# The transition and integration journey of foreign-trained nurses into a challenging trauma care environment

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Supervisors and

# Background

Most foreign-trained nurses practice in different or new nursing fields once they move to Saudi Arabia.

Foreign-trained nurses need to adapt to the Saudi's unique culture and the magnitude of traumatic conditions in the country.

Nurses at emergency and trauma departments are at higher risk of being exposed to traumatic events (TE), which may lead to Post Traumatic Stress Disorder (PTSD).

Foreign-trained nurses who changed their area of practice to trauma care face more challenges on the ground.

Consequently, practicing trauma nursing in Saudi Arabia is associated with more challenges to all healthcare providers and foreign-trained nurses in particular.

# Objectives

Nurses from different parts of the world move to Saudi Arabia to join a long-term job or step through it to other developed countries. Part of this move, nurses change their area of practice to other specialties, such as emergency and trauma care.

- To explore the journey of foreign-trained nurses in transitioning to a new country and area of nursing practice.
- To explore the foreign-trained nurses' integration experience in delivering trauma care at a major trauma hotspot.
- To formulate recommendations for practice development and future research.

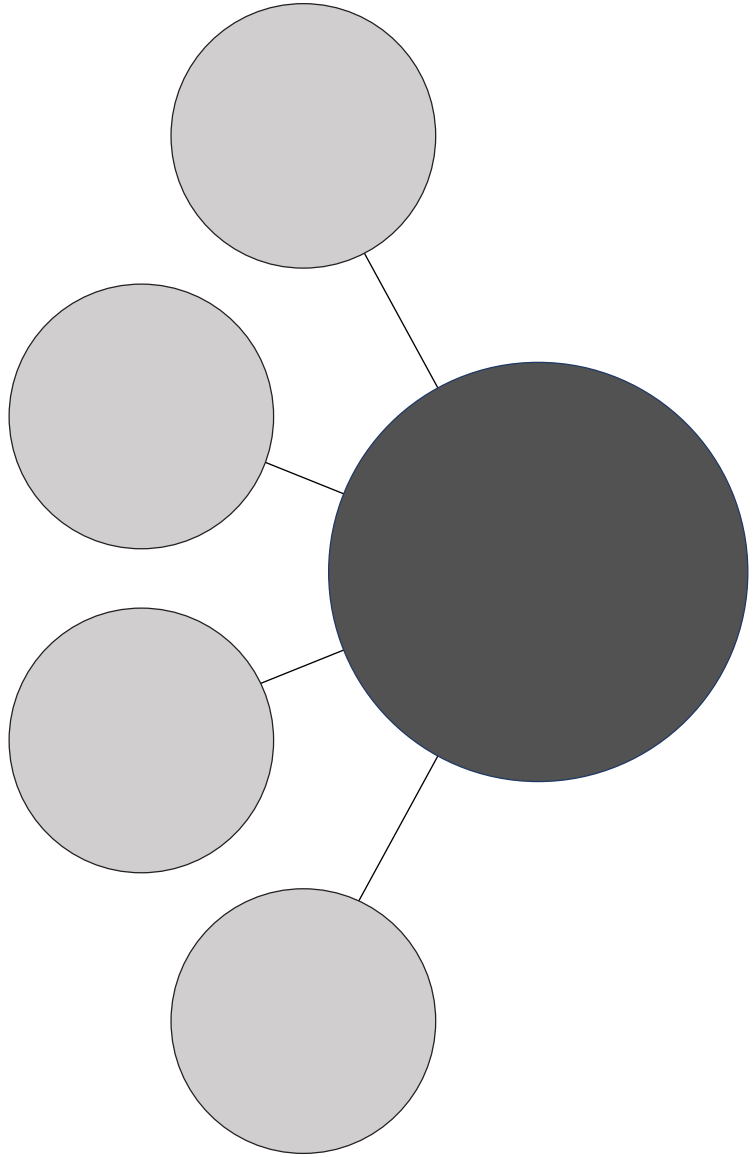
# Methods

- The lived experiences of foreign-trained registered nurses were explored, structured and described using a descriptive phenomenological approach underpinned by Edmund Husserl's (1859-1938) phenomenology.

- Level-I major trauma centre in Saudi Arabia.

- In-depth, unstructured, one-to-one interviews were utilised to gather data about the participants' journey of transition through real-life examples and stories from their own experience.

- Data were analysed using Colaizzi's (1978) descriptive phenomenological method.



# Findings

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|---|---|
| Burdensome beginning | Concise agreement on progression and growth requirements |
| Sequential steps | Impact on the personal, knowledge, skills, and attitude levels |
| Chronological order | leveraging acquired competencies on the ground |
| Acquiring competence with time and experience | Turning into a proficient version of self |

# Discussion

The study was one of the first to explore the experience of foreign-trained nurses in relocating to an extreme trauma hotspot, in which the nurses had to adapt to a new country and a novel field of practice.

The unique Saudi culture and the magnitude of traumatic conditions in the country made the journey more challenging.

The study showed how the nurses acquired competence and strength throughout the journey by consistent exposure on ground.

The key to being an expert lies in the exposure to experiences that enable the nurse to develop an intuitive grasp of the situation (Benner,1984)

Experience was the key for moving forward and mastering the new role.

Exposure was found to be a powerful element, which helped the nurses to build knowledge and skills from the field.

# Implications

Foreign nurses face various challenges that require further attention to provide them with proper preparations and education in prior to their arrival and throughout their journey.

The outcome of this study is important for enhancing policies related to foreign-trained nurses' recruitment and retainment .

Employers in countries with large number of foreign nurses need to invest in improving the journey of those nurse by focusing on pre and post arrival experiences.

The smooth integration of the foreign-trained nurses within existing care systems can lead to higher standards of care.

The study focused on the experiences of foreign-trained nurses in relocating to a new country and practicing in an extreme area of practice for the first time.

Further research in other areas such as critical care would provide in-depth exploration and testing of the transition steps presented in this study.

# Acknowledgment

I would like to express my appreciation to my academic supervisors and

# Thank You

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# Exploring how parents of children with life-limiting conditions seek and access support for themselves.

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RESEARCH

# Exploring how parents of children with life-limiting conditions seek and access support for themselves: parental and organisational perspectives

- Aim: To explore parents experience in seeking support for their own wellbeing.
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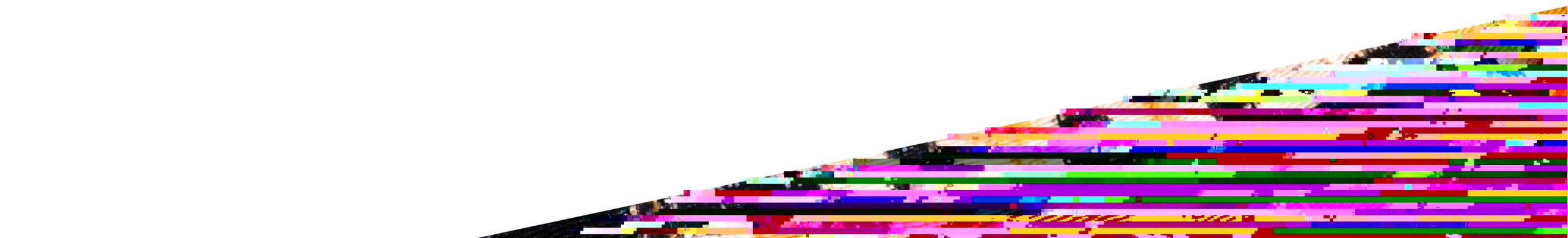
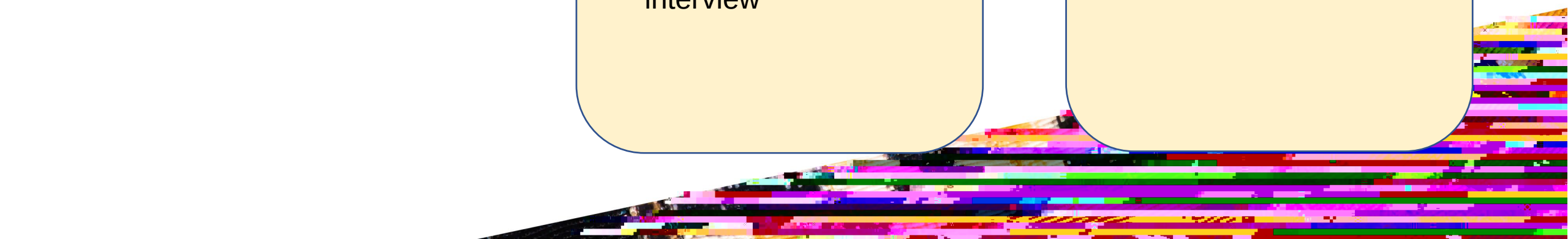


- Semi structured interviews
- Parents and palliative care staff
- Telephone or Zoom
- 50 minutes –3 hours per interview

- Transcribed by hand onto



# Ethics and recruitment process

Began my PhD in September 2019

Initial planning, devising research question and planning methodology and methods

Scoping literature review (published Aug 2021)

Gaining ethics approval

DMU Ethics – HLS Faculty Research Ethics Committee

No IRAS

20th Feb 2020 – first submission

Ethics approval! 14th May 2020 but suspends face-to-face data collection

Covid-19

Resubmit to Ethics for virtual data collection

Approval received 20th October 2020

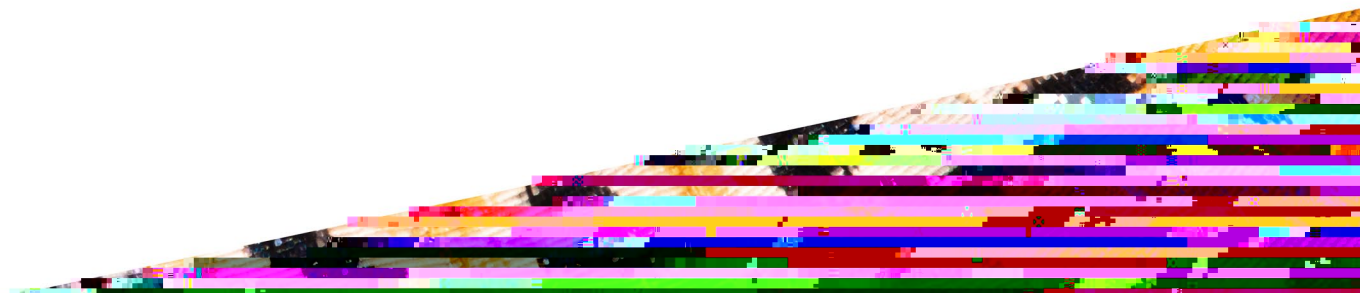
Start recruiting, networking, making virtual contacts

First interview July 2020

# Publication

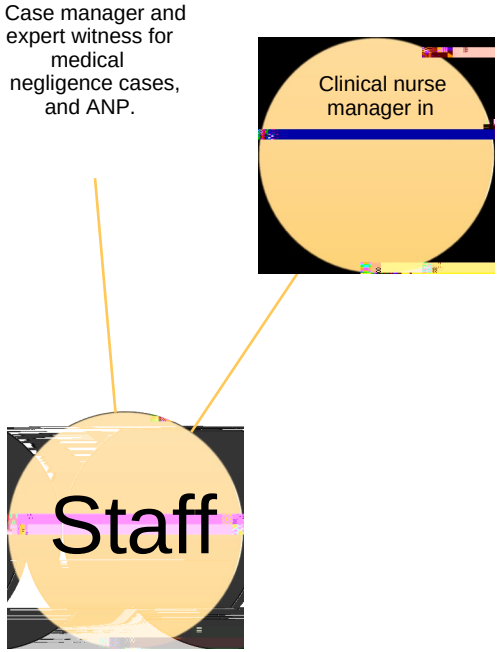
Oakley, Dunbar and De Vries (2021) Parent-led strategies supporting personal well-being when caring for a child with a life-limiting condition: A scoping review. Journal of Child Health Care.

https://doi.org/10.1177/13674935211026122



# Part

# Participants



# Data collection during a pandemic– personal experience

- Didn’t know what to expect to begin with
- Participants very generous with their time
- Couldn’t observe their environment
- Asking difficult questions
- Support through emotive conversations
- Therapeutic for participants
- Pragmatics – saved time and money
- Personal safety
- Zoom more effective than telephone
- Would highly recommend virtual interviewing

# Transcribing

- Microsoft word, by hand.
- Time consuming! 8-10 hours per interview.
- Dictation software can speed things up and slow things down.
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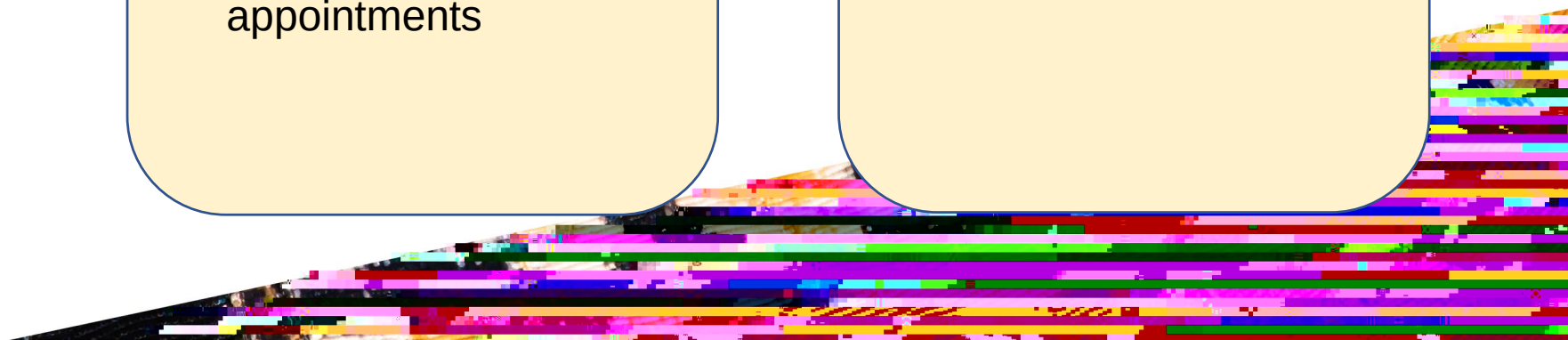
# Findings: Living through a pandemic and experiencing Covid-19

Parents

- Fear
- Hibernation
- Spending more time as a family
- Less in person appointments
- Cancelled therapies
- Increased burden of care
- Rejecting outside staff
- Parents not attending own health appointments

Staff

- Adapting current roles
- Keeping up to date with guidance
- Changes to discharge from hospital procedures
- Hospices: more end of life and less respite availability
- Staff off shielding
- Emotional toll
- Supporting other staff



# Findings: Experiencing judgement

If your child is disabled and you're fighting for your child it's seen as being a troublemaker… or you're being too pushy or too difficult." (MO01: 719+)

"There's a lot of gaslighting from professionals to parents. Making you feel like you're crazy for wanting something that is a basic need. Making you feel like that's so unjust and ludicrous. I've had care professionals laugh at me for asking if things are available, or if things are accessible, or if we can get help or whatnot." (MO03: 335+)

I mean lots of parents say all the time you're walking a tightrope between making

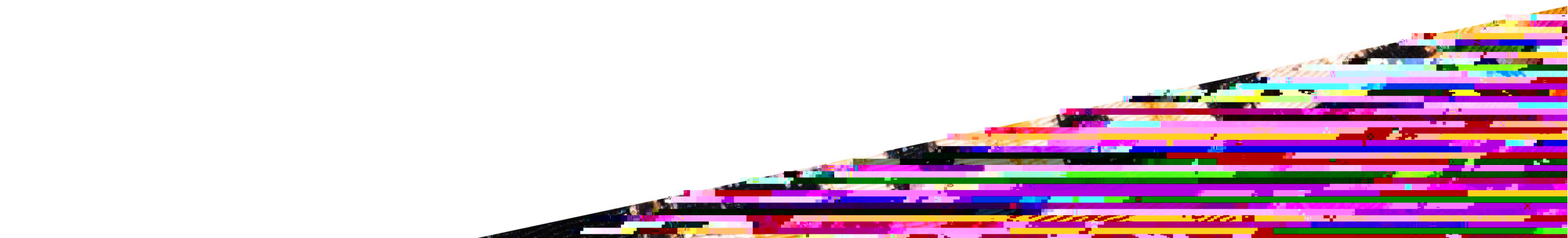
# Findings:
# Skewed boundaries

"The second boy I worked with in the team, he became my life in all honesty. I worked so many days a week with him. I was probably doing…at one point I know I was doing at least 6 shifts a week in there because I was putting bank shifts on top of my normal working week to cover the respite that was needed for him… And my attachment to him, I, I could feel it growing. I knew that this boy was meaning a lot to me and what was going on with him was important to me. His family became important to me. I never would contact them when it was my days off. But it didn't mean that I wasn't thinking about them on my days off." (Nurse 7)

# Findings: Protecting self

“I feel we’ve kind of lost that support structure for staff” (441). “I’ve kind of felt at times when I was on the other side that there wasn’t enough support for the nurses sometimes. And we go through these really challenging changes and you don’t know who you can speak to. Or you start to feel overwhelmed…” Nurse 7

“But I think, maybe it’s a way I protect myself is that you try not to get overly, I suppose the word is overly friendly. You need to be professionally friendly.” Nurse 8



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