

Difficulties in Instructing Novice Nurses as Perceived by Preceptors

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Abstract

Preceptors of novice nurses are expected to play an important role as part of the continuing education of novice nurses who have just become nurses after graduating from school. Since preceptors may experience a variety of difficulties in instructing novice nurses, it is necessary to provide support for preceptors to alleviate the difficulties in instructing novice nurses. This study aims to elucidate the difficulties perceived by preceptors in instructing novice nurses. An anonymous self-administered questionnaire survey was conducted from February to March 2021 to investigate the difficulties perceived by preceptors. The data were qualitatively and inductively analyzed. The survey items included: demographics (age, gender, professional experience, length of working as a nurse, length of working as a preceptor, hospital wards assigned to, and final education); and experiences with difficulties in instructing novice nurses. Demographic characteristics of the participants were: mean age 30.6 years, mean nursing experience 6.7 years, and mean preceptor experience 3.1 years. The described data were organized into categories and subcategories according to similarity of meaningful contexts. Eighty-nine contexts and three categories were identified: “Difficulties related to the attitude of novice nurses when being instructed,” “Difficulties in performing the role of preceptor,” and “Difficulties due to disagreements with seniors/supervisors about instruction policies.” The findings show the necessity to provide support for preceptors to improve their nursing practice skills and educational skills to educate novice nurses with confidence. Entire organizations, including senior nurses and nursing managers, need to establish education policies and support arrangements for preceptors of novice nurses.

Keywords: Preceptors, Difficulties, Novice Nurses, Instructing

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Introduction

In recent years, the needs of the general public for medical care and quality nursing in Japan have increased due to shorter hospital stays, along with the increase in the aged population and decreased birthrate and also with the advances in medicine. However, due to the discrepancy between basic nursing education and clinical practice, novice nurses may experience a reality shock (Itomine et al., 2006) and burnout (Suzuki et al., 2005). In 2011, the Ministry of Health, Labour, and Welfare (MHLW) released guidelines for training of novice nurses (Guidelines), which stipulated training after the graduation from nursing schools: an obligation to make increased efforts (MHLW, 2010), to ensure improvements in support for novice nurses. Preceptors of novice nurses are assumed to be part of the continuing education of novice nurses who have just become nurses after graduating from nursing school. These preceptors need to evaluate educational achievements of novice nurses, such as on basic knowledge, skills, and attitudes as nurses (Ministry of Health, Labour and Welfare, 2014), and to play an important role in instructing novice nurses. Previous studies have reported that preceptors with about five-year nursing experience and who are inexperienced in social and clinical experience (Komiyama, 2016) feel a lack of confidence in their own instruction (Ito & Munakata, 2016). Preceptors also play various roles as leader nurses and members of medical teams in addition to the educational roles for novice nurses. To meet the needs for their roles, preceptors may engage in the instruction of novice nurses with a sense of tension, and experience a variety of difficulties in instructing novice nurses. For this reason, it is necessary to provide support for preceptors to alleviate the difficulties in instructing novice nurses. This study aims to elucidate the difficulties perceived by preceptors in instructing novice nurses.

Methods

1. Terms and Definitions

- 1) Preceptors: Teachers who provide practical instructions and evaluation of clinical practice for novice nurses
- 2) Novice nurses: Nurses who are employed as nurses directly after obtaining the nursing license

2. Survey Items

- 1) Demographics (age, gender, professional experience, length of working as a nurse, length of working as a preceptor, hospital wards assigned to, and final education)
- 2) Experiences with difficulties in instructing novice nurses

3. Participants and Survey Methods

In February and March of 2021, we conducted an anonymous self-administered questionnaire survey with 92 nurses who perform preceptor roles in participating university hospitals, to investigate difficulties perceived by the preceptors. The data were qualitatively and inductively analyzed.

4. Analysis

Data from the open-ended section in the questionnaire were coded while ensuring that the meaning of the descriptions of difficulties perceived by the preceptors was not distorted. The codes were organized into categories and subcategories according to similarities and relevance of the descriptions. The results of analysis were examined

and evaluated with the supervision of researchers in Doctoral programs in the field of nursing management and policy studies.

5. Ethics

This study was approved by the ethics review committee of Teikyo Heisei University. We explained the purpose, methods, and ethical considerations of the study to the participant nurses in writing.

Results

1. Demographics of Participants

Twenty-five (27.2%) responses that described “Experiences with difficulties in instructing novice nurses” from among responses collected from 92 preceptors working in two university hospitals and engaging in instruction of novice nurses were determined to be valid: 22 (88%) females, 2 (8%) males and 1 (4%) unknown. Demographics of the included respondents were as follows: mean age 30.6 years, mean nursing experience 6.7 years, and mean preceptor experience 3.1 years (Table 1).

Table 1: Demographic Characteristics of Participants

Item	Detail	n	%	Mean
Age (years)	25 - 30	15	60	30.6
	31 - 35	5	20	
	36 - 40	2	8	
	41 -	3	12	
Sex	Male	2	8	
	Female	22	88	
	Unknown	1	4	
Occupation	Nurse	20	80	
	Midwife	5	20	
Nursing experience (years)	2.9 - 5	14	56	6.7
	6 - 10	7	28	
	11 -	4	16	
Preceptor experience (years)	1 - 5	19	76	3.1
	6 - 10	4	16	
	Unknown	2	8	
Ward	Internal medicine	2	8	
	Surgery	9	36	
	Pediatrics	2	8	
	Obstetrics and gynecology	6	24	
	Mixed ward	4	16	
	Operating room	2	8	
Final education	Nursing professional school	10	40	
	Nursing junior college	8	32	
	Nursing college/university	7	28	

2. Difficulties in Instructing Novice Nurses as Perceived by Preceptors (Table 2)

As difficulties perceived by preceptors, 89 contexts were identified. Classifying these according to similarity of meaningful contexts, we examined them further, and narrowed the contexts down to 69 contexts in the following three categories: “Difficulties related to the attitude of novice nurses when being instructed,” “Difficulties in performing the role of preceptor,” and “Difficulties due to disagreements with seniors/supervisors about instruction policies.” In the following, subcategories will be indicated with single quotation marks (‘ ’) and descriptions of difficulties in *italics*.

1) *Difficulties related to the attitude of novice nurses when being instructed*

The category “Difficulties related to the attitude of novice nurses when being instructed” is comprised of three subcategories: ‘Disappointments at the teaching not being understood and applied’ was derived from *Disappointed because novice nurses did not understand and did not apply what they had learned although they were instructed in the same matter over and over*; ‘Dealing with novice nurses who are unwilling to learn’ was derived from *Felt difficulties in instructing novice nurses because it seemed that they did not follow advice to study what they had learned by themselves*; and ‘Disturbed by the attitude of novice nurses when being instructed’ was derived from *Feelings of emptiness in instructing assigned novice nurse because of their attitudes lacking any wish to improve themselves*.

2) *Difficulties in performing the role of preceptor*

The category “Difficulties in performing the role of preceptor” is comprised of nine subcategories: ‘Individual differences in the development and comprehension of novice nurses’ was derived from *Feel difficulties in instructing novice nurses because of differences in understanding and experience of nursing skills depending on the schools they graduated from*; ‘Communication difficulties’ was derived from *Felt difficulties in communicating what I should teach because the novice nurses began to cry immediately when I used somewhat strong words in the instruction*; ‘Difficulties in instructing when novice nurses make mistakes’ was derived from *Experienced a hard time because I had no experience in giving instruction on the mistakes novice nurses made*; ‘Difficulties in fulfilling assigned roles’ was derived from *Felt difficulties in deciding what and how I should instruct because I did not know what a preceptor should do*; ‘Anxiety due to lack of confidence’ was derived from *Feelings that my teaching methods were not good enough because it took a long time for the novice nurses to understand what I instructed them in*; ‘Difficulties in understanding the situation of novice nurses’ was derived from *Felt difficulties in sharing the information about how well the novice nurses have mastered skills when among other staff*; ‘Anxiety about giving mental support to novice nurses’ was derived from *Worries about whether I am able to instruct novice nurses with a full understanding of their feelings*; ‘Turnover of novice nurses in the charge of the preceptors’ was derived from *Worries that the novice nurses in my charge will leave their employment*; and ‘Burden of time spent out of work hours’ was derived from *Feeling it a burden to take care of novice nurses’ daily reflection outside of my work hours because I myself am busy with my duties*.

3) *Difficulties due to disagreements with seniors/supervisors about instruction policies*

The category “Difficulties due to disagreements with seniors/supervisors about instruction policies” is comprised of two subcategories: ‘Pressure from senior nurses’ was derived from *Experienced a hard time in instructing novice nurses because people around me told me different opinions about instruction of novice nurses*; and ‘Disagreements with seniors/supervisors about instruction goals’ was derived from *Feeling uncomfortable*

instructing novice because the situation of on-site novice nurse instruction did not match the ideas of my supervisor, and it took time to set goals for the novice nurses.

Table 2: Difficulties in Instructing Novice Nurses as Perceived by Preceptors

Category	Subcategory	Description of Difficulties
Difficulties related to the attitude of novice nurses when being instructed	Disappointments at the teaching not being understood and applied	<p>I gave guidance on medical safety, but I was anxious about letting the novice nurses do the work alone because they do things from their own ideas without reviewing it.</p> <p>Disappointed because novice nurses did not understand and did not apply what they had learned although they were instructed in the same matter over and over.</p> <p>I had other nurses help me to instruct the novice nurses in my charge, but I felt a sense of emptiness because the novice nurses did not understand or apply what they had learned.</p> <p>I have been thinking of different ways to instruct the novice nurses, but it is hard to produce results.</p> <p>I was disappointed because the novice nurses were not able to use the nursing skills that I taught them.</p> <p>It was painful for me to say the same things many times because the novice nurses did not share information among themselves.</p>
	Dealing with novice nurses who are unwilling to learn	<p>Felt difficulties in instructing novice nurses because it seemed that they did not follow advice to study what they had learned by themselves.</p> <p>I thought that the novice nurses would not be able to make progress in their studies because they were passive and not proactive.</p> <p>I told the novice nurses to submit reports on the what they had been instructed in, but they did not submit the reports. I was disappointed because they had no motivation.</p> <p>I repeatedly told the novice nurses what I wanted them to learn and memorize, but they did not follow my advice, and I felt uneasy.</p> <p>I felt it difficult to teach novice nurses because they did not follow my advice to reflect on what they had learned and to study in advance.</p> <p>I was worried that the novice nurses in my charge would repeat the same mistakes over and over because they were not aware that they had caused incidents and made mistakes.</p> <p>I had trouble with how to teach novice nurses who would not reflect on what they had learned and not prepare for the study in advance.</p>
	Disturbed by the attitude of novice nurses when being instructed	<p>Feelings of emptiness in instructing assigned novice nurse because of their attitudes lacking any wish to improve themselves.</p> <p>It was difficult for me to teach the novice nurses I was in charge of because they showed poor attitudes when they were instructed.</p> <p>I did not know how to teach the novice nurses who would not try to learn because they showed rebellious attitudes when I told them to learn what they already had been instructed in.</p> <p>I was troubled because I did not know how to instruct novice nurses and I repeatedly instructed them, but they did not respond to my instructions.</p> <p>I felt uneasy because the novice nurses were rough in their speech also in front of patients.</p> <p>I felt it unrewarding to teach novice nurses because they would not listen to me when I was giving them instructions.</p>

Table 2 (Continued)

Category	Subcategory	Description of Difficulties
Difficulties related to the attitude of novice nurses when being instructed	Disturbed by the attitude of novice nurses when being instructed	<p>I was disappointed when the novice nurses said “I do not know” and “It was first time to hear this” although I had already taught them these matters.</p> <p>I felt uneasy about the attitudes of the novice nurses being instructed because they did not take notes when I gave advice to them.</p>
Difficulties in performing the role of preceptor	Individual differences in the development and comprehension of novice nurses	<p>Feel difficulties in instructing novice nurses because of differences in understanding and experience of nursing skills depending on the schools they graduated from.</p> <p>It is difficult to teach novice nurses by changing teaching methods because of the individual differences in their development.</p> <p>I was concerned about whether the work load I give them is appropriate because of the individual differences in their understanding.</p>
	Communication difficulties	<p>Felt difficulties in communicating what I should teach because the novice nurses began to cry immediately when I used somewhat strong words in the instruction.</p> <p>I felt difficulties because the novice nurses took everything I said to them with the intention of giving them guidance as a kind of power harassment.</p> <p>Communication is difficult because the novice nurses felt they were scolded by me although I was just giving them instructions.</p> <p>Due to a generation gap with novice nurses, I felt the work to be difficult because of the difference between what I wanted to convey and how the novice nurses understood it.</p> <p>It is difficult to teach because the novice nurses of had different standards of values.</p>
	Difficulties in instructing when novice nurses make mistakes	<p>Experienced a hard time because I had no experience in giving instruction on the mistakes novice nurses made.</p> <p>I felt uneasy because I thought my instruction was poor when the novice nurse made the same incidence again and again.</p> <p>I lost confidence in my way of giving instructions to see my novice nurse being discouraged when I gave her instructions on the mistakes she made in her task.</p> <p>I felt a sense of emptiness when novice nurses acted on their own decisions, resulting in incidents and mistakes.</p> <p>I felt burdened to follow up on mistakes made by the novice nurses in my charge when I was not available.</p>
	Difficulties in fulfilling assigned roles	<p>Felt difficulties in deciding what and how I should instruct because I did not know what a preceptor should do.</p> <p>I was worried about my instruction methods as a preceptor in charge of novice nurses.</p> <p>I felt difficulties in showing novice nurses how to behave as adult members of society.</p> <p>I felt uneasy when I could not assist the novice nurse who were given a severe complaint by a patient.</p>
	Anxiety due to lack of confidence	<p>I was anxious about whether the novice nurses fully understood what I taught them because I was teaching them while doing my own duties.</p> <p>Feelings that my teaching methods were not good enough because it took a long time for the novice nurses to understand what I instructed them in.</p>

Table 2 (Continued)

Category	Subcategory	Description of Difficulties
Difficulties in performing the role of preceptor	Anxiety due to lack of confidence	<p>I worried about my teaching methods because I was not confident in teaching novice nurses.</p> <p>I felt anxious about teaching novice nurses because I was not sure if I was able to communicate my ideas to them.</p> <p>I felt difficulty in teaching novice nurses because I was not able to explain the nursing skills to them so they understood.</p> <p>Because I was not sure if my knowledge was correct, I was worried that I may have told something wrong to the novice nurses.</p> <p>I am not sure if I can instruct novice nurses to become aware of the answers by themselves instead of just teaching them the answers.</p> <p>I worried that I had to give instruction to novice nurses, because I was not competent in nursing.</p>
	Difficulties in understanding the situation of novice nurses	<p>Felt difficulties in sharing the information about how well the novice nurses have mastered skills when among other staff.</p> <p>Because there were times when my assignment was different from that of the novice nurses, it was difficult for me to understand their situations. So I felt difficulties in instructing the novice nurses.</p>
	Anxiety about giving mental support to novice nurses	<p>Worries about whether I am able to instruct novice nurses with a full understanding of their feelings.</p> <p>I am not sure if I can support the stress the novice nurses feel.</p> <p>I am not sure if I can provide emotional support to novice nurses who are depressed when they compare their progress to that of their peers.</p>
	Turnover of novice nurses in the charge of the preceptors	<p>Worries that the novice nurses in my charge will leave their employment</p> <p>I was disappointed when I knew that the novice nurse I had carefully guided decided to quit nursing because I expected her to become a competent nurse.</p> <p>I am not sure whether I can fulfill my preceptor roles because the novice nurse I was in charge of quit</p>
	Burden of time spent out of work hours	<p>It is burdensome to follow up novice nurses who work slowly day after day.</p> <p>Feeling it a burden to take care of novice nurses' daily reflection outside of my work hours because I myself am busy with my duties</p> <p>I feel that novice nurses feel it a burden to be instructed outside of work hours.</p> <p>I often have to give instructions to novice nurses outside of work hours. This makes me feel it burdensome because I am not paid for overtime work.</p> <p>I often have to give instructions to novice nurses outside of work hours. This makes me feel it burdensome because I am not paid for overtime work.</p> <p>I think it burdensome to create teaching materials and check the homework for novice nurses after my regular work hours.</p>
Difficulties due to disagreements with seniors/supervisors about instruction policies	Pressure from senior nurses	<p>Experienced a hard time in instructing novice nurses because people around me told me different opinions about instruction of novice nurses</p> <p>It was difficult for me to be told by other nurses that the novice nurses in my charge were behind the novice nurses other nurses were in charge of.</p>

Table 2 (Continued)

Category	Subcategory	Description of Difficulties
Difficulties due to disagreements with seniors/supervisors about instruction policies	Pressure from senior nurses	<p>It was difficult for me to be urged by senior nurses to instruct my novice nurses as scheduled because the instruction I had planned did not go as planned.</p> <p>I know that there are things I do not know as a preceptor, but I had a hard time when senior nurses questioned me about my teaching methods.</p> <p>I was disappointed when a senior nurse told me that my teaching method was poor by pointing out what the novice nurse in my charge failed to do what she was instructed to do.</p> <p>There was a traditional workplace belief that the opinions of senior nurses are absolute, and I had difficulties in instructing novice nurses due to difference in instruction policies with superiors.</p>
	Disagreements with seniors/supervisors about instruction goals	<p>Feeling uncomfortable instructing novice because the situation of on-site novice nurse instruction did not match the ideas of my supervisor, and it took time to set goals for the novice nurses.</p> <p>I always made efforts in instructing novice nurses but the novice nurses in my charge did not progress as planned. I was disappointed when I was told to lower the goal I set for my novice nurses.</p> <p>It is natural that there are individual differences in the development of skills of novice nurses, but my superior told me to teach the novice nurses not to be behind other novice nurses. I had difficulty in teaching them.</p>

Discussion

1. Characteristics of Participants

The preceptors in this study were midcareer nurses who practice nursing based on traditionally accepted moral principles, assessing situations as a whole rather than separate from the perspective of an isolated element, like competent nurses, which is the level at which nurses can conduct their own nursing practices based on long-term goals and plans from their clinical experience (Benner, 2005). This definition suggests that nurses who can supervise novice nurses have practical skills to assume important roles such as leadership roles and instructing novice and other junior nurses.

2. Difficulties in Instructing Novice Nurses as Perceived by Preceptors

Difficulties in instructing novice nurses as perceived by preceptors were comprised of three categories: “Difficulties related to the attitude of novice nurses when being instructed,” “Difficulties in performing the role of preceptor,” and “Difficulties due to disagreements with seniors/supervisors about instruction policies.” The results in the present study showed that preceptors had difficulties with novice nurses, with themselves, and with others around them, such as their seniors and supervisors. These difficulties were similar to the results of a previous study identifying difficulties which newly appointed preceptors experienced in instructing novice nurses (Hirano & Koyama, 2018). The present study discusses the categories identified as difficulties in instructing novice nurses and examines measures to support preceptors who have difficulties in instructing novice nurses.

1) Difficulties related to the attitude of novice nurses when being instructed

The analysis in this study showed that preceptors felt difficulties towards the attitude of novice nurses being instructed. These difficulties arose from a lack of motivation to learn and poor attitudes in towards learning. Gregg et al. (2017) reported that novice nurses do not know what needs to be done and how to do things during the transition from being a student to performing as a nurse, and cannot study as they wish in the new unfamiliar work environment. The attitude of novice nurses when being instructed may be affected by these learning obstacles. If preceptors know the background of the motivation to learn and the way of learning of novice nurses, they may have opportunities to think about support for novice nurses to improve the motivation of the novice nurses to learn and guide their way of learning. For this reason, it is necessary to provide support for preceptors to be able to assist novice nurses to learn.

2) Difficulties in performing the role of preceptor

The analysis in this study showed that preceptors felt difficulties in performing the role of preceptor including the interaction with the novice nurses. A previous study reported that preceptors feel difficulties in instructing novice nurses and find it burdensome because preceptors have no confidence in their instruction due to their own lack of knowledge and teaching experience (Ito & Munakata, 2016). This could be because much of the instruction provided during daily duties is related to nursing activities such as assessment and care in utilizing nursing skills, this then causing difficulties in relation to the practical nursing skills of the preceptors (Yamakawa & Miyazato, 2023). It is important to train preceptors as well as novice nurses by improving educational support for preceptors. If preceptors can then deal with novice nurses with confidence, this may be helpful for the preceptors to develop themselves.

3) Difficulties due to disagreements with seniors/supervisors about instruction policies

Preceptors felt difficulties when they faced opinions and pressures from senior nurses about the degree of development of novice nurses and the teaching methods, and there were also differences in instruction policies and goals between preceptors and their supervisors. A previous study reported that it may be difficult for nurses in charge of performing preceptor roles with 2 to 3 years of working experience as nurse to be able to communicate and express their opinions to their seniors (Hirano & Koyama, 2018). Further, the educators of novice nurses have not been able to interact with preceptors as well as novice nurses although such interaction is supposed to be important. It has been reported that preceptors find it difficult to fully understand the instruction policies and the teaching plans established based on these for the entire team (Gregg, Yagi, & Tamada, 2016). These findings suggest that opinions and advice from senior nurses and supervisors may create difficulties for preceptors when they feel difficulties in performing their roles. Together these show the necessity to create an environment where preceptors can ask advice from their seniors and supervisors without hesitation and obtain support for the instruction of novice nurses. It is also necessary to provide organizational support so that preceptors can provide unified instructions for novice nurses by having seniors and supervisors understand the instruction policies of preceptors.

Conclusions

As difficulties in instructing novice nurses, as perceived by preceptors, the following difficulties were identified: difficulties related to the attitude of novice nurses when being instructed, difficulties in performing the role of preceptor, and difficulties due to

disagreements with seniors/supervisors about instruction policies. The findings suggest the necessity to provide support for preceptors to improve their nursing practice skills and educational skills to educate novice nurses with confidence. The whole of the nursing organization, including senior nurses and nursing managers, need to establish education policies and support arrangements for preceptors of novice nurses. Further studies are needed to elucidate how the difficulties perceived by preceptors affect their instruction based on the results of this study by conducting a questionnaire survey with preceptors using an originally developed scale to evaluate the difficulties of preceptors.

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References

- Benner, P. (translated by Ibe, T.) (2005). Novice to Expert – Benner's Theory of Nursing, New Translation. Igaku-Shoin Ltd. Tokyo, pp21-25.
- Gregg, M. F., Wakisaka, T., & Hayashi, C. (2017). Newly Graduated Nurses' Experiences of Learning to Learn at Hospitals. *J.Jpn.Acad.Nurs.Ed.*, 27(1).
- Gregg, M. F., Yagi, K., Tamada, M. (ed.). Support for Clinical Nurse Educators in Teaching Newly Hired Nurses. *Bulletin of Kobe City College of Nursing*, 20, 5-13.
- Hirano, R., & Koyama, K. (2018). Novice preceptors' difficulties with clinical instructions for newly graduated nurses, their behaviors and support needs to overcome these difficulties. *Journal of Japan Society of Nursing Research*, 41(5), 971–981.
- Ito, M., & Munakata, C. (2016). Thoughts of senior nurses involved in novice education (in Japanese). 46th Japan Nursing Association Journal Collection, *Nursing Management*, 100-102.
- Itomine, I., Suzuki, E., Kanoya, Y., & Sato, C. (2006). Factors related to reality shock experienced by new graduate nurses at university hospitals. *Journal of Japanese Society of Nursing Research*, 29(4). 63-70.
- Komiyama, Y., Mizusawa, C., & Okamura, N. (2016). Current status and issues of preceptor system (in Japanese). *Activity Report of Niigata Research Institute of Nursing*, 27, 59-62.
- Ministry of Health, Labour and Welfare. (2011). Training guidelines for new nursing staff (in Japanese). <https://www.mhlw.go.jp/stf/houdou/2r985200000128o8att/2r985200000128vp.pdf> (Accessed on October 28, 2022).
- Ministry of Health, Labour and Welfare. (2014). Training guidelines for new nursing staff (Revised edition) (in Japanese). https://www.mhlw.go.jp/file/06-Seisakujouhou-10800000-Iseikyoku/0000049466_1.pdf (Accessed on October 28, 2022).
- Suzuki, E., Kanoya, Y., Kitaoka-Higashiguchi, K., & Sato, C. (2005). Workplace environment, assertiveness and burnout risk among novice nurses in university hospitals. *Journal of Japanese Society of Nursing Research*, 28 (2), 89-99.
- Yamakawa, W., & Miyazato, T. (2023). Difficulties senior nurses guidance in their daily work to new graduate nurses and methods of coping with these difficulties (in Japanese). *Journal of Okinawa Prefectural College of Nursing*, 24, 1-14.