

It's All About Empowerment and Confidence: Experience of Newly Registered Nurses in an Intensive Clinical Training Course

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abstract

Background: This study investigated how intensive clinical nursing training influences the confidence of newly registered nurses in speaking up about their opinions and concerns within their current work settings. **Method:** A qualitative approach with thematic analysis was used. In-depth interviews were conducted with 64 newly graduated RNs to explore their experience in attending an undergraduate intensive clinical training course. **Results:** Four main themes emerged from the texts: (a) facing the workplace reality with confidence, (b) being equipped with knowledge and skills, (c) merging with the health care team, and (d) being empowered with high self-esteem. **Conclusion:** The newly graduated nurses believed that the intensive clinical nursing training course enhanced their confidence, improved their communication skills, and empowered them to speak up for their rights and those of their patients. [*J Contin Educ Nurs.* 2025;56(1):14-19.]

The transition of nursing graduates into their new positions as RNs is influenced by their clinical nursing training during the bachelor of science in nursing (BSN) program, which is a crucial component of the nursing curriculum (Morrell-Scott, 2019). Students placed in clinical settings require academic and emotional assistance and appropriate contact with their clinical preceptors; this is critical as the clinical environment and preceptorship program impact and shape views about a practice setting (Immonen et al., 2019).

The intensive clinical training course during the BSN program, also called prelicensure or preregistration training, is extensive training designed to provide nursing stu-

dents with the cognitive, psychomotor, and affective skills needed to provide nursing care (Coetzee, 2013; Donough, 2014). One of the most essential skills that nursing students must learn is being confident and advocating for patients' rights. In accordance with a concept analysis of speaking up among undergraduate nursing students, speaking up is an act performed by nursing students to question clinical practices or decisions and to alert others to information that may affect patients' rights (Fagan et al., 2016). Speaking up is also referred to as showing assertive communication skills, which are essential for establishing safe and effective teamwork (Mansour et al., 2020). Speaking up is considered a mandatory act for establishing safe communication in the nursing work environment (Mansour & Mattukoyya, 2019), which can promote the structural empowerment of newly graduated nurses (Darawad et al., 2020; Mansour et al., 2020).

Several public and private nursing schools in Jordan have established undergraduate and graduate nursing education

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programs, with most of the courses delivered face-to-face and few courses offered online (AlOsta et al., 2023). The nursing curriculum in Jordanian nursing schools incorporates the nurses' roles and teamwork in all theoretical and clinical courses. Students also attend a course titled "Trends and Ethical Issues in Nursing," which is designed to assist them in the transition to becoming RNs. The course orients students to their professional responsibilities, emphasizing legal and ethical aspects in relation to the nursing profession and their obligations toward their patients.

Each nursing school collaborates with a nearby hospital to provide on-site training, which is necessary to meet the intended clinical learning outcomes, including their intensive clinical training course. This training is carried out during the final semester of study, consisting of 40 to 50 shifts of 8-hour duration designed to provide nursing students with the knowledge and abilities required to fulfill their future nursing jobs. Students are allocated to different clinical settings in selected hospitals in Jordan. Also, the students are instructed to practice on both day and night shifts. Nurse preceptors from the clinical settings and clinical instructors from the school of nursing oversee this training to ensure that these students meet the required competencies.

Newly graduated nurses are in an excellent position to reflect on their intensive clinical training and its impact on their ability to speak up in different situations. However, in their study of participants from Saudi Arabia and the United Kingdom, Mansour et al. (2020) concluded that the nursing training did not address the major skills required to speak up in situations needed to defend their rights and patient rights. Until now, no studies in Jordan have investigated the experience of intensive clinical training courses among Jordanian nurses. This effect is still understudied in the literature (Mansour & Mattukoyya, 2019). Therefore, the goal of the current study is to investigate how intensive clinical nursing training influences the confidence of new graduate RNs in speaking up about their opinions and concerns within their current work settings.

METHOD

Design

This study is part of a larger research project examining newly graduated nurses' ability to speak up in nursing practice. This study uses a qualitative approach with thematic analysis. Thematic analysis provides a flexible way for gaining credible insight into the data while allowing the researchers to access the details of the data with all their complexity and richness (Byrne, 2022).

Settings and Sampling

Participants were selected from four large hospitals in Jordan with a purposive sampling technique. Participants

were included in the study if they: (a) were newly graduated nurses working for less than 18 months, regardless of graduation date; (b) were graduates of various universities representing the public and private education sectors; and (c) had taken the intensive clinical training course in the final semester of a 4-year BSN program.

Data Collection

After ethical approval was obtained from the scientific research committee at the study institution, two authors (M.W.D. and M.M.), who were trained interviewers, conducted one-to-one interviews with the eligible participants after informed consent was obtained. Each interview took place according to the participant's preferences, mainly in a private office in the hospital. In the interview, the participants were asked about the effect of intensive clinical nursing training on providing nurses with the necessary skills to speak up in work settings, with the following question: "How does the intensive clinical nursing training contribute to your confidence to speak up in your current work setting?" Successive questions were used to further explore meanings in the conversation.

Data Analysis and Research Rigor

To analyze the emerging data, the six phases of thematic analysis were used (Braun & Clarke, 2006). First, the emerging data were transcribed verbatim in Arabic by two authors (E.H.O. and A.H.A.), who read and reread the transcripts to familiarize themselves with the data. Second, two authors (M.W.D. and M.S.A.) generated the initial codes. Third, the codes were reviewed and clustered to construct meaningful themes. Fourth, the constructed potential themes were checked with the coded data. Fifth, all authors met to compare, contrast, and negotiate the potential themes, and the final themes were defined. Sixth, the final report was written.

To establish rigor, the research team adopted a collaborative and reflective approach to thematic analysis rather than focusing on reaching a mutual agreement on the coding scheme (Braun & Clarke, 2019). Further, the research team provided a thick description of the research context, thus ensuring the transferability of the data (Nyirenda et al., 2020). Credibility was ensured by the purposive selection of participants with the maximum variations in gender, age, work experience, and work setting. In addition, the coding was the net result of intense discussion and pursuit of core commonality among the final themes and subthemes, increasing the confirmability of the data. Finally, the final defined themes were checked with the participating nurses to validate the results before the final report was written.

TABLE 1
PARTICIPANT DEMOGRAPHICS (N = 64)

Variable	N (%)
Gender	
Male	21 (32.8)
Female	43 (67.2)
Age, y	
< 25	41 (64.1)
25-30	17 (26.6)
> 30	6 (9.3)
Experience, mo	
< 6	13 (20.3)
6-12	15 (23.4)
> 12	36 (56.3)
Work setting	
Emergency department	10 (15.6)
Intensive care unit	24 (37.6)
Ward	15 (23.4)
Other	15 (23.4)
Hospital	
Private	37 (57.8)
Public	27 (42.2)

Ethical Considerations

Before the interviews were conducted, institutional review board approval was obtained from The University of Jordan. Nurses were informed about the goal of the study and their right to withdraw at any time, and they provided informed consent after they agreed to participate. They also were assured that no names or identifying information would be used in the study.

RESULTS

A total of 64 participants provided meaningful responses to the qualitative questions. As shown in **Table 1**, most of the participants were women (67.2%, $n = 43$), were younger than 25 years (64.1%, $n = 41$), had more than 12 months of experience (56.3%, $n = 36$), worked on intensive care units (37.6%, $n = 24$), and were recruited from private hospitals (57.8%, $n = 37$).

Analysis of participants' responses showed their belief that the intensive clinical training course increased their exposure to the workplace reality and their familiarity with the work environment after graduation. It also equipped them with the knowledge and skills needed to perform successfully as RNs and work with the health care team; as

TABLE 2
THEMES AND EXAMPLE STATEMENTS

Theme	Example statement
Facing the reality of work with confidence	The intensive clinical nursing training puts us in real situations with patients and families and the health team. We now know the real situation at work.
Being equipped with knowledge and skills	The training increased my knowledge and improved my skills in doing and analyzing electrocardiograms.
Merging with the health care team	I was assigned to the schedule as one of the staff nurses, so I learned to be part of the team.
Being empowered with high self-esteem	The training program gave us self-confidence, a sense of responsibility, and faith in ourselves.

a result, they felt empowered and confident in their speaking up skills in the workplace. Four main themes emerged from the analysis of responses, as described in **Table 2**.

Facing Workplace Reality With Confidence

Most participants reported that the intensive clinical training course exposed them to different workplace reality as RNs in hospital settings. Working with patients, families, and other health care professionals improved their ability to deal with events and issues they may experience in the future. One participant stated, "The intensive clinical nursing training places us in real-world situations with patients, families, and health care team members. We now understand the true situations at work."

The participants were grateful and comfortable in the role of RN if they were placed in the same unit where they completed their intensive clinical nursing training as students. This placement made them comfortable and gave them a sense of security. In addition, the presence of supervision during training made them feel safe and protected. As a result, exposure to workplace realities motivated them to deal with potential conflict at work and equipped them with skills to manage it with the help of their course supervisors. One participant stated:

We now understand the real work environment and its roles, which reduces the reality shock that we may experience . . . we felt that we were allowed to make mistakes during our training; however, instructors alert us so that we must be more cautious and learn from our mistakes.

Being Equipped With Knowledge and Skills

Participants acknowledged that the intensive clinical nursing training upgraded and enhanced their nursing care knowledge and skills, which made them more confident

nurses. They learned how to care for patients with various medical conditions and circumstances. The training improved participants' performance and prepared them to carry out nursing interventions and procedures necessary for RNs, such as cardiopulmonary resuscitation and electrocardiogram readings. A participant stated, "The training increased my knowledge and skills in performing and analyzing electrocardiograms." Another participant said, "I can now deal with high-alert drugs, and my performance has improved." The participants indicated that they acquired new competencies in providing quality nursing care for the patients and their families. They used these competencies to practice as RNs successfully and safely. One participant noted, "The training course improved my skills. I feel competent in doing the required job as a nurse."

Merging With the Health Care Team

Participants appreciated the training alongside the nursing staff in the hospitals. This gave them a sense of being part of the health care team, and they believed that they provided a real service to the patients. Being assigned to the nursing schedule increased their awareness and understanding of hospital policies and rules as they were integrated into the team. One participant stated:

Although I was still a student, I was assigned to the schedule as one of the staff nurses, so I learned to be part of the team; this made me aware of hospital rules and policies as well as how to defend my rights and my patients' rights as well.

Other participants attribute the advantages of merging with hospital staff to an improved ability to manage specific situations, such as dealing with angry patients. They also learned how to provide documentation and write reports efficiently. One of the participants stated:

During training, all participants interacted with hospital staff. I learned to deal with stressed and angry patients, which is hard to achieve without being a part of the health care team. . . . We also shared with writing incident reports and all sorts of documentation.

Being Empowered With High Self-Esteem

The participants were empowered by the training course. Their self-esteem increased, and they were confident in performing their roles as newly employed RNs. The experience they gained through the training course increased their confidence in working independently and understanding their position in the hospital; for example, they could speak up for their rights as RNs. One participant noted, "The training course did not only prepare us to be accountable and accepting our responsibilities, but also encouraged us to believe in ourselves." Another participant said, "It assisted us to improve our abilities in speaking up for our rights as staff nurses."

The participants believed that the course improved their communication with patients, families, and health care team members without being hesitant or reluctant. They expressed great confidence in speaking up and being heard as patient advocates. One participant noted, "The training empowered us to speak up and confront the health care team and improved our ability to detect unsafe practices using evidence and clues." However, the participants highlighted that before graduating, nurses must master basic skills of speaking up and that the remaining relevant skills can be obtained afterward during employment. According to one participant, "The nurse gains skills before graduation, but the scope of work is broader, and the RN will encounter situations that allow her or him to gain additional skills." Another participant stated, "Following graduation, clinical training improves the ability to speak up in unsafe situations."

DISCUSSION

This study investigated how intensive clinical nursing training influences the confidence of newly graduated RNs in speaking up about their opinions and concerns within their current work setting in Jordan. The critical transition period for RNs should be supported by both nursing schools and employment sites. The key aspect is not necessarily whether "speaking up and empowerment" training occurs at the end of their educational program or the start of their employment, but it is important to ensure that robust support is available during this transition. We found that intensive clinical training at the end of the BSN program exposed the nursing students to these concepts and built a strong base for these skills during their employment.

In this study, we found that most nurses concurred that enrolling in the intensive clinical nursing education and training program exposed them to the actual hospital setting and equipped them to handle a variety of settings and clinical encounters. Nursing students struggle to satisfy the physical and intellectual demands of nursing throughout the stressful and overwhelming transition to the nursing profession, and they viewed the training as enhancing their skills and improving their performance (Ewertsson et al., 2017). The nurses in this study believed that preceptor supervision gave them a sense of comfort and shielded them from making mistakes, a finding that was supported by the early studies of Coetzee (2013), who concluded that being supervised by nurse educators or preceptors reduces nursing students' fear of making mistakes in the clinical learning setting.

In the same context, the supportive role of preceptors may include counseling trainees on how to deal with their fears during their initial clinical placement in the hospital

(Donough, 2014), thereby improving their experience. Conversely, preceptors should be fully trained to support their preceptees. As indicated by our participants, the intensive clinical nursing education and training program substantially enhanced their performance and understanding. This information might impact their practice and their capacity to speak up. According to Fagan et al. (2016), if students are aware of appropriate and inappropriate behaviors, they may recognize them and take appropriate action. Newly graduated nurses clarified that preceptors impart their knowledge and experience to them during training. The nursing educators and administrators who choose and train the preceptors should ensure that preceptors possess the knowledge and skills to instruct and supervise new trainees. In the same assertion, preceptors must keep up with new developments in health-related demands and technologies to preserve their knowledge and competence (Coetzee, 2013). To ensure their knowledge and competence, we recommend that they participate in a professional development program that follows newly hired nurses.

Our study shows the necessity for Jordanian nursing schools to create or adopt a preceptorship paradigm that supports undergraduate student practice. According to Rush et al. (2019), preceptorship supports intensive clinical nursing education, as the transition experience of newly graduated nurses benefits more from high-quality preceptor support. However, a supportive preceptorship environment is required, as newly graduated nurses recognize a welcoming workplace where preceptors are eager to assist and train them (Doyle et al., 2017). New nurses rely on nurses with more seniority to help them through their transition. Newly graduated nurses begin by imitating senior nurses, asking for advice, and then asking for their approval of clinical judgments in specific clinical scenarios.

Intensive clinical education can empower undergraduate nursing students and boost their self-esteem to become safe RNs. Clinical experience exposes nursing students to various interactions and enhances their communication abilities. In reality, nurses' career advancement and job satisfaction are related to their professional self-concept (Karanikola et al., 2018), which supports our finding that nurses' confidence levels affected their capacity to speak out for and protect their patients. This finding is consistent with the report of Mansour et al. (2020) that showed that assertive communication abilities and nurses' self-confidence are strongly correlated. Many elements, such as obtaining instruction in speaking up, preparation, motivation, and a sense of duty toward their patients, may impact the confidence of newly graduated nurses (Fagan et al., 2016).

Clinical training improves the capacity of nurses to speak up in unsafe circumstances. According to Hawes (2016), proactive preceptors are in charge of encouraging preceptees to speak up. This can be done by fostering an environment emphasizing safe patient care and allowing preceptees to ask questions and voice concerns without fear of retaliation. This finding supports our recommendation that undergraduate nursing curricula be revised to include fundamental concepts and provide a foundation for subsequent skill acquisition in clinical settings, which can be further supported during employment as newly graduated nurses.

Limitations

Recruiting a relatively large sample from all health care sectors of the Jordanian health care system for such a qualitative study may indicate data saturation as well as the credibility and trustworthiness of the data, especially with the emergence of four themes. However, using open-ended questions may have reduced the depth of the collected data because of participant fatigue from filling out the quantitative portion previously. Further, because the study considered participants' recollections of previous experiences, there is still a possibility of recall bias. Finally, we could not "probe" their responses into richer, more complex, and relevant data.

Implications for Practice

The current findings might inspire nursing schools as well as nurse educators in clinical settings. Nursing schools may incorporate the concept of speaking up more meticulously in intensive clinical training through seminars, role-plays, and videos. Hospital nurse educators who are responsible for the transition to practice should focus on several key areas to prepare newly graduated nurses to improve their ability to speak up. For instance, they may customize training programs to address the individual needs of new nurses, considering their previous experiences and specific areas where they need more support, as well as incorporating simulation exercises that allow new nurses to practice speaking up in simulated case scenarios before applying them in real clinical settings. Nurse educators may also implement regular and constructive feedback sessions that focus on strengths and areas for improvement to help new nurses build confidence and competence to advocate for their patients. Another strategy is encouraging self-assessment and reflective practices that allow new nurses to evaluate their own progress and identify areas where they need additional support. Future research needs to identify the most effective strategies for empowering new nurses, which might include studying different mentoring models or empowerment interventions.

CONCLUSION

The study investigated the experiences of newly graduated RNs in Jordan who underwent an intensive clinical training course. Most participants noted that the training increased their confidence in their nursing role by offering experiences that enhanced their communication skills and their ability to speak out against unsafe practices. The nurses suggested that exposure to various clinical settings could further improve their ability to identify patient care needs in unfamiliar environments. Finally, although the skills for speaking up are introduced during the training, it should be noted that these skills need ongoing reinforcement in clinical practice.

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