Graduate nurse experiences
during the SJGHC Graduate Nurse Year

Dr Arlene Walker and Mr Shannon Hyder
School of Psychology | Deakin University
Acknowledgements

On behalf of the research team, I sincerely thank St John of God Health Care for the opportunity to conduct this project. The project was made possible, and its conduct greatly enhanced, by the cooperation of many. Special thanks and appreciation to the Group Director of Nursing, the Learning and Development Coordinators and the graduate nurses who willingly gave their time to complete a series of surveys. The information gleaned has significantly informed us about the transition of graduate nurses into the workplace, and has also provided valuable insight into the Graduate Nurse Program at St John of God Health Care.

Finally, thank you to the often-mentioned senior, role-model nurses at St John of God Health Care who coach and mentor new graduates, enabling a successful transition from student to registered practitioner. They are in good hands!

Dr Arlene Walker
Chief Investigator
School of Psychology
Deakin University
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Project overview

This project investigated the experiences of graduate nurses (GNs) during their first year of clinical practice at St John of God Health Care (SJGHC) sites across Australia. Qualitative and quantitative methods were used across four research phases to explore GNs’ perceptions of: the factors impacting their health and wellbeing; reciprocal expectations about the employment relationship and the extent to which these expectations were met; and support, engagement and intention to remain with SJGHC long term.

Two cohorts of GNs participated in this study. The first was the 2008 cohort of GNs at various SJGHC sites across Australia. The information obtained from this cohort was used as a pilot study (Phase 1), for the purpose of calibrating the measures and the project. The second group of participants comprised the 2009 SJGHC cohort of GNs across Australia, who were surveyed in three phases (phases 2 to 4). Phase 2 occurred at the beginning of 2009 and explored GNs’ initial reciprocal expectations regarding the employment relationship. At the end of 2009, the extent to which GNs’ reciprocal expectations were met, as well as perceptions of support, engagement and intention to remain with the organisation, were measured (Phase 3). Phase 4 comprised a follow-up of the 2009 cohort of GNs in early 2010. Information on current employment status, long-term intentions regarding working with SJGHC, and an overall evaluation of the SJGHC GN program were given.
Literature review

Stressors during the graduate nurse year

The transition from student to registered nurse is fraught with many challenges, such as the need to balance personal and work demands (J. Kelly & Ahern, 2009); the need to adapt to the culture of the profession (B. Kelly, 1996); and the need to become skilled, competent and accountable for patient care (Newton & McKenna, 2007). Delaney (2003) maintains that experiences during the transition period can greatly influence a person’s ability to become a skilled and competent nurse. Similarly, it could be argued that these experiences could impact the confidence, self-esteem and self-efficacy of new nurses: consequently also impacting on overall health and wellbeing. Hence, it is important to identify and effectively manage any stressors and/or negative experiences faced by graduate nurses during the transition period. A better understanding of the stressors faced by GNs and how they can impact on health and wellbeing may also go some way toward improving the retention of GNs.

Lambert and Lambert (2001) reviewed research from 17 countries to identify the common sources of role stress and strain on nurses. The authors found that, globally, much of the role stress and strain on nurses could be accounted for by stressors in the work environment, such as lack of support, interprofessional conflict and staffing levels. A later review of the literature by McVicar (2003) identified six common workplace stressors that influence nurses’ perceptions of job satisfaction and/or stress. These common stressors include workload; the emotional aspects of nursing, such as coping with death and dying; difficult coworker relationships; leadership or management style; lack of reward; and shift work.

The short- and long-term health implications of workplace stressors include sleep disorders, substance abuse, poor eating habits, anxiety, depression and chronic illness (Munro, Rodwell, & Harding, 1998). In addition, the literature suggests that there are several stressors that impact
on the wellbeing of student nurses and GNs in particular. These stressors have been identified as lack of confidence and competence in nursing abilities (Gorostidi, et al., 2007; B. Kelly, 1996; McVicar, 2003; Oermann & Garvin, 2002); a lack of guidance and support (Charnley, 1999; Evans, Boxer, & Sanber, 2008; Hoel, Giga, & Davidson, 2007); unprofessional workplace behaviour (J. Kelly & Ahern, 2009; Pellico, Brewer, & Kovner, 2009; Thomas & Burk, 2009); role overload and role ambiguity (Chang & Hancock, 2003; McKenna & Green, 2004); and dealing with new tasks and increased responsibility (Delaney, 2003).

Research suggests that the identified stressors have physical, psychological and social consequences, not only for GNs but for the profession as a whole. For example, workload has been found to contribute to psychological distress (Healy & McKay, 2000) and emotional exhaustion (Demerouti, Bakker, Nachreiner, & Schaufeli, 2000). Shift work has been found to impact on sleep, as well as on physical and emotional wellbeing and the social and family life of the nurse (Clare & van Loon, 2003; Parikh, Taukari, & Bhattacharya, 2004; West, Ahern, Byrnes, & Kwanten, 2007). There are also negative implications for the organisation in terms of reduced job satisfaction (Chang & Hancock, 2003; Healy & McKay, 2000; Zangaro & Soeken, 2007), intention to leave (Simon, Müller, & Hasselhorn, 2010; Tourangeau, Cummings, Cranley, Ferron, & Harvey, 2010) and disengagement (Demerouti, et al., 2000; Freeney & Tiernan, 2009).

On the positive side, a national Australian study by Clare and van Loon (2003) found that being welcomed into the team by competent, confident nursing role models with positive attitudes resulted in increased confidence for GNs. The GNs in this study also reported that receiving regular, constructive feedback and being able to work effectively in a supportive team allowed them to feel that their contribution was valued, professional and worthwhile. In addition, being encouraged to independently solve problems and make decisions increased graduates’ motivation and left them feeling empowered and respected as colleagues.
The psychological contract, breach and intention to remain

Social exchange relationships have long been of interest to researchers concerned with the role of social support in organisations (Wayne, Shore, & Liden, 1997). Blau’s (1964) social exchange theory is a dominant framework underlying much of the research in this area. The theory is based on the notion that in an exchange relationship, one party does something beneficial for the other party with the expectation that their actions will be reciprocated in some form (Shore & Barksdale, 1998). In order to maintain balance in the exchange relationship, the recipient must fulfil the obligation created by the giver’s actions, and engage in activities which benefit the giver (Shore & Barksdale, 1998). Social exchange relationships provide a lens through which to examine social support in organisations.

GNs were asked to provide information on:

- their experiences while undertaking their graduate program at SJGHC
- their expectations of SJGHC as an employer
- the impact of the GN year on their health and wellbeing
- the extent to which they believed SJGHC was meeting its commitments and obligations to them
- the extent to which they believed they were meeting their commitments and obligations to SJGHC
- whether they intended to remain at SJGHC after their graduate program
- their background.

Breach of the psychological contract can have serious consequences for both the organisation and the individual (Roehling, 1997). Breach occurs when an employee perceives their employer as not having fulfilled its part in the exchange relationship, leading the employee to adjust their
Breach has been linked to various attitudinal and behavioural outcomes, such as decreased job satisfaction, diminished performance and reduced organisational citizenship behaviour (Coyle-Shapiro & Kessler, 2002; Lester, Turnley, Bloodgood, & Bolino, 2002; Tekleab & Taylor, 2003). The majority of research in this area has focused on new recruits in general, not GNs specifically.

Research also indicates that breach is related to an employee’s intention to remain with the organisation, which is directly and negatively related to turnover (Guzzo, Noonan, & Elron, 1994; Robinson & Rousseau, 1994; Turnley & Feldman, 1999). Intention to remain and turnover in the nursing profession have received considerable attention in the literature. The global shortage of nurses is reaching a critical level, as a significant number of nurses continue to leave the profession voluntarily long before the normal retirement age (Tourangeau & Cranley, 2006). As mentioned earlier, research indicates that intention to leave is a major problem in the nursing profession, particularly among GNs (Cowin & Hengstberger-Sims, 2006). According to a study by Armstrong (2004), 20% of GNs in Australia leave the nursing profession after only one year of clinical practice.

The body of research investigating intention to remain in GNs indicates that social support is an important factor in reducing turnover (Bowles & Candela, 2005). Beecroft, Dorey and Wenton (2008) found new nurses were more likely than tenured nurses to leave their job, emphasising the importance of support for new nurses who are enduring the stress of their first year of clinical practice. Positive preceptor experiences and support systems have been linked with intention to remain among GNs (Boyle, Popkess-Vawter, & Taunton, 1996). While there is compelling evidence that turnover intentions are linked to perceptions of psychological contract breach in many employee populations, this relationship is yet to be established for newly qualified nurses.

An understanding of the factors that influence the relationship between various stressors and outcomes such as reduced health and wellbeing
and intention to remain is critical for developing interventions that can potentially minimise such outcomes. Our research aimed to confirm whether previous research findings in relation to psychological contract breach extended to the SJGHC GN population. A longitudinal approach was adopted to investigate breach, in which GNs' early expectations of employer obligations to them were compared to their perceptions regarding the fulfilment of those obligations several months later.

**Overall method**

The timeline for phases 1 to 4 are shown in Table 1, below.

**Table 1. Timeline for four phases of the project**

<table>
<thead>
<tr>
<th>Date</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov 2008</td>
<td>Phase 1</td>
</tr>
<tr>
<td></td>
<td>Data collection (140 questionnaires were disseminated and 90 were returned, yielding a response rate of 64% across all SJGHC sites)</td>
</tr>
<tr>
<td></td>
<td>Phase 1 report completed</td>
</tr>
<tr>
<td>Feb 2009</td>
<td>Phase 2</td>
</tr>
<tr>
<td></td>
<td>Data collection (117 questionnaires were disseminated and 103 were returned, yielding a response rate of 88% across all SJGHC sites)</td>
</tr>
<tr>
<td></td>
<td>Phase 2 report completed</td>
</tr>
<tr>
<td>Oct–Dec 2009</td>
<td>Phase 3</td>
</tr>
<tr>
<td></td>
<td>Data collection (116 questionnaires were disseminated and 79 were returned, yielding a response rate of 68% across all SJGHC sites)</td>
</tr>
<tr>
<td></td>
<td>Phase 3 report completed</td>
</tr>
<tr>
<td>May 2010</td>
<td>Phase 4</td>
</tr>
<tr>
<td></td>
<td>Data collection (97 questionnaires were disseminated and 22 were returned, yielding a response rate of 23% across all SJGHC sites)</td>
</tr>
<tr>
<td></td>
<td>Phase 4 report completed</td>
</tr>
</tbody>
</table>
Phase 1 data collection occurred via an online survey disseminated using email and completed during GN study days. However, internet access at one of the sites was interrupted and resulted in one group completing a paper version of the survey. A significantly higher response rate was received from this site compared with sites that completed the online survey and, as a result, paper surveys were used for the subsequent data collection phases.

The phase 2 and 3 surveys were sent to SJGHC Learning and Development Coordinators at the various SJGHC sites (Ballarat, Bendigo, Bunbury, Geelong, Geraldton, Melbourne, Murdoch and Subiaco). The surveys were disseminated and completed during GN study days. The Learning and Development Coordinators returned the completed surveys directly to the researchers.

The Phase 4 surveys were posted directly to the 2009 cohort of GNs from the office of the SJGHC Group Director of Nursing. Completed surveys were returned directly to the researchers in reply-paid envelopes.
Phase 1

An investigation of the reciprocal obligations between SJGHC and graduate nurses – results from the 2008 cohort

Aim

The primary aim of this pilot project was to investigate the reciprocal obligations between SJGHC and its 2008 cohort of GNs, including the extent to which these obligations had been met. Secondary aims were to investigate the positive and negative experiences of GNs during the graduate year and to make recommendations, if necessary, for improving the GN program. The measures used were also being trialled, providing an opportunity to make improvements for the 2009 study. A combined qualitative/quantitative approach was used.

Participant overview

A total of 90 Division 1 GNs participated in this study, yielding a response rate of 65%. The GNs ranged in age from 20 to 55 years, with an average age of 29 years. As expected, the participant sample was heavily weighted by females (95.5%). GNs from all SJGHC sites were invited to participate, including those from Ballarat (N = 16), Bendigo (N = 10), Bunbury (N = 6), Geelong (N = 8), Geraldton (N = 2), Melbourne (N = 6), Murdoch (N = 48) and Subiaco (N = 43).

Participation by division

Of the 90 participants in this study, almost half were from Subiaco (N = 41): a 95% response rate. Fewer responses were received from the other sites. Responses according to site are presented in Table 2 (opposite).
For 22 participants, the location of work could not be identified. Ethical guidelines made it difficult to analyse the data according to site, as low numbers of responses from some sites meant that participants were potentially identifiable. Nevertheless, the responses from the Subiaco cohort were compared to the responses from all other sites. Chi-Square tests were conducted to determine significant differences between Subiaco and the rest of the cohort of GNs in relation to all items on the survey. These analyses revealed no significant differences in any of the items on the survey. As such, only group data is reported, which appears to be representative of GN perceptions from all the SJGHC sites.

Table 2. Respondents according to site

<table>
<thead>
<tr>
<th>SJGHC site</th>
<th>Number of GNs at site</th>
<th>Number of GN responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballarat</td>
<td>16</td>
<td>8 (50%)</td>
</tr>
<tr>
<td>Bendigo</td>
<td>10</td>
<td>3 (30%)</td>
</tr>
<tr>
<td>Bunbury</td>
<td>6</td>
<td>2 (33%)</td>
</tr>
<tr>
<td>Geelong</td>
<td>8</td>
<td>1 (12.5%)</td>
</tr>
<tr>
<td>Geraldton</td>
<td>2</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Melbourne</td>
<td>6</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Murdoch</td>
<td>48</td>
<td>13 (27%)</td>
</tr>
<tr>
<td>Subiaco</td>
<td>43</td>
<td>41 (95%)</td>
</tr>
<tr>
<td>Unidentified</td>
<td>—</td>
<td>22</td>
</tr>
<tr>
<td>All</td>
<td>139</td>
<td>90 (65%)</td>
</tr>
</tbody>
</table>
Method

An email was sent to all SJGHC GNs, advising of the nature of the project and inviting participation. GNs were encouraged to visit a nominated web site and complete an electronic survey within a specified period of time. A copy of the survey is shown in Appendix A. GNs were asked to provide information on:

- their experiences while undertaking their graduate program at SJGHC
- their expectations of SJGHC as an employer
- the impact of the GN year on their health and wellbeing
- the extent to which they believed SJGHC was meeting its commitments and obligations to them
- the extent to which they believed they were meeting their commitments and obligations to SJGHC
- whether they intended to remain at SJGHC after their graduate program
- their background.

Results

Summary of graduate nurses’ perceptions

Overall, the 2008 cohort of GNs at SJGHC appeared positive about their experiences during their GN year. It seems that for most GNs, SJGHC was meeting their expectations and they considered their graduate year a successful one. It also appeared that for many GNs, working in the nursing profession is rewarding. Despite this, a number of GNs mentioned common factors that make the transition from student to nurse difficult and that can have a detrimental effect on individual health and wellbeing.
Qualitative data

The qualitative data were analysed using NVivo version 2.0. A content analysis was undertaken to identify themes relating to the various qualitative questions. Data were initially coded into 12 broad categories:

- positive integration factors
- negative integration factors
- health and wellbeing impact
- teamwork effect
- effect of patients' comments
- stress coping strategies
- unprofessional behaviour encountered
- role model nurse
- SJGHC exceeding expectations
- SJGHC falling short of expectations
- most satisfying experience
- improvements to program.

The text within each category was then retrieved and read to identify themes within categories. The 12 broad categories and the themes within each category are displayed in Table 3, along with participant comments illustrating each theme. In reporting the findings, participants' direct quotations are in italics.
**Table 3. Qualitative data categories and themes**

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive integration factors (N = 89)*</td>
<td>Staff</td>
<td>The staff support has played a huge part. I work with an amazing bunch of nurses who are very supportive in all aspects.</td>
</tr>
<tr>
<td></td>
<td>Other grads/teamwork</td>
<td>A large number of grads starting on the same ward made it less daunting.</td>
</tr>
<tr>
<td></td>
<td>Training</td>
<td>Orientation. Study days. Staff development at beginning of rotations.</td>
</tr>
<tr>
<td>Negative integration factors (N = 71)</td>
<td>Negative staff attitudes</td>
<td>Some staff members, definitely only a rare few, made it a bit difficult in the beginning because they can be a bit intimidating and set in their ways. BUT overall most were happy to help and welcome the new graduates.</td>
</tr>
<tr>
<td></td>
<td>Busy/stressful wards</td>
<td>Being able to follow through on learning new things can be hard sometimes because all the staff are busy.</td>
</tr>
<tr>
<td></td>
<td>Lack of support</td>
<td>At times a lack of support from management and education leaders especially at times when you feel lost and overwhelmed.</td>
</tr>
<tr>
<td></td>
<td>Adjusting to hours/rosters</td>
<td>Working full time and working shift work.</td>
</tr>
<tr>
<td></td>
<td>Staffing issues</td>
<td>Too high a patient load to nurse.</td>
</tr>
<tr>
<td>Health and wellbeing impact (N = 52)</td>
<td>Injury/sickness</td>
<td>I have found that I have been sick a lot</td>
</tr>
<tr>
<td></td>
<td>Stress</td>
<td>I have been very stressed at times</td>
</tr>
<tr>
<td></td>
<td>Tired</td>
<td>Shift work meaning I had trouble sleeping therefore always tired.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question. (cont’d)
Table 3. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teamwork effect</td>
<td>Communication</td>
<td>I like team nursing… better communication.</td>
</tr>
<tr>
<td></td>
<td>Support</td>
<td>Having someone to refer to and help, made working more efficient and easier.</td>
</tr>
<tr>
<td></td>
<td>Confidence</td>
<td>The team spirit at SJGHC improves the confidence and competence of nurses significantly, everyone is always willing to lend a hand.</td>
</tr>
<tr>
<td>Effect of patients' comments</td>
<td>Making a difference</td>
<td>Makes you feel like you’ve made a difference in someone’s life.</td>
</tr>
<tr>
<td>(N = 78)</td>
<td>Positive comments</td>
<td>Positive feedback increases my confidence.</td>
</tr>
<tr>
<td></td>
<td>Thanks</td>
<td>When a patient says thanks or you make them feel comfortable or even just gives you a smile then I know that I have done my job.</td>
</tr>
<tr>
<td>Stress coping strategies</td>
<td>Active</td>
<td>I try to eat healthy and exercise.</td>
</tr>
<tr>
<td>(N = 79)</td>
<td>Passive</td>
<td>Meditation, consciously let go of the stresses of the day after leaving work.</td>
</tr>
<tr>
<td></td>
<td>Communication</td>
<td>It is great to be able to talk to friends or work colleagues.</td>
</tr>
<tr>
<td>Unprofessional behaviour</td>
<td>Bullying</td>
<td>Senior nurses whom are my team leaders being nasty and uncommunicative and bullies, not only to myself but to other younger nurses. Made me feel that I was not good enough to be a nurse. Totally demoralised and defeated.</td>
</tr>
<tr>
<td>encountered</td>
<td>Gossip</td>
<td>Often heard staff talking about others in a negative fashion, felt I was being talked about.</td>
</tr>
<tr>
<td>(N = 48)</td>
<td>Hostility</td>
<td>Bitchiness between staff members. I stay out of it all. Waste of energy and time.</td>
</tr>
<tr>
<td></td>
<td>Lack of respect</td>
<td>Certain nurses being rude to graduate nurses just because we are graduates.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
### Table 3. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role model nurse (N = 72)</td>
<td>Caring</td>
<td>All the patients feel thoroughly cared for.</td>
</tr>
<tr>
<td></td>
<td>Friendly</td>
<td>She is professional and friendly.</td>
</tr>
<tr>
<td></td>
<td>Helper</td>
<td>They support and encourage GNs, students and also fellow nurses in everything they do. They lend a hand when needed and create a safe work environment.</td>
</tr>
<tr>
<td></td>
<td>Skills</td>
<td>Years of experience, knows the hospital policy, good interpersonal skills.</td>
</tr>
<tr>
<td></td>
<td>Teacher</td>
<td>Have 1:1 chats and updates with me to let me know how I am doing in the workplace. Tips on how to improve my nursing skills.</td>
</tr>
<tr>
<td>SJGHC exceeding expectations (N = 18)</td>
<td>Positive environment</td>
<td>I walk in and everyone says g’day how are you? It is a friendly environment.</td>
</tr>
<tr>
<td></td>
<td>Support</td>
<td>Most days I realise how lucky I am to work here. They are so supportive!</td>
</tr>
<tr>
<td></td>
<td>Work extras</td>
<td>First day I was told that I didn’t have to work weekends and only 3X 10hr days.</td>
</tr>
<tr>
<td>SJGHC falling short of expectations (N = 19)</td>
<td>Lack of support</td>
<td>If patients complain things happen, if staff want change it will never happen.</td>
</tr>
<tr>
<td></td>
<td>Work conditions</td>
<td>Staffing issues – when I raised with my ward manager my bad roster – commenting that I would struggle to complete 10 shifts straight, I was laughed at and told to ‘put my requests in.’</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Table 3. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most satisfying experience (N = 75)</td>
<td>Gain confidence</td>
<td>Becoming confident and having student nurses to pass my knowledge onto.</td>
</tr>
<tr>
<td></td>
<td>Help patients</td>
<td>Helping people at vulnerable times.</td>
</tr>
<tr>
<td></td>
<td>Join SJGHC family</td>
<td>Knowing that I am not alone. Staff of SJGHC really care about us grads.</td>
</tr>
<tr>
<td></td>
<td>Learn skills/improve</td>
<td>Learning and expanding my skills.</td>
</tr>
<tr>
<td></td>
<td>Positive feedback</td>
<td>Just doing my work and then getting positive feedback from other RNs, patients and other staff unexpectedly.</td>
</tr>
<tr>
<td>Improvements to program</td>
<td>More support</td>
<td>More supportive ward SDNs. Greater contact initially rather than being checked on and left alone. Other grads fell behind and not coping down the track.</td>
</tr>
<tr>
<td>(N = 35)</td>
<td>Preceptor issues</td>
<td>More one on one preceptorship time – I know and understand this may be slightly impossible with different working hours.</td>
</tr>
<tr>
<td></td>
<td>Roster issues</td>
<td>Shorter rotations e.g. 4 months to allow for different experiences.</td>
</tr>
<tr>
<td></td>
<td>Study/training issues</td>
<td>More study days/skills workshops.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Summary of qualitative findings

Almost every respondent (89 out of 90) reported positive factors at SJGHC that made their integration into nursing easier. These responses reflected positively on the GN program at SJGHC and indicate that the majority of GNs feel well supported in terms of their integration during their graduate year. Fewer GNs responded to the question regarding negative integration factors. However, 79% did mention some factors that made integration into SJGHC difficult. Fifty-eight percent reported that their health and wellbeing had been affected since beginning work as a GN. The most common impact on health and wellbeing was tiredness and stress. Several respondents reported increased levels of sickness or injuries due to being overworked. Again, almost all respondents reported an appreciation of the teamwork (88 out of 90). These comments indicate an overwhelming appreciation of the teamwork situations that are prevalent at SJGHC.

Comments from patients emerged as an important factor in improving GNs’ confidence. Most respondents (87%) indicated that they valued patient feedback and that positive comments were a powerful motivator for them in their work environment.

The general perception (88%) from GNs was that SJGHC provides support to deal with their workplace stressors. Just over half (53%) of the respondents indicated that they had encountered unprofessional workplace behaviour since becoming a GN. Many of these incidents were of a more common variety (including gossiping and subtle hostility), whereas a smaller number were of a more serious nature (including bullying and a perceived lack of respect from senior staff members).

Seventy-two out of 90 GNs reported working with a nurse whom they would describe as a role model to their peers. These reports of role-model nurses were glowing endorsements of the nurses at SJGHC. Several nurses were explicitly named and clearly meant a lot to the graduates. GNs were asked about instances where SJGHC had either exceeded or fallen short of their expectations as an employer. These questions elicited few responses,
with only 20% recalling incidents in which SJGHC had exceeded their expectations, and 21% recalling incidents in which SJGHC had fallen short of their expectations as an employer. These findings indicate that in the majority of cases SJGHC is meeting the expectations of its GNs.

Comments surrounding GNs’ most satisfying experience in their program were positive but varied. Eighty-three per cent of respondents reported satisfying experiences. An important factor that emerged was the feeling of joining the SJGHC family. Many respondents revealed how important it was that they had made many friends, they felt part of the team and were welcomed into a family-like environment. Only 35 of the 90 respondents had suggestions for improving the SJGHC GN program. This suggests that nearly 60% of GNs are happy with the way the SJGHC GN program is conducted.

Quantitative data

Quantitative data relating to reciprocal obligations and intention to remain with the organisation were analysed using the Statistical Package for the Social Sciences (SPSS) version 14. The results of these analyses are reported descriptively below.

**Graduate nurse perceptions of employer obligations**

Overall, the GNs perceived that SJGHC was meeting its obligations, with a global mean score of 8 being reported for ‘met employer obligations’ regarding issues like communication, support, providing resources, fair performance appraisal, training and fair treatment.

A breakdown of some of the perceived employer obligations is provided next. The following three graphs (figures 1 to 3) display the percentage of GNs who felt that SJGHC was meeting specific obligations to them.
As seen in Figure 1, nearly 30% of the GNs felt as though SJGHC completely met its obligation when it came to helping them to develop their careers. Further, almost 80% rated this obligation as a 7 or higher, indicating that SJGHC was meeting this obligation.
As seen in Figure 2, nearly 30% of the GNs felt as though SJGHC completely met its obligation when it came to allowing time off to meet personal or family needs, and 75% rated this obligation as a 7 or higher.
Figure 3 shows that nearly 50% of the GNs felt as though SJGHC completely met its obligation when it came to informing them about SJGHC mission and values, and almost 80% rated this obligation as a 9 or higher. Further, only 2% of the nurses felt this obligation was not being sufficiently met by SJGHC.
Graduate nurse perceptions of employee obligations

Overall, the GNs felt as though they were meeting their obligations to SJGHC. GNs reported a high global mean score of 8.9 in meeting their obligations to SJGHC, in relation to promoting the mission and values of SJGHC, being loyal to SJGHC, becoming more skilled at their work, working well with others, being open with supervisors, performing non-required tasks, and being flexible with work hours.

A breakdown of some perceived employee obligations is provided next. The two graphs on the following pages (figures 4 and 5) display the GN percentages who felt they were or were not meeting specific obligations to SJGHC.
Figure 4 shows that over 90% of the GNs felt as though they met their obligation to SJGHC when it came to protecting the reputation of SJGHC – providing a rating of at least 8. Further, none of the GNs reported that they were not protecting the reputation of SJGHC.
Similarly, as seen in Figure 5, over 80% of the GNs felt as though they had met their obligation to SJGHC when it came to being loyal to the organisation, with a rating of at least 8.
Graduate nurse perceptions of intention to remain with SJGHC

GNs’ responses regarding their intentions to remain at SJGHC after their graduate year were mixed. The reasons for this were explored in greater detail in the 2009 study. Figures 6 and 7 display GN responses to two items regarding their intention to remain at SJGHC.

As seen in Figure 6, approximately 40% of the GNs had not thought about leaving the GN program since beginning work with SJGHC. However, the remaining responses were spread across all ratings, indicating that a number of GNs had at least considered leaving SJGHC during their GN program.

Figure 6

I have thought about leaving the graduate nurse program since I began to work for SJGHC
Figure 7 shows that 25% of GNs completely agreed that they would be working at SJGHC in three years' time. However, the remaining responses were spread across all ratings, indicating that a number of GNs were unsure about their future employment with SJGHC.

Despite mixed responses regarding intentions to remain with SJGHC, approximately 93% of GNs reported that they would consider returning to SJGHC if they were to leave at the end of their GN program. Further, 94% reported feeling part of the SJGHC family and having a strong sense of belonging to SJGHC.
Summary and conclusions from Phase 1

Overall, the 2008 cohort of GNs were positive about their experiences while undertaking their GN program. The primary factors that contributed to these positive experiences included: supportive managers and peers; teamwork; positive feedback from colleagues and patients; admirable role models; and a caring, family-like organisation. The GNs also reported that occasional negative staff attitudes and/or exposure to unprofessional workplace behaviour impacted their confidence as nurses. In addition, busy wards and large workloads could sometimes leave them feeling unsupported and stressed.

Most of the GNs indicated that SJGHC was meeting its obligations to them and that they, in turn, were meeting their obligations to SJGHC. Approximately 60% of the GNs had considered leaving the SJGHC GN program at some time; however, the reasons for this were unclear. At the same time, over 90% also indicated that if they were to leave the organisation at the end of their GN year, they would consider returning at some future date.
Phase 2

Importance ratings of reciprocal obligations between SJGHC and graduate nurses – results from the 2009 cohort

Aim

The second phase of the research project focused on the importance of reciprocal commitments or obligations between the 2009 cohort of GNs and SJGHC. A combined qualitative/quantitative approach was used.

Participant overview

A total of 103 GNs (93.5% Division 1 and 6.5% Division 2) participated in this phase, yielding an overall response rate of 88%. The GNs ranged in age from 19 to 55 years, with an average age of 27.5 years. As expected, the participant sample was heavily weighted by females (94%). GNs from all SJGHC sites were invited to participate, including those from Ballarat (N = 11), Bendigo (N = 9), Bunbury (N = 5), Geelong (N = 10), Geraldton (N = 2), Melbourne (N = 5), Murdoch (N = 29) and Subiaco (N = 31, Div. 1; N = 17, Div. 2).

Participation by division

Of the 103 participants in this study, almost half were from Subiaco (N = 48), an 83% response rate. High response rates were received from most sites, with all but two exceeding 80%. Responses according to site are presented in Table 4. For three participants, the location of work could not be identified.
Table 4. Respondents according to site

<table>
<thead>
<tr>
<th>SJGHC site</th>
<th>Number of GNs at site</th>
<th>Number of GN responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballarat</td>
<td>11</td>
<td>11 (100%)</td>
</tr>
<tr>
<td>Bendigo</td>
<td>9</td>
<td>9 (100%)</td>
</tr>
<tr>
<td>Bunbury</td>
<td>5</td>
<td>3 (60%)</td>
</tr>
<tr>
<td>Geelong</td>
<td>10</td>
<td>10 (100%)</td>
</tr>
<tr>
<td>Melbourne</td>
<td>5</td>
<td>2 (40%)</td>
</tr>
<tr>
<td>Murdoch</td>
<td>29</td>
<td>25 (86%)</td>
</tr>
<tr>
<td>Subiaco</td>
<td>48</td>
<td>40 (83%)</td>
</tr>
<tr>
<td>Unidentified</td>
<td>—</td>
<td>3</td>
</tr>
<tr>
<td>All</td>
<td>117</td>
<td>103 (88%)</td>
</tr>
</tbody>
</table>

Method

Data were collected in February 2009. Survey packs, including a Plain Language Statement outlining the nature of the study and inviting participation, were sent to the Learning and Development Coordinators (LDCs) at the various SJGHC sites for distribution to the GNs. A copy of the survey is shown in Appendix A. Surveys were completed during GN study days and returned to the researchers by the LDCs. The GNs were asked to provide information on:

- the importance of commitments or obligations SJGHC should make to them during their GN year
- any other commitments or obligations they believed SJGHC should make to them during their graduate year
the importance of commitments or obligations GNs should make to SJGHC during their GN year

• any other commitments or obligations they believed they should make to SJGHC during their graduate year

• their background.

Results

Summary of graduate nurses’ perceptions

Overall, the 2009 cohort of GNs reported that reciprocal obligations between themselves and SJGHC were highly important to them, with mean importance ratings of 9 for SJGHC obligations and 8.8 for GN obligations. Additional commitments that the GNs sought from SJGHC related to supervisor feedback, education opportunities, fairness and consistent support. Further GN obligations related to respect, work performance and professional development.

Qualitative data

Approximately 20% of the participants responded to the two open-ended questions regarding additional reciprocal obligations that could be made by each party. The qualitative responses were analysed using NVivo version 2.0. A content analysis was initially undertaken with data coded into two broad categories: other obligations SJGHC could make to GNs and other obligations that GNs could make to SJGHC. The text within each category was then retrieved and read to identify themes within the categories. The two broad categories and the themes within each category are displayed in Table S, over the page, along with participant comments illustrating each theme.
Table 5. Qualitative data categories and themes

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other obligations SJGHC could make to GNs</td>
<td>Supervisor feedback</td>
<td>Regular opportunities for me to sit down with a SJGHC supervisor and discuss my progress and give me the opportunity to ask any questions/raise any concerns that I have.</td>
</tr>
<tr>
<td>(N = 21)*</td>
<td>Education opportunities</td>
<td>Plenty of opportunities for further education and abilities to support me in post-grad courses further down the track.</td>
</tr>
<tr>
<td></td>
<td>Work allocation</td>
<td>To ensure that tasks are allocated based on skill level, not just on lack of staff and to fill a position.</td>
</tr>
<tr>
<td></td>
<td>Fairness</td>
<td>Extremely important to treat graduates fairly as we seem to get treated unfairly by more senior staff.</td>
</tr>
<tr>
<td></td>
<td>Consistent support</td>
<td>Constant support throughout the whole year.</td>
</tr>
<tr>
<td>Other obligations that GNs could make to</td>
<td>Respect</td>
<td>I should adhere to the mission statement, respect all colleagues and patients and their families.</td>
</tr>
<tr>
<td></td>
<td>Professional development</td>
<td>Continue to develop my professional skills.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Summary of qualitative findings

The two qualitative questions in Phase 2 were largely left unanswered by this group of GNs. Only 21 of 103 responded that there were other obligations (aside from those specifically mentioned in the questionnaire) that SJGHC should make to them. A similar number (20 out of 103) indicated that there were further obligations that they should make to SJGHC. The lack of responses to these two questions indicates that early on in their graduate year the GNs’ beliefs regarding reciprocal obligations between themselves and their employer were sufficiently captured by the obligation measures in the study. A content analysis of the qualitative responses revealed that some GNs wanted more time with their supervisors, more opportunities for further education and more support and fairness from other staff. Further, the GNs felt that they could respect their colleagues and patients more, perform their duties better and further develop as professionals.

Quantitative data

Quantitative data relating to reciprocal obligations were analysed using the Statistical Package for the Social Sciences (SPSS) version 15. The results of these analyses are reported descriptively below.

Graduate nurse perceptions of employer obligations

Overall, the GNs reported high expectations regarding SJGHC’s obligations as an employer. A global mean rating of 9 was obtained in relation to employer obligations such as communication, support, providing resources, fair performance appraisal, training and fair treatment. A couple of items, although still rated highly, were rated lower than the norm. Provide me with support regarding personal issues and inform me about SJGHC mission and values were two such items. Figures 8 and 9 display the ratings in terms of response percentages for these two items respectively.
As seen in Figure 8, over 30% of the GNs rated this obligation as *extremely important*. However, for almost 40% of respondents, ratings were spread between 0 and 7, indicating that not everybody considered this obligation to be highly important.
Similarly, Figure 9 shows that almost 40% of the GNs felt that it was extremely important that the organisation informed them about SJGHC’s mission and values. However, another 40% of the ratings were spread between 0 and 7, again indicating differences among the GNs in relation to the importance of this obligation.
Graduate nurse perceptions of employee obligations

Overall, the GNs rated their reciprocal obligations to SJGHC highly. A global mean rating of 8.8 was obtained in relation to GN obligations such as promoting the mission and values of SJGHC, being loyal to SJGHC, becoming more skilled at their work, working well with others, being open with supervisors and being flexible with work hours.

Figure 10 shows the ratings in terms of response percentages for the item *do non-required tasks which make the workplace run more smoothly*. This item, while still being rated highly, was rated lower than the norm. Thirty per cent of the GNs felt that it was *extremely important* that they meet this obligation to SJGHC. However, a third of the GNs rated this obligation as being less important to meet, with ratings between 0 and 7.

**Figure 10**

Do non-required tasks which make the workplace run more smoothly

![Bar chart showing response percentages for non-required tasks.]
Summary and conclusions from Phase 2

This second phase of the project focused on the importance of reciprocal commitments or obligations between GNs and SJGHC. Overall, the 2009 cohort of GNs perceived the reciprocal obligations of each party as highly important, with mean importance ratings of 9 for SJGHC obligations and 8.8 for GN obligations. Approximately 20% of the respondents listed additional obligations that could be made by each party.
Phase 3

Extent to which reciprocal obligations between SJGHC and graduate nurses had been met – results from the 2009 cohort

Aim

The primary aim of Phase 3 was to assess the extent to which each party (SJGHC and GNs) met their reciprocal obligations, and the impact of met obligations on GNs’ intention to remain with SJGHC. Data collection for Phase 3 occurred towards the end of 2009. Additional measures regarding organisational and coworker support were introduced during this phase, in order to explore contradictory findings from previous phases. A combined qualitative/quantitative approach was used.

Participant overview

A total of 79 responses were received at Time 2, yielding a response rate of 68%. The majority of participants in Time 2 were from Subiaco (52%); the remaining were from Murdoch (22%), Ballarat (13%), Geelong (9%) and Bendigo (4%). Responses according to site are presented in Table 6. Participants’ average age was 27.5 years (SD = 8.4); they were mostly female (95%) and worked full-time (87%).

Method

Survey packs, including a Plain Language Statement outlining the nature of the study and inviting participation, were sent to the Learning and Development Coordinators (LDCs) at the various SJGHC sites for distribution to the GNs. A copy of the survey is shown in Appendix A. Surveys were completed during GN study days and returned to the researchers by the LDCs.
The GNs were asked to provide information on:

- the extent to which SJGHC had met its commitments or obligations to them during the GN year
- the extent to which they had met their commitments or obligations to SJGHC during the GN year
- the extent to which they felt supported by SJGHC during the GN year
- the extent to which they felt supported by their coworkers during the GN year
- their intention to remain working with SJGHC
- their level of engagement with the job
- the impact of the GN year on their health and wellbeing
- their background.

### Table 6. Respondents according to site

<table>
<thead>
<tr>
<th>SJGHC site</th>
<th>Number of GNs at site</th>
<th>Number of GN responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballarat</td>
<td>11</td>
<td>10 (91%)</td>
</tr>
<tr>
<td>Bendigo</td>
<td>9</td>
<td>3 (33%)</td>
</tr>
<tr>
<td>Bunbury</td>
<td>5</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Geelong</td>
<td>10</td>
<td>7 (70%)</td>
</tr>
<tr>
<td>Melbourne</td>
<td>5</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Murdoch</td>
<td>29</td>
<td>17 (59%)</td>
</tr>
<tr>
<td>Subiaco</td>
<td>54</td>
<td>41 (76%)</td>
</tr>
<tr>
<td>Unidentified</td>
<td>—</td>
<td>1</td>
</tr>
<tr>
<td>All</td>
<td>117</td>
<td>79 (68%)</td>
</tr>
</tbody>
</table>
Results

Summary of the main findings

Overall, the 2009 cohort of GNs perceived that SJGHC had met its obligations well, with low levels of breach reported. Further, the GNs reported having fulfilled their obligations to SJGHC. The GNs reported fairly high levels of perceived organisational support from SJGHC; they also reported fairly high levels of coworker support. Most GNs intended to remain working with SJGHC. Further, they also appeared to be highly engaged in the workplace.

Qualitative data

Up to 77% of the participants responded to several open-ended questions regarding their experiences over the graduate year at SJGHC. The qualitative responses were analysed using NVivo version 2.0. A content analysis was initially undertaken with data coded into 11 broad categories. The text within each category was then retrieved and read to identify themes within the categories. The 11 broad categories and the themes within each category are displayed in Table 7, along with participant comments illustrating each theme.
### Table 7. Qualitative data categories and themes

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and wellbeing impact</td>
<td>Injury</td>
<td>Shoulder injury kept me off for a week.</td>
</tr>
<tr>
<td></td>
<td>Sick</td>
<td>Initially you become sick a lot more, whether it’s because you’re in a hospital environment or working lots of hours.</td>
</tr>
<tr>
<td></td>
<td>Stress</td>
<td>I get stressed about trying to meet the needs of my family around work commitments.</td>
</tr>
<tr>
<td></td>
<td>Tired</td>
<td>Working FT for the first time is exhausting. After 6 months it's becoming easier.</td>
</tr>
<tr>
<td></td>
<td>Diet</td>
<td>Too much staff canteen food.</td>
</tr>
<tr>
<td></td>
<td>Time for exercise/family</td>
<td>Finding time to balance work life is difficult, i.e. de-stressing from work by exercising.</td>
</tr>
<tr>
<td>Teamwork effect on competence</td>
<td>Teamwork/communication</td>
<td>When duties become tricky it's helpful for the whole team to work out a solution.</td>
</tr>
<tr>
<td>and confidence</td>
<td>Support/someone to ask</td>
<td>Always helps working with someone else as you have someone to discuss things with.</td>
</tr>
<tr>
<td></td>
<td>Confidence and competence</td>
<td>Knowing you have the support of the majority of your colleagues increases confidence.</td>
</tr>
<tr>
<td></td>
<td>Modelling</td>
<td>Learn good technique/practice from others.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
### Table 7. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effect of patients’ comments (N = 46)</td>
<td>Making a difference</td>
<td>The good comments make me feel really good because it makes me feel like I have made a contribution.</td>
</tr>
<tr>
<td></td>
<td>Positive comments</td>
<td>Patient comments are important I believe because positive and negative comments help build your career.</td>
</tr>
<tr>
<td></td>
<td>Thanks</td>
<td>It makes me feel valued as a nurse when patients thank me and express their appreciation.</td>
</tr>
<tr>
<td></td>
<td>Appreciation</td>
<td>I have looked after patients who are very grateful which is rewarding for me.</td>
</tr>
<tr>
<td></td>
<td>Confirmed career choice</td>
<td>My patients constantly remind me how much I love my job and that I am in the right profession for me!!</td>
</tr>
<tr>
<td>Support from SJGHC regarding workplace stressors (N = 23)</td>
<td>Supervisory</td>
<td>Always have SDNs to help and talk to me about any stressors from work.</td>
</tr>
<tr>
<td></td>
<td>Peers</td>
<td>Just coworkers making sure you’re OK.</td>
</tr>
<tr>
<td></td>
<td>Other staff</td>
<td>The staff down there are excellent support and assist you to help you in any way.</td>
</tr>
<tr>
<td></td>
<td>Support groups</td>
<td>Excellent team of support within the hospital both personally and even in services to help understand workplace stress/burnout.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Table 7. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unprofessional behaviour (N = 18)</td>
<td>Bullying</td>
<td>Experienced bullying and dislike towards grads on one of my rotations.</td>
</tr>
<tr>
<td></td>
<td>Gossip</td>
<td>Gossiping nurses and unflattering comments. I don’t want to associate with people like this.</td>
</tr>
<tr>
<td></td>
<td>Hostility</td>
<td>There is a nurse on the ward I am working on at the moment who is extremely intimidating, unprofessional and undermining towards junior staff.</td>
</tr>
<tr>
<td></td>
<td>Lack of respect</td>
<td>Senior staff reprimanding staff in inappropriate places.</td>
</tr>
<tr>
<td>Whom did you report behaviour to (N = 19)</td>
<td>SDN</td>
<td>SDN on ward and SDN manager</td>
</tr>
<tr>
<td></td>
<td>Nurse manager</td>
<td>Only reported ‘inappropriate/unprofessionalism of caregiver’ to nurse manager. I suggested some education for non-nursing caregivers.</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>On my modified team nursing feedback form.</td>
</tr>
<tr>
<td>Role-model nurse example (N = 61)</td>
<td>Caring</td>
<td>Honestly truly caring for patients best interests!</td>
</tr>
<tr>
<td></td>
<td>Friendly</td>
<td>Very friendly to staff, and very compassionate to patients.</td>
</tr>
<tr>
<td></td>
<td>Helper</td>
<td>Encouraging, supportive, willing to help improve my confidence and skills as a nurse.</td>
</tr>
<tr>
<td></td>
<td>Skills</td>
<td>Excellent clinical skills, depth of knowledge.</td>
</tr>
<tr>
<td></td>
<td>Teacher</td>
<td>Always willing to take the time to explain and teach me.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJGHC exceeding expectations (N = 11)</td>
<td>Positive environment</td>
<td>Quite often: social events, BBQ’s to thank staff. Hospital funded dinners and everyday caring for my wellbeing.</td>
</tr>
<tr>
<td></td>
<td>Support</td>
<td>When I needed time off for my operation they were able to work around me and allow myself the time off.</td>
</tr>
<tr>
<td></td>
<td>Work extras</td>
<td>The new structured plan developed for graduate nurses to enhance learning in their second year.</td>
</tr>
<tr>
<td>SJGHC falling short of expectations (N = 11)</td>
<td>Lack of support</td>
<td>At times their management staff and some senior staff fall short in relation to their role. They have been rude, condescending and unsupportive at times.</td>
</tr>
<tr>
<td></td>
<td>Lack of respect</td>
<td>Comments by learning and development staff and management about me in the staff dining room was overheard by my colleagues and fed back to me.</td>
</tr>
<tr>
<td></td>
<td>Work conditions</td>
<td>Not responding to understaffing.</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>Disorganisation in learning and development.</td>
</tr>
<tr>
<td>Most satisfying experience (N = 49)</td>
<td>Gain confidence</td>
<td>Becoming competent as a nurse and able to fulfil my obligations as a team member.</td>
</tr>
<tr>
<td></td>
<td>Help patients</td>
<td>Connecting with patients, actively helping with care of patients.</td>
</tr>
<tr>
<td></td>
<td>Join SJGHC family</td>
<td>From the hospital values to the staff, management, policies and procedures, and various committees, everything about SJGHC has exceeded my expectations.</td>
</tr>
<tr>
<td></td>
<td>Learn skills/improve</td>
<td>Gaining experience, updating skills.</td>
</tr>
<tr>
<td></td>
<td>Positive feedback</td>
<td>Encouragement from peers, thanks from patients and reading what they have written about me.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Table 7. Qualitative data categories and themes (cont’d)

<table>
<thead>
<tr>
<th>Category</th>
<th>Theme</th>
<th>Comments illustrating theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improvements to program (N = 23)</td>
<td>More support</td>
<td>More support with work-life-balance.</td>
</tr>
<tr>
<td></td>
<td>Workplace issues</td>
<td>Less paperwork, it was so stressful to finish everything in such a short time.</td>
</tr>
<tr>
<td></td>
<td>Roster issues</td>
<td>Discussions regarding rotations, not just allocating grads to wards, but perhaps ask them where their interests lie.</td>
</tr>
<tr>
<td></td>
<td>Study/training issues</td>
<td>Competencies such as epidurals and cannulations need to be done ASAP in the program.</td>
</tr>
</tbody>
</table>

* Note: information in parentheses indicates the number of responses to this question.
Summary of qualitative findings

Almost 70% of the respondents reported that their health and wellbeing had been affected since becoming a GN at SJGHC. Many of these responses indicated that the first year of nursing was physically and mentally demanding. Another common complaint was the difficulty of establishing work–life balance around full-time work. Nevertheless, respondents indicated that some negative impact on health and wellbeing was to be expected in a full-time job at a hospital.

The majority (64%) of respondents reported an appreciation of teamwork. Confirming similar findings from Phase 1, comments indicated an overwhelming appreciation of the teamwork situations that are prevalent at SJGHC. Comments from patients emerged as an important factor in improving GNs’ confidence. Most respondents (73%) indicated that they valued patient feedback and that positive comments served to reinforce their career choice as nurses.

Those participants who indicated that SJGHC had been providing them with support to deal with workplace stressors (58%) were positive about this support. Only 22% of respondents indicated that they had encountered unprofessional workplace behaviour since becoming a GN. This figure is much lower than the 53% who reported similar incidents in Phase 1. The incidents reported were of a similar nature to those reported in Phase 1, including gossiping and subtle hostility, bullying and a perceived lack of respect from senior staff members.

Seventy-seven per cent of GNs reported working with a nurse that they would describe as a role model to their peers. These reports of role-model nurses were positive endorsements of the nurses at SJGHC and point to an important role for senior nurses at SJGHC. GNs were asked about instances in which SJGHC had either exceeded or fallen short of their expectations as an employer. Similar to findings in Phase 1, these questions elicited few responses, with only 14% recalling incidents in which SJGHC had exceeded their expectations and 14% recalling incidents in which SJGHC
had fallen short of their expectations as an employer. These findings indicate that in the majority of cases SJGHC is meeting the expectations of its GNs.

When asked about their most satisfying experience during the GN year, 62% of the respondents reported positive aspects of the SJGHC GN program. Only 29% of respondents had suggestions for improving the SJGHC GN program. This implies that 71% of respondents were satisfied with the current SJGHC GN program. These findings are similar to those reported in Phase 1, indicating a high level of GN satisfaction with the SJGHC program.

Quantitative data

Quantitative data relating to the extent to which reciprocal obligations were met were analysed using the Statistical Package for the Social Sciences (SPSS) version 15. The results of these analyses are reported descriptively below.

Group differences

For Phase 3, data were initially grouped into three main work sites (Subiaco, Murdoch and Victoria) to investigate differences in the ratings of the following variables: perceived breach of employer obligations, perceived fulfillment of employee obligations, engagement in the workplace, intention to remain with SJGHC, perceived organizational support and perceived coworker support. No significant differences were found in GN ratings on any of these variables, and as a result data were combined and group data has been reported.

Graduate nurse perceptions of employer obligations

Overall, the 2009 cohort of GNs perceived that SJGHC was meeting its obligations, with a global mean score of 8 being reported for ‘met
A breakdown of some of the perceived employer obligations is provided next. The following three graphs (figures 11 to 13) each display the percentages of GNs who felt that SJGHC was meeting specific obligations to them.

As seen in Figure 11, over 20% of GNs felt that SJGHC completely met its obligation regarding provision of support with work-related issues. Further, almost 80% rated this obligation as a 7 or higher, indicating that SJGHC was meeting this obligation well.

Figure 11

Provide me with support regarding work-related issues

![Bar chart](image)
As seen in Figure 12, about 25% of GNs felt that SJGHC completely met its obligation regarding provision of support with personal issues. Although most GNs perceived that they were being supported, this was the lowest perceived met obligation, with an average rating of 7. Nevertheless, the generally high ratings suggest that SJGHC is meeting its obligations to employees well.
Figure 13

Figure 13 shows that over 50% of GNs felt as though SJGHC completely met its obligation when it came to informing them about SJGHC’s mission and values, with almost 80% rating this obligation as a 9 or higher. Further, only 1% of GNs felt this obligation was not being sufficiently met by SJGHC.
Graduate nurse perceptions of employee obligations

Overall, GNs felt that they were meeting their obligations to SJGHC. GNs reported a high global mean score of 9.1, in meeting obligations such as promoting the mission and values of SJGHC, being loyal to SJGHC, becoming more skilled at their work, working well with others, being open with supervisors, performing non-required tasks, and being flexible with work hours.

A breakdown of some perceived employee obligations is provided next. The two graphs following (figures 14 and 15) display the percentages of GNs who felt they were or were not meeting specific obligations to SJGHC.

Figure 14

Figure 14 shows that all GNs felt as though they met their obligation to SJGHC when it came to doing a full day’s work for a full day’s pay, providing a rating of at least 8. Further, over 60% reported completely meeting this obligation.
The lowest met obligation for GNs was being open with their supervisor regarding things affecting their work. However, as seen in Figure 15, this obligation was still being met well, with about 80% of GNs believing they had met this obligation to SJGHC and providing a rating of at least 8.
Graduate nurse perceptions of intention to remain with SJGHC

Overall, GNs’ responses regarding their intentions to remain at SJGHC after their graduate year were positive. Ratings were made on a 7-point scale, ranging from 1 (strongly disagree) to 7 (strongly agree). A high global mean score of 5.9 was reported for intention to remain with SJGHC. Figures 16 and 17 display GNs’ responses to two items regarding intention to remain at SJGHC.

**Figure 16**

As seen in Figure 16, approximately 75% of GNs had not thought about changing organisations since beginning work with SJGHC.
Figure 17 shows that about 46% of GNs completely agreed that they would be working for SJGHC in three years' time. However, the remaining responses were spread across all ratings, indicating that a number of GNs were unsure about their future employment with SJGHC.
**Graduate nurse perceptions of support**

Overall, GNs perceived that they were well supported by both their coworkers and the organisation. Ratings were made on a 7-point scale, with a high global mean score of 5.4 being reported for organisational support and 5.5 for coworker support.

A breakdown of some perceived support items are provided next. The following two graphs (figures 18 and 19) display the percentages of GNs who felt they were or were not being supported by SJGHC or their coworkers.

**Figure 18**

Figure 18 shows that over 85% of GNs believed SJGHC really cared about them. Further, only 14% of GNs did not believe this to be the case.
As seen in Figure 19, 80% of GNs perceived that coworkers would pitch in and help, indicating a high level of coworker support in the organisation.
**Graduate nurse engagement in the workplace**

Overall, GNs reported a high level of engagement in the job. Ratings were made on a 7-point Likert scale, with a global mean score of 5.4 being reported.

A breakdown of some of the engagement items are provided next. The following two graphs (figures 20 and 21) display the percentages of GNs who felt they were or were not engaged in their work.

*Figure 20*

![Graph showing engagement levels](image)

Figure 18 shows that over 80% of GNs were proud of the work that they do. Only 2% of GNs did not respond to this item positively.
Responses to the item *it is difficult to detach myself from my job* were mixed. Responses were spread across the rating scale, with a mean response of 3.8 being recorded. This suggests that some GNs may be over-engaged in the job.

**Outcomes associated with perceived breach of employer obligations**

There was a strong negative relationship between perceived breach of employer obligations and perceived fulfilment of employee obligations. When GNs perceived that SJGHC was not meeting its obligations to them, they in turn did not meet their obligations to SJGHC. Conversely, when SJGHC was perceived to have met its obligations to GNs, the GNs in turn fulfilled their obligations to SJGHC.

*Figure 21*

![Bar chart showing responses to the item *it is difficult to detach myself from my job*.](chart.png)
Organisational support, but not coworker support, was found to influence the relationship between perceived breach of employer obligations and the outcome variables of ‘intention to remain with SJGHC’ and ‘engagement with the workplace’. Similarly, organisational support, but not coworker support, was found to influence the relationship between perceived fulfilment of employee obligations and the outcome variables of ‘intention to remain with SJGHC’ and ‘engagement with the workplace’. Overall, the data shows that organisational support is more important than coworker support to GNs and that organisational support mitigates the consequences of perceived breach of obligations.

**Outcomes associated with importance of employer obligations in Phase 2 (Time 1) and met ratings in Phase 3 (Time 2)**

GN ratings on the importance of SJGHC meeting a list of obligations at Time 1 were highly predictive of the following ratings at Time 2: employee fulfilment of obligations (25%) and engagement in the workplace (9%). In each case, the more importance GNs ascribed to SJGHC obligations at Time 1, the more likely they were to fulfil their own obligations and to be engaged in the workplace at Time 2.

Conversely, the less importance ascribed to obligations at Time 1, the lower the level of employee fulfilment of obligations and engagement in the workplace at Time 2. Interestingly, the importance of obligations at Time 1 did not predict GNs’ intentions to remain with SJGHC at Time 2. Therefore, the data suggests that perceived employer obligations influence GNs’ perceptions of their work, but that other factors may be responsible for GNs’ decisions to remain with the organisation.
Summary and conclusions from Phase 3

Overall, SJGHC met its obligations to GNs well, with low levels of breach reported. Further, GNs reported having fulfilled their obligations to SJGHC. GNs also reported high levels of perceived organisational support from SJGHC, and high levels of coworker support.

Overall, this study provides positive feedback for SJGHC regarding its GN programs. Generally, GNs believe that SJGHC is meeting its obligations as an employer. Further, perceived support is high within the organisation. Interestingly, it is organisational support, rather than coworker support, that explains many of the positive outcomes measured in this study. Finally, there were no significant differences among the main SJGHC sites in any of the key outcome variables measured.
Phase 4

SJGHC graduate nurse follow-up questionnaire

Aim

The final phase of the project took place in early 2010 and involved a follow-up of the 2009 cohort of GNs. Survey questions focused on GNs’ current employment status and their long-term intentions toward working with SJGHC. GNs were also provided with an opportunity to comment on their GN year with SJGHC.

Participants

A total of 24 nurses returned questionnaires. The small numbers made any statistical analysis difficult, and as such, only a basic summary of the data is provided for Phase 4. The majority of participants were female (90.5%) and the average age of the sample was 29.14 years. The respondents had completed their GN training at various SJGHC sites throughout Australia, including Ballarat, Bendigo, Bunbury, Geelong, Melbourne, Murdoch, Subiaco and Warrnambool.

Method

Survey packs, including a Plain Language Statement outlining the nature of the study and inviting participation, were posted to the 2009 cohort of GNs from the office of the SJGHC Group Director of Nursing. A copy of the survey is shown in Appendix A. Completed surveys were returned directly to the researchers using reply-paid envelopes.
The GNs were asked to provide information on:

- their current work status and work location
- if they were not working as nurses, the type of work they were currently undertaking and the main reason for leaving SJGHC
- the likelihood of them returning to SJGHC in the future
- if they were currently employed by SJGHC, the main reason for choosing to remain
- their intentions regarding continuing to work as a nurse long term
- the extent to which GN training had adequately prepared them for their work as nurses
- their background.

**Summary of results**

One hundred per cent of participants reported currently working as a nurse, with 92% fulfilling this role at SJGHC. Of the two nurses not working at SJGHC, one reported working in a public hospital and one reported working in a private hospital. Both of these nurses indicated that if the opportunity arose they would return to work at SJGHC.

The nurses’ main reasons for choosing to remain at SJGHC centred around four categories: convenience (*local hospital, don't have far to travel to work*); SJGHC providing opportunities for further education (*opportunity for further study supported by SJOG*); a perceived positive environment (*like the job, the people, the attitude, the feel of the place*) and friendly/supportive staff (*the staff supported me in my first year as a nurse, my transition was helped greatly by such great nurses*).

Eighty-six per cent of the nurses reported an intention to remain working as a nurse long term. When asked to comment on their long-term intentions, three themes emerged. Several respondents commented that they intended to continue working as a nurse for a short while longer
(at least 5 to 10 years) or even on a part-time basis (for example, I hope to do other things and will, but will probably want to nurse at least part time). Others indicated that they intended to further specialise (such as I intend to complete either medicine or a para-medicine course). Finally, several respondents expressed how much they enjoyed the job (It is flexible with my lifestyle and I enjoy helping others).

An impressive 85% of respondents indicated that they believed their GN training had adequately prepared them for their current work as a nurse. Only nine participants chose to comment on the adequacy of their graduate training, with the majority indicating that they were well supported and received good experience. For example, (I received) lots of experience and lots of support. Nevertheless, 22% of respondents indicated that they were dissatisfied with the support they received.

The nurses made further comments about their graduate program; these comments centred around two main categories. Several commented on the need for greater flexibility in the scheduling of their rotations (for example, rotations should be discussed and not just allocated… flexibility is a big plus). Secondly, the nurses reported feeling well supported and were generally positive about the staff at SJGHC (supportive staff (and) educators were fantastic).
Conclusion

The experiences of two cohorts of GNs in their first year of clinical practice at SJGHC sites across Australia were investigated. Overall, the findings suggest a high level of satisfaction with the SHGHC GN program. Specifically, GNs reported positive integration experiences primarily due to: supportive managers and peers; an appreciation of teamwork situations; positive feedback from patients and colleagues; admirable role models; and a caring family-like organisation. GNs also indicated that SJGHC was meeting its obligations to them and that they reciprocated by fulfilling their obligations to SHGHC. Finally, perceived support within the organisation was strong, and GNs reported a high level of engagement in the job and indicated a keen preference to remain working with SJGHC long term.
References


Graduate nurses health and wellbeing survey: Phase 1

The questions on this survey focus on the experiences of graduate nurses undertaking their graduate program at St John of God Health Care (SJGHC). Of interest are the reciprocal expectations between SJGHC and its graduate nurses. This is an opportunity for graduate nurses to provide feedback about their experiences in the graduate nurse program and the impact of these experiences on their overall health and wellbeing. The results of the study will be collated and the information used to design interventions to assist future graduate nurses at SJGHC.
Health and wellbeing questions

1. Why did you elect to undertake your graduate nurse program at SJGHC?
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2. Since becoming a graduate nurse, list below the factors that have made it easy for you to integrate into SJGHC.
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3. Of the positive factors identified above, which has had the greatest impact on you and why?
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4. Since becoming a graduate nurse, list below any factors that have made it difficult for you to integrate into SJGHC.
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5. Of the difficult factors identified above, which has had the biggest impact on you and why?
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6. Has your overall health and wellbeing been affected since you began working as a graduate nurse?
   Yes [  ]    No [  ]
   If yes, please provide details.
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   ……………………………………………………………………………………………………………
7. Has shift work impacted your overall health and wellbeing?
   Yes [ ]    No [ ]    Not applicable [ ]
   If yes, please provide details.
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8. Has working in a team improved your competence and confidence as a nurse?
   Yes [ ]    No [ ]
   If yes, please provide details.
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9. Have comments from patients reinforced how you feel about nursing as a career?
   Yes [ ]    No [ ]
   If yes, please provide details.
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10. Have you received support or assistance from SJGHC to help you cope with workplace stressors?
    Yes [ ]    No [ ]    Not applicable [ ]
    If yes, please provide details.
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    ...........................................................................................................................................
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11. What other support or assistance have you received to help you cope with workplace stressors?
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12. What strategies do you use to help you cope with workplace stress?

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13. Have you encountered unprofessional workplace behaviour since becoming a graduate nurse?

Yes [ ]    No [ ]

If yes, please describe the behaviour and how this has affected you.
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Did you report this behaviour?

Yes [ ]    No [ ]    Not applicable [ ]

If yes, to whom did you report this behaviour?
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Did you receive feedback after the behaviour was reported?

Yes [ ]    No [ ]    Not applicable [ ]
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14. Has coping with grief associated with your work impacted you since becoming a graduate nurse?

Yes [ ]    No [ ]    Not applicable [ ]

If yes, please provide details of how you coped with the situation.
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15. Since beginning your graduate nurse program, have you worked with a nurse that you would describe as a role model to your peers?

Yes [ ]    No [ ]

If yes, please provide details of why you consider this nurse to be a role model.

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16. Has there been an incident where SJGHC has exceeded your expectations of it as an employer?

Yes [ ]    No [ ]

If yes, please provide an example of such a situation.

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17. Has there been an incident where SJGHC has fallen short of your expectations of it as an employer?

Yes [ ]    No [ ]

If yes, please provide an example of such a situation.

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18. What has been the most satisfying experience of your graduate nurse program?

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19. Are there any improvements you would like to see made to the SJGHC graduate nurse program?

Yes [ ]    No [ ]

If yes, please provide details.

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Employer obligations

Use the scale below to rate the extent to which you believe SJGHC is meeting the following commitments or obligations to you during your graduate year. The higher the rating, the more you believe SJGHC is meeting its obligations to you; the lower the rating, the less you believe SJGHC is meeting its obligations to you.

<table>
<thead>
<tr>
<th>SJGHC is meeting its obligation to:</th>
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<tbody>
<tr>
<td>1 Talk with me about matters which affect me</td>
<td>0</td>
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<td>2 Help me develop my career</td>
<td>0</td>
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<tr>
<td>3 Provide me with support regarding work-related issues</td>
<td>0</td>
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<td>4 Provide the resources required to do my work</td>
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<td>5 Make sure my performance appraisal is fair</td>
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<td>6 Give me adequate training for the job</td>
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<tr>
<td>7 Allow me time off to meet personal or family needs</td>
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<tr>
<td>8 Provide me with support regarding personal issues</td>
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<tr>
<td>9 Treat me the same as everyone with respect to rules and discipline</td>
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<td>10 Provide me with an adequate orientation training program</td>
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<tr>
<td>11 Inform me about SJGHC mission and values</td>
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</tbody>
</table>
Employee obligations

Use the scale below to rate the extent to which you believe you are meeting the following commitments or obligations to SJGHC during your graduate year. The higher the rating, the more you believe you are meeting your obligations to SJGHC; the lower the rating, the less you believe you are meeting your obligations to SJGHC.

<table>
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<tbody>
<tr>
<td>Do not meet my obligation at all</td>
<td>Complete meeting my obligation</td>
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</table>

I am meeting my obligation to:

<table>
<thead>
<tr>
<th>1</th>
<th>Promote the mission and values of SJGHC</th>
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<th>1</th>
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<tbody>
<tr>
<td>2</td>
<td>Protect the reputation of SJGHC</td>
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</tr>
<tr>
<td>3</td>
<td>Be loyal to SJGHC</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>4</td>
<td>Become more skilled at my work</td>
<td>0</td>
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<tr>
<td>5</td>
<td>Work well with others</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>6</td>
<td>Do a full day’s work for a full day’s pay</td>
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<td>7</td>
<td>Be open with my supervisor about things affecting my work</td>
<td>0</td>
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<td>2</td>
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<td>8</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>8</td>
<td>Do non-required tasks which make the workplace run more smoothly</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>9</td>
<td>Be flexible with my work hours if required</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
</tr>
</tbody>
</table>
Attitudes to work

Use the scale below to rate the extent to which you agree or disagree with each statement. The *higher* the rating, the *more* you agree with each statement; the *lower* the rating, the *less* you agree with each statement.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>I have thought about leaving the graduate nurse program since I began to work for SJGHC</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>I believe I will be working for SJGHC three years from now</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>If I left SJGHC at the end of my graduate nurse program, I would consider returning to the organisation sometime in the future</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td>Since commencing the graduate nurse program at SJGHC, I have often thought about leaving the nursing profession altogether</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>5</strong></td>
<td>I feel like I am part of the SJGHC family</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>I feel a strong sense of belonging to SJGHC</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>
Background information

Please provide the following information about yourself:

Age (years): ___________

Gender: ___________

SJGHC Division: ___________

Do you work:  Full-time [  ]  Part-time [  ]

What is the length of your graduate nurse program (years)? ___________

How many months have you completed in the graduate nurse program? ___________
Graduate nurses health and wellbeing project: Phase 2

A research team from Deakin University and St John of God Health Care (SJGHC) are conducting a longitudinal study to investigate the experiences of graduate nurses during their graduate year. This is the second phase of the research project and we would like to invite you to participate in this research study over your graduate year. The questions on this preliminary survey focus on the commitments or obligations you expect of SJGHC during your graduate year, and the reciprocal commitments or obligations you expect to make to SJGHC. You are also asked to provide some background information about yourself and some information that will enable us to code your survey without identifying you.

Participation in this survey is voluntary and the survey is anonymous, so please do not write any identifying information on the survey. In addition, completion and return of the survey signifies your consent to participate in this research project.

NOTE: In order to save paper, information is printed on both sides of each page.
### Employer obligations

Use the scale below to rate the importance of each of the following commitments or obligations that SJGHC could make to you during your graduate year. The higher the rating, the more important you believe the obligation is; the lower the rating, the less important you believe the obligation is.

<table>
<thead>
<tr>
<th>Obligation</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk with me about matters which affect me</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Help me develop my career</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide me with support regarding work-related issues</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Provide the resources required to do my work</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Make sure my performance appraisal is fair</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
<td></td>
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<tr>
<td>Give me adequate training for the job</td>
<td>8</td>
<td>9</td>
<td>10</td>
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<tr>
<td>Allow me time off to meet personal or family needs</td>
<td>8</td>
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<tr>
<td>Provide me with support regarding personal issues</td>
<td>8</td>
<td>9</td>
<td>10</td>
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<tr>
<td>Treat me the same as everyone with respect to rules and discipline</td>
<td>8</td>
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<tr>
<td>Provide me with an adequate orientation training program</td>
<td>8</td>
<td>9</td>
<td>10</td>
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<tr>
<td>Inform me about SJGHC mission and values</td>
<td>8</td>
<td>9</td>
<td>10</td>
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</table>

Use the space below to list any other obligations that you believe are important for SJGHC to make to you during your graduate year.

…………………………………………………………………………………………………………………
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82  Graduate nurse experiences during the SJGHC graduate nurse year
### Employee obligations

Use the scale below to rate the importance of each of the following commitments or obligations that you could make to SJGHC during your graduate year. The higher the rating, the more important you believe the obligation is; the lower the rating, the less important you believe the obligation is.

<table>
<thead>
<tr>
<th>Obligation</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
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<tbody>
<tr>
<td>Protect the reputation of SJGHC</td>
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<td>Be loyal to SJGHC</td>
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<tr>
<td>Become more skilled at my work</td>
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<tr>
<td>Work well with others</td>
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<tr>
<td>Do a full day's work for a full day's pay</td>
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<tr>
<td>Be open with my supervisor about things affecting my work</td>
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<tr>
<td>Do non-required tasks which make the workplace run more smoothly</td>
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<tr>
<td>Promote the mission and values of SJGHC</td>
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</tbody>
</table>

Use the space below to list any other obligations that you believe are important for you to make to SJGHC during your graduate year.
Background information

Please provide the following information about yourself:

Age (years): ___________

Gender: ___________

Work status: Full-time [ ]  Part-time [ ]

Work location (e.g. Bendigo, Bunbury): ______________________

Nursing registration: Division 1 [ ]  Division 2 [ ]

We wish to code your survey so that we can track your responses during the year without identifying you. As such, please provide the following information for coding purposes:

What is your mother’s maiden name? ……………………………………………………

What is your father’s date of birth (yy/mm/dd)? …………………………………………

Thank you for your participation and best of luck with your graduate year.
Graduate nurses health and wellbeing survey: Phase 3

A research team from Deakin University and St John of God Health Care (SJGHC) are conducting a longitudinal study to investigate the experiences of graduate nurses during their graduate year. This is the third phase of the research project and we would like to invite you to participate in this research study. The questions on this survey focus on your experiences during your graduate nurse year, as well as the reciprocal expectations between SJGHC and yourself during your graduate nurse year. You are also asked to provide some background information about yourself.

Participation in this survey is voluntary and you are not obliged to participate. The survey is also anonymous, so please do not write any identifying information on the survey. If you decide to participate in this study, completion and return of the survey in the enclosed pre-paid envelope signifies your consent to participate in this research project.

Should you have any questions about this research project, you may contact the principal researcher as follows:

Dr Arlene Walker  
Deakin University  
School of Psychology  
Tel: 5227 8441  
Email: arlenew@deakin.edu.au

Should you have any concerns about this research project, please contact:

Gorette de Jesus  
Executive Officer  
St John of God Health Care Ethics Committee  
Tel: (08) 9382 6940  
Quote project number: EC 183-2008

NOTE: To save paper, survey questions are printed on both sides of the page.
Employer obligations

Use the scale below to rate the extent to which you believe SJGHC has met the following commitments or obligations to you during your graduate year. The higher the rating, the more you believe SJGHC has met its obligations to you; the lower the rating, the less you believe SJGHC has met its obligations to you.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not meet obligation at all</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completely met obligation</td>
<td></td>
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</tr>
</tbody>
</table>

SJOGHC has met its obligation to:

1. Talk with me about matters which affected me: 0 1 2 3 4 5 6 7 8 9 10
2. Help me develop my career: 0 1 2 3 4 5 6 7 8 9 10
3. Provide me with support regarding work-related issues: 0 1 2 3 4 5 6 7 8 9 10
4. Provide the resources required to do my work: 0 1 2 3 4 5 6 7 8 9 10
5. Make sure my performance appraisal was fair: 0 1 2 3 4 5 6 7 8 9 10
6. Give me adequate training for the job: 0 1 2 3 4 5 6 7 8 9 10
7. Allow me time off to meet personal or family needs: 0 1 2 3 4 5 6 7 8 9 10
8. Provide me with support regarding personal issues: 0 1 2 3 4 5 6 7 8 9 10
9. Treat me the same as everyone with respect to rules and discipline: 0 1 2 3 4 5 6 7 8 9 10
10. Provide me with an adequate orientation training program: 0 1 2 3 4 5 6 7 8 9 10
11. Inform me about SJGHC mission and values: 0 1 2 3 4 5 6 7 8 9 10

Use the space below to list any other obligations that you believe SJGHC should have made to you during your graduate nurse year.

…………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………
Employee obligations

Use the scale below to rate the extent to which you believe you have met the following commitments or obligations to SJGHC during your graduate nurse year. The higher the rating, the more you believe you have met your obligations to SJGHC; the lower the rating, the less you believe you have met your obligations to SJGHC.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Did not meet my obligation at all</th>
<th>Completely met my obligation</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>9</td>
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<td>8</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>9</td>
<td>10</td>
<td>1</td>
</tr>
</tbody>
</table>

I have met my obligation to:

<table>
<thead>
<tr>
<th>Obligation</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protect the reputation of SJGHC</td>
<td>1</td>
</tr>
<tr>
<td>Be loyal to SJGHC</td>
<td>2</td>
</tr>
<tr>
<td>Become more skilled at my work</td>
<td>3</td>
</tr>
<tr>
<td>Work well with others</td>
<td>4</td>
</tr>
<tr>
<td>Do a full day's work for a full day's pay</td>
<td>5</td>
</tr>
<tr>
<td>Be open with my supervisor about things affecting my work</td>
<td>6</td>
</tr>
<tr>
<td>Do non-required tasks which made the workplace run more smoothly</td>
<td>7</td>
</tr>
<tr>
<td>Be flexible with my work hours if required</td>
<td>8</td>
</tr>
<tr>
<td>Promote the mission and values of SJGHC</td>
<td>9</td>
</tr>
</tbody>
</table>

Use the space below to list any other obligations that you believe you should have made to SJGHC during your graduate nurse year.

…………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………
Perceived support

Use the scale below to rate the extent to which you agree with the following statements. The higher the rating, the more you agree with the statement; the lower the rating, the less you agree with the statement. There are no right or wrong answers. Please respond to each question.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SJGHC values my contribution to its wellbeing</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>SJGHC fails to appreciate any extra effort from me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3</td>
<td>SJGHC ignores any complaints I make</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>SJGHC really cares about me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>Even if I did the best job possible, SJGHC would fail to notice</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>SJGHC cares about my general satisfaction</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>SJGHC shows very little concern for me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8</td>
<td>SJGHC takes pride in my accomplishments at work</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>My coworkers really care about me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10</td>
<td>I feel close to my coworkers</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>11</td>
<td>My coworkers take a personal interest in me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>12</td>
<td>I feel appreciated by my coworkers</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>13</td>
<td>My coworkers are friendly to me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>14</td>
<td>My coworkers would fill in for me while I was absent</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>15</td>
<td>My coworkers are helpful in getting the job done</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>16</td>
<td>My coworkers give useful advice on job problems</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>17</td>
<td>My coworkers assist with unusual work problems</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>18</td>
<td>My coworkers will pitch in and help</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</table>
Perceptions of work

Use the scale below to rate the extent to which you agree with the following statements. The higher the rating, the more you agree with that statement; the lower the rating, the less you agree with that statement. There are no right or wrong answers. Please respond to each question.

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<tr>
<td>Strongly disagree</td>
<td>Strongly agree</td>
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<tr>
<td>1</td>
<td>I find the work that I do full of meaning and purpose</td>
<td>1 2 3 4 5 6 7</td>
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<td>2</td>
<td>Time flies when I am working</td>
<td>1 2 3 4 5 6 7</td>
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<td>3</td>
<td>I am enthusiastic about my job</td>
<td>1 2 3 4 5 6 7</td>
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<td>4</td>
<td>When I am working, I forget about everything else around me</td>
<td>1 2 3 4 5 6 7</td>
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<td>5</td>
<td>My job inspires me</td>
<td>1 2 3 4 5 6 7</td>
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<td>6</td>
<td>When I get up in the morning, I feel like going to work</td>
<td>1 2 3 4 5 6 7</td>
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<td>7</td>
<td>I am proud of the work I do</td>
<td>1 2 3 4 5 6 7</td>
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<td>8</td>
<td>I am immersed in my work</td>
<td>1 2 3 4 5 6 7</td>
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<td>9</td>
<td>I can continue working for very long periods at a time</td>
<td>1 2 3 4 5 6 7</td>
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<td>10</td>
<td>To me, my job is challenging</td>
<td>1 2 3 4 5 6 7</td>
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<td>11</td>
<td>I get carried away when I’m working</td>
<td>1 2 3 4 5 6 7</td>
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<tr>
<td>12</td>
<td>At work, I feel mentally resilient</td>
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<tr>
<td>13</td>
<td>It is difficult to detach myself from my job</td>
<td>1 2 3 4 5 6 7</td>
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<tr>
<td>14</td>
<td>At work I always persevere, even when things do not go well</td>
<td>1 2 3 4 5 6 7</td>
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<td>15</td>
<td>I would prefer another job to the one I am in</td>
<td>1 2 3 4 5 6 7</td>
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<td>16</td>
<td>I have thought about changing organisations since I began to work for SJGHC</td>
<td>1 2 3 4 5 6 7</td>
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<tr>
<td>17</td>
<td>If I have my way, I will be working for SJGHC three years from now</td>
<td>1 2 3 4 5 6 7</td>
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<td>18</td>
<td>I intend to remain working with SJGHC</td>
<td>1 2 3 4 5 6 7</td>
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Health and wellbeing

1. Has your overall health and wellbeing been affected since you began working as a graduate nurse?
   Yes [ ]   No [ ]
   If yes, please provide details.
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2. Has working in a team improved your competence and confidence as a nurse?
   Yes [ ]   No [ ]
   If yes, please provide details.
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3. Have comments from patients reinforced how you feel about nursing as a career?
   Yes [ ]   No [ ]
   If yes, please provide details.
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4. Have you received support or assistance from SJGHC to help you cope with workplace stressors?
   Yes [ ]   No [ ]   Not applicable [ ]
   If yes, please provide details.
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5. Have you encountered unprofessional workplace behaviour since becoming a graduate nurse?
   Yes [ ]   No [ ]
   If yes, please describe the behaviour and how this has affected you.
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Did you report this behaviour?
   Yes [ ]   No [ ]   Not applicable [ ]
   If yes, to whom did you report this behaviour?
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Did you receive feedback after the behaviour was reported?
   Yes [ ]   No [ ]   Not applicable [ ]
6. Since beginning your graduate nurse program, have you worked with a nurse that you would describe as a role model to your peers?
   Yes [ ]   No [ ]

If yes, please provide details of why you consider this nurse to be a role model.

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7. Has there been an incident where SJGHC has exceeded your expectations of it as an employer?
   Yes [ ]   No [ ]

If yes, please provide an example of such a situation.

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8. Has there been an incident where SJGHC has fallen short of your expectations of it as an employer?
   Yes [ ]   No [ ]

If yes, please provide an example of such a situation.

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9. What has been the most satisfying experience of your graduate nurse program?

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10. Are there any improvements you would like to see made to the SJGHC graduate nurse program?

Yes [ ]  No [ ]

If yes, please provide details.

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Background information

Please provide the following information about yourself:

Age (years): ___________

Gender: ___________

Work location (e.g. Bendigo, Ballarat, Geelong): ___________

Nursing registration: Division 1 [ ] Division 2 [ ]

Do you work: Full-time [ ] Part-time [ ]

What is the length of your graduate nurse program (years)? ___________

How many months have you completed in the graduate nurse program? ___________

What is your mother’s maiden name? ______________________

What is your father’s date of birth (yy/mm/dd)? ______________________

Thank you for your participation.
Graduate nurses health and wellbeing survey: Phase 4

A research team from Deakin University and St John of God Health Care (SJGHC) have been conducting a longitudinal study to investigate the experiences of graduate nurses during their graduate year. This is the final phase of the research project and we would like to invite you to participate in this follow-up study of graduate nurses. The questions in this survey focus on the experiences of graduate nurses who have recently completed their graduate program at SJGHC. Of particular interest are the graduate nurses’ current employment and their long-term attitudes toward working with SJGHC. You are also asked to provide some background information about yourself that will enable us to code your survey without identifying you.

Participation in this survey is voluntary and the survey is anonymous, so please do not write any identifying information on the survey. In addition, completion and return of the survey signifies your consent to participate in this research project. Finally, please return the survey to us by placing it in the attached reply-paid envelope and putting it in the mail.

Thank you for participating, your time and effort is much appreciated.
If you have any queries about this research project, please contact the principal researcher, Dr Arlene Walker, at arlene.walker@deakin.edu.au.

If you have any complaints about any aspect of the project or the way it is being conducted, or any questions about your rights as a research participant, then you may contact either:

Gorette de Jesus  
Executive Officer  
St John of God Health Care Ethics Committee  
Tel: (08) 9382 6940

You will need to tell Gorette my name (Dr Arlene Walker) and quote project number 327.

Or:

Executive Officer  
Deakin University Human Research Ethics Committee  
Tel: 9251 7123

You will need to report my name (Dr Arlene Walker) and quote the project number, EC 183-2008.
Graduate nurse follow-up questions

1. Are you currently working as a nurse? Yes / No
   a. If yes, are you still working for SJGHC? Yes / No
   b. If you are not working for SJGHC, are you working as a nurse in the public or private sector?
   c. If you are not working as a nurse, what type of work are you currently undertaking?
   d. If you are not working as a nurse, what was your main reason for leaving nursing?
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2. If you are not currently working for SJGHC, what was your main reason for leaving the organisation?
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3. If the opportunity arose, would you return to work at SJGHC? Yes / No
   Please comment on your answer if you wish.
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4. If you are currently employed by SJGHC, what was your main reason for choosing to remain with the organisation?
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5. Do you intend to remain working as a nurse long term? Yes / No
   Please comment on your answer if you wish.
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6. Do you feel that your graduate nurse training adequately prepared you for your current work as a nurse? Yes / No
   Please comment on your answer if you wish.
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7. Is there any aspect of your graduate nurse year or the program that you would like to comment on?
   ........................................................................................................
   ........................................................................................................
   ........................................................................................................

Background information

Please provide the following information about yourself:

   Age (years): ___________

   Gender: ___________

   At which SJGHC location did you complete your graduate year? ___________

   Thank you for taking the time to complete this survey.

   Please return the survey in the enclosed reply paid envelope.
Appendix B
MEMORANDUM

TO: Dr Arlene Walker  
School of Psychology, Geelong Waterfront

FROM: Deakin University Human Research Ethics Committee (DU-HREC)

DATE: 10 December 2008

SUBJECT: Project EC 183-2008  
(Please quote this project number in future communication.)
St John of God graduate nurse project

Interim approval for this project was ratified at the DU-HREC meeting held on 8 December 2008.

Approval has been given for Shannon Hyder, under the supervision of Dr Arlene Walker, School of Psychology, to undertake this project for a period of three years from 27 October 2008.

The approval given by the Deakin University Human Research Ethics Committee is given only for the project and for the period as stated in the approval. It is your responsibility to contact the Executive Officer immediately should any of the following occur:

- Serious or unexpected adverse effects on the participants
- Any proposed changes in the protocol, including extensions of time.
- Any events which might affect the continuing ethical acceptability of the project.
- The project is discontinued before the expected date of completion.
- Modifications are requested by other HREC’s.

In addition you will be required to report on the progress of your project at least once every year and at the conclusion of the project. Failure to report as required will result in suspension of your approval to proceed with the project.

DU-HREC may need to audit this project as part of the requirements for monitoring set out in the National Statement on Ethical Conduct in Research Involving Humans (1999)

Vicky Bates, Secretary  
On behalf of DU-HREC
03 9251 7052
4 September 2008

Dr Arlene Walker
Lecturer School of Psychology
Deakin University
Geelong Waterfront Campus
GEELONG VIC 3217

Dear Dr Walker

Re: St John of God Graduate Nurse Project (Factors impacting upon graduate nurse's expectations, turnover intentions, health and wellbeing during their first year of clinical practice) (Our ref No: 327)

The St John of God Health Care Ethics Committee ("the Committee") recently reviewed the revised survey tool, as per Ms Kate Birrell's letter of 2 September 2008.

At its meeting on 4 September 2008, the Committee granted ethical approval of your study. Please find attached signed and dated Committee membership list.

I am now pleased, on behalf of the St John of God Health Care organisation, to confirm final approval of your study.

The Committee is a Human Research Ethics Committee that is constituted and operates in accordance with the National Health and Medical Research Council’s National Statement on Ethical Conduct in Human Research (2007). The National Statement requires that the Committee monitor research projects to which it has given ethical approval. It would therefore be appreciated if you could please keep the Committee informed of the progress of your research including:

1. any proposed changes in the research protocol.
2. any unforeseen events that may affect continued ethical approval of the study.
3. when it is completed or abandoned.

The Committee would appreciate receiving at a minimum an annual progress report on the study, as well as a final report on the study results and/or any subsequent publications.

I wish you well with your study.

Yours sincerely

[Signature]

Professor Con Michael
(on behalf of St John of God Health Care)

cc. Mr Shannon Hyder, School of Psychology, Deakin University
cc. Ms Kate Birrell, Group Director of Nursing, SJGHC

St John of God Health Care Inc. ABN 51 960 911, ABN 21 939 237 958 (Limited Liability) incorporated in Western Australia