get to have our skills & knowledge widened from the area of work” (P6)

“I have a lot of support from friends. I have a very good clinical instructor on training” (P7)

“Long patience, punctuality, perseverance and wise use of time and nonstop learning” (P8)

“Working under pressure and being with the support of friends or workmates is a strength” (P9)

On the other hand, their weakness lies mainly in their frailty in professional maturity. This pertains to the participant’s outspoken concerns about the stressors present in their working environment, lacking knowledge of theoretical concepts, skills, experience, and anxiety about their vulnerability to acquiring the COVID-19 virus and transmitting it to other people.

“It’s pure weakness. You will feel helpless once you face critically ill patients, the insufficiency of knowledge and experience will get you” (P1)

“My weakness will have to be the time- having no time for myself is really depressing that sometimes I wanna

quit” (P4)

“My weaknesses are spending too much time on paperwork and lack of clinical experience since I’m a new nurse” (P5)

“My weakness is that we are new from that field of work experience” (P6)

“I am not confident with my pharma computation” (P7)

5.2 Positive affirmations with valued self-worth

Encountering real-life patients is very different from simulation and online classes. NRNs at that time were a beginner in different departments of the health care institution. With the baggage the pandemic brought, newly registered nurses developed coping strategies to enhance self-worth in trying times. As participants responded with their created mechanisms in adjusting to the new normal. Positive affirmations were observed. The majority clinged to support groups by expressing feelings of mental exhaustion, seeking advice and talking to other people, seeking help, and asking questions to senior nurses

“I make time to see and spend some time with my family, my pets, and Charlie, my partner. I seek professional help.” (P10)

“bonding with sa fam ko most especially anak ko which is why I am here working and striving my best to learn and be the best nurse I can be.” (P11)

“Spending more quality time with family and friends.” (P14)

Physicality also plays an important role in maintaining the value of oneself. NRNs did this by taking time off and resting during the day and getting enough sleep to recover from the extensive demands of working in a healthcare setting.

“Eat my fave foods and cry.” (P2)

“Walking during my day-offs and sleeping. Let me reiterate the word SLEEPING. Getting a quality sleep is like gold.” (P4)

“Exercise. Going out.”(P7)

“Giving myself a much needed break by getting enough sleep and doing what I love.”(P14)

Finally participants also gave importance to their psyche by practicing acceptance of the current situation, self-assurance and doing recreational activities. NRNs shared answers to the question “what are your coping strategies?”

“Self-reassurance, yoga and prayers.”(P8) “Just be always positive.” (P9)

“I meditate before and after work. I go to places with more greeneries to increase positive feelings” (P10)

“Talking about my feelings...” (P13)

“Praying fervently, surrendering my worries to God” (P14)

IV. DISCUSSION

The study revealed several themes, generally Transpired feelings of uncertainty and professional inadequacy, was felt by NRNs during this transitioning event. The disruption of nursing education during the pandemic had led to the provision of alternative teaching and learning strategies switching to online learning [41]. Nursing being a professional course, requires Related Learning Experiences to enhance their skills and competence in delivering care services to patients. Participants from the study expressed their feelings of uncertainty and professional inadequacy for they lacked the experience working in the clinical setting during their undertaking. Most of them were overwhelmed by the new challenges present in the work setting. Particularly, the application of book-based knowledge to reality-based clinical experience without focused supervision contributed to manifesting transition shock. Although resilience helps nurses to cope, evidence are still lacking correlating resiliency with transition shock [31]. The uncertainty they expressed could also be pertained to their hesitancy to work, fearing the fact that they are more susceptible to acquire the virus with high-risk of exposure. The study’s findings are supported by one research stating that healthcare workers suffer the fear of acquiring, transmitting, and possibly death from the infection [27].

Meanwhile, the theme Constraints and limitations in the clinical preparations during baccalaureate undertaking generated the sub-theme shortcomings on nursing KSA’s during pandemic. With the new COVID-19 virus being introduced globally, infecting millions of people around the world, have urged authorities to make certain and explicit modifications with regards to protocols mandated to the public. The study participants mentioned that the pandemic highlighted how the mode of teaching assessment and clinical placement of nursing students during undertaking is still scarce. Considering the lack of information about the virus, it was still under the scope of many professionals. Lockdown was initiated and panic among the public caused a sudden alert of emergency among medical professionals and health institutions. The findings from a study conducted concluded that the clinical experience of nursing students has been influenced strongly by the COVID-19 pandemic. Suggesting that modified practice guidelines should be communicated effectively to expound on the matter of nursing roles and practice of the nursing profession during the COVID-19 crisis [14]. Moreover, Theoretical concepts like medical-surgical nursing, pharmacology, critical care nursing, disaster management and skills like IVT training, assisting with ET tube insertion, femoral catheter and other basic nursing skills were the educational contents which were weakly taught and that should be given attention. Nursing concepts like pharmacology, similar to what NRNs have mentioned, have been poorly focused during their undertaking, affecting their competencies as nursing

professionals [19]. Participants also pointed out that although a few have not been thoroughly expounded. Still, most theoretical concepts taught during their undertaking were instilled in them as they worked as nurses. However, reality-based, and practical ways to perform in catering to deliver care services to patients have only been thoroughly learned upon their deployment in the clinical setting. Added in this regard, critical thinking skills, the ability to become resourceful, and the flexibility to work efficiently in a fast-paced environment were some of the skills and attributes which needs to be enhanced and facilitated prior to transpiring in the profession.

Another major theme emerged is Pandemic-challenged clinical nursing practice where in several sub-themes emanated to describe the experiences of new registered nurses entering the workforce. The first sub-theme versatility and flexibility to work under pressure, mostly pertained to how NRNs dealt with the pressure upon their employment during the peak crisis of the covid-19 surges. Nurses are constantly exposed to conditions which could possibly threaten their health, well-being, and ability to perform their job as nurses. Having to deal with a lot of nursing roles and responsibilities due to the wide scope of the practice, it is important to become resilient, and be instilled with adequate knowledge, and skills, to become competent. These qualities which are essential in carrying the burden of various stressors linked with the job. As work intensity increases while accompanied by fear, both work synchronously to urge nurses to become more dominating and manifest qualities of versatility and flexibility to meet tough job demands [17]. NRNs have shown qualities in a way wherein, despite the current situation inflicted by the pandemic, NRNs turn this negative situation to a positive opportunity that while working, they get to learn more of what is present in the clinical setting. Becoming versatile has become one of their qualities to adapt to changes and endless workloads brought upon them. Their willingness to learn, how they strive and adjust to the new work setting has set them to become accustomed to their job which enables them to hone their skills and shape themselves to be better in their job[53]. The second sub-theme, Unanticipated stressors entering the workforce refers to the stressors experienced by NRNs in the clinical setting. The covid- 19 pandemic exacerbated the challenges that new nurses confront as they experienced working in the current work setting. As NRNs transpire in practicing the nursing profession, stress and attrition become the initial reaction [12]. Particularly, ever since the COVID-19 pandemic started, working during the surge of covid cases tormented the New registered Nurses with the number of patients admitted daily. Nurses with workload-related stress caring for infected patients and stress from receiving admitting more patients contributed to having an increased stress level brought about by the COVID-19 pandemic [2]. Added to this effect, results in understaffing of nurses on duty. Apparently, the sequencing of events when it

comes to the unanticipated stressors in the workforce eventually leads to increased nurse-to-patient ratio, heavy workloads, and tight-fitting schedules. Nurses have been exposed to situations that risk their health, safety, and capacity to work amidst severe causing illness. Physical and mental strains [5]. NRNs working amidst the pandemic, it is given that fear, doubts, and anxiety would take effect on how they work in the setting. The thought of acquiring the disease and spreading the virus is one among the named stressors present. And even though complete PPE were used, some were still not secured that they are well protected. The invisibility of the virus heightens the anxiety of nurses while working. Especially, when delivering direct patient care to covid patients. The susceptibility of nurses while confronted with high-risk conditions, such as the covid-19 virus makes them well aware of how their families can be exposed if ever they acquire the virus [25]. The thought of returning home, hopefully to spend time with their families have now become a source of stress as they enter the workforce. Finding shows that new registered nurses had been impacted in a way that their quality and productivity in their clinical practice during the covid 19 health crisis have been affected.

The third sub-theme New normal working conditions, refers to what have changed in the clinical setting ever since the covid-19 pandemic started. NRNs have face forthcoming challenges in terms of the protocols and guidelines which have been modified to facilitate safe provision of nursing care to patients. Considering that hospital institutions have different practices, NRNs mentioned being designated to different departments pertaining to their demographic characteristics. The surge of COVID-19 cases necessitated considerable changes in clinical and operational procedures. Developing a new normal in terms of medical assistance and healthcare provisions needs an ongoing surveillance to efficiently manage patients, developing mitigation strategies to ramp up in the event of another surge, and possibly returning to life as normal [35]. In response to this dilemma, various hospitals have become rigorous with the implemented restrictions. It is absolutely essential to progressively return hospital operations and activities to normal, particularly now that the outbreak is still ongoing but safely being contained [34]. Nevertheless, the standard precautions would still have to be followed by medical professionals, sticking to the new normal working conditions.

The last sub-theme under the pandemic-challenged clinical nursing practice. NRNs expressed their sentiments of Achieved sense of fulfillment despite physical and mental exhaustion. During the peak of the pandemic, nurses experienced heightened levels of anxiety, emotional exhaustion, and fatigue pertaining to the unanticipated stressors, NRNs worked twice as hard in the new normal working conditions [33]. The demands of the job they have been preparing for unexpectedly became dreadful on their part as new registered nurses working during the pandemic. The findings supported by research study wherein nurses

were able to describe the great weariness, physical discomfort from long shifts wearing PPE, risk of infection, and mental distress [5]. Similar to NRNs, the majority of the participants described their day-to-day work to be exhausting, tiring, and stressful. Yet, despite the debilitating stress and fatigue transpiring, at the end of the day, they get to achieve a sense of fulfillment in being able to portray and act in accordance with the oath of the nursing profession.

The fourth major theme Coping mechanisms in facing the pandemic-induced transitional events during actual clinical nursing practice emerged ensued two sub-themes. The first one was Positive affiliations and professional maturity. This theme refers to the strength and weaknesses of NRNs of having to work amidst the challenges during the pandemic. The positive affiliations may pertain to the support provided by their friends, families, mentors, or clinical instructors. Along with this, NRNs mentioned how they give themselves the reassurance, provided that they have their confidence and resilience to fight their personal and professional adversities as New registered nurses. The nurses stated that their surroundings provided them with multi-dimensional support, enabling them to cope with the challenges present under the new circumstances [51]. On the other hand, their weaknesses mostly pertained to their doubts as they practice the professional practice of nursing. Considering the shortcomings in nursing KSA's, a theme generated from the constraints during their undertaking. NRNs felt helpless going through this crisis. The physical and mental strains mentioned from the previous theme has become their weakness, a one factor to consider of what prevents NRNs to cope, adjust and adapt efficiently in times of unanticipated crisis. Nurses struggled a lot in their current deposition. Adapting to the variety of new aspects while learning through the process of experience will cultivate them to become more versatile in the work setting [15].

Lastly, the two sub-themes from coping mechanisms in facing the pandemic-induced transitional events during actual clinical nursing practice revealed the theme of Positive affirmations with valued self-worth. This may refer to the specific coping strategies they opt to do when challenges surface as they work in the clinical area. The majority prefer to spend their time with friends, families, and loved ones pertaining to it as positive affiliations. On the other hand, acceptance of the current situation, self-reassurance and recreational activities, vociferate feelings of mental exhaustion, taking time off and resting during the day off while getting enough sleep. Most of the participants cope with maintaining their mind and body healthy, doing time management and critical thinking and getting help from support groups. Based on the data gathered, nurses reflect their adaptability in times of crisis but this doesn't lead to an unchallenging experience for them. Nurses are placed in an unprecedented situation wherein reports from scientific studies show work under pressure, lack of resources and administration optimization, the fear of death, overloading of

tasks that comprises the physical and mental health of nurses are all encountered [22]. The researcher's current knowledge of the situation, developed a sense of admiration to the striking will of newly registered nurses to attune in the new policies and practices implemented during pandemic. In the same study of Franco and Levi, they concluded that the effects to the mental health of the nurses can be severe as they not only experience stressors limited at professional level but also from societal pressure. Advantageously, both from the research of 'Feelings, Stress, and Adaptation Strategies of Nurses against COVID-19 in Guayaquil' and the researchers' study, with familial and close relationship ties, they showcased support that allowed NRNs to cope. The sense of admiration is paired now with optimism as people who are closest to the health care professionals expressed recognition and concern for the nurses' holistic commitment to serve.

Implications of the Study

The wide scope of nursing roles and responsibilities especially, in times of unanticipated crisis could become dreadful. Rather than NRNs focusing on their professional growth and development through proper training, they learn most through their experience in clinical practice. Nurses are nurtured best when they have a strong foundation of nursing education, the qualities and competencies appraised during undertaking will be the source of their success in the profession. The study's findings may support the conclusion of how NRNs felt like their competence and confidence were compromised due to the disruption of their education shortly after lockdown was imposed and classes were suspended. What more for those who were only exposed in an online virtual duty, where theoretical knowledge and poorly supervised skills demonstrations were instilled. The study's findings oversee the struggle of NRNs to immediately adapt and adjust to the current demands of the public and more so by the healthcare system. The COVID-19 pandemic did not make the transition easier for NRNs. Instead, the added restrictions and modification of hospital guidelines and protocols contributed to the toxic working environment dealt with by NRNs. Increased nurse-to-patient ratio, understaffing, and heavy workloads in a tight-fitting schedule added the burden of uncertainty while doubting their professional competence and confidence during this process of transition.

The idea that NRNs dwells on their doubts as nurses, may hinder belief in their own professional capabilities, adequacy of nursing knowledge and skills, and adaptability to work under difficult circumstances. A general wonderment of which could affect the quality of care delivered to patient

Thomas, was an apostle of Jesus who refused to believe his resurrection. He came up as Jesus invited him to touch and feel his presence to experience. Regaining his faith, Thomas was enlightened with overwhelming feelings that shunned his disbelief.

Much as like Thomas, NRNs were overwhelmed as they transpired in the profession. Being caught off guard with the surge of covid-19 cases, their feelings of uncertainty were exacerbated under the new normal working conditions. The disbelief brought them to question and doubt themselves. Making it harder for them to strengthen their faith amidst the pandemic.

The Doubting Thomas is a skeptic individual. To see from his own eyes, to feel using his own touch, and to believe as he experienced. Only then he would truly be enlightened. NRNs are skeptic, their sentiments are a cry for help for what they have experienced amidst the pandemic. This is a moral to regain the faith that has been doubted and believe that what we have to be prepared for in the future, is now transpiring in our present.

V. CONCLUSION

Conclusively, the study's findings would suggest that the professional growth and development of nurses would be based on how they would overcome the challenges during the transition process. Despite the mentioned shortcomings and pandemic-induced challenges, determination and motivation arises from having to work amidst the pandemic. Eventually, NRNs would still strive to adapt and adjust to the new identified stressors to improve their competence and confidence working as new registered nurses during the pandemic.

From the results of the study, it is suggested that nursing theory-based interventions must be developed and facilitated to enhance the overall well-being of the NRNs as they embark in their professional practice of nursing amidst the pandemic. Second, hard and soft skills reinforcement programs must be fostered to nurture and aid the NRNs to practice professional nursing with more competence. Lastly, University affiliated hospitals must coordinate effectively to formulate plans of action to facilitate nursing students in cultivating first-hand and reality-based experiences.

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