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Newly Graduated Nurses´ Perception Of Competence, Critical Thinking And Research

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Abstract
The transition from nursing education to clinical practice is a critical period for newly graduated nurses, influencing their perceptions of competence, critical thinking, and research engagement. This descriptive cross-sectional study examined the experiences of ten new nurses at Kalba Hospital, UAE, using a structured questionnaire. Participants reported moderate to high competence levels, particularly in patient care and adaptability. Critical thinking scores indicated strength in systematic analysis but highlighted areas for growth in flexibility and decision-making. Research engagement was limited by time constraints and access to resources. The findings emphasize the need for targeted mentor-ship, enhanced training, and supportive organizational practices to bridge gaps and foster professional development.
Key Words: Nursing . New Nursing , Competence , Nursing Competency , Research , Critical Thinking

Introduction and background

The competence of newly graduated nurses has been a long-standing interest of mine. Throughout much of my career, I have been involved in nursing education, working closely with both nursing students and experienced nurses in my capacity as a supervisor. I had the chance to engage with newly graduated nurses joining as new members, as well as their more seasoned colleagues who were already members. Nursing education has always been a key focus, and during my time as a program coordinator for nursing education at Kalba Hospital, I was responsible for overseeing the entire nursing curriculum. This role allowed me to reflect on the educational process and, more importantly, to consider how these newly graduated nurses experienced their first year in practice, assessing their perceived competence as they entered a dynamic healthcare system marked by constant change and the integration of advanced technology.

Newly graduated nurses are expected to function efficiently in technically advanced environments while simultaneously providing care that makes patients feel valued as individuals, rather than treated as objects (Willman, A et al. (2020)). Both medical and nursing practices have grown more complex, with traditional professional boundaries becoming less defined compared to the past (World Health Organization 1997, 2006). These nurses must navigate and meet the expectations and demands of healthcare authorities, various health professionals, nursing leaders and colleagues, as well as their own personal expectations.

he transition from nursing student to practicing professional is a complex journey, filled with both challenges and rewards. As described by Willman, A et al. (2020), student nurses often enter the profession with high ideals focused

on providing patient-centered, holistic, and evidence-based care. However, upon graduation, they encounter professional and organizational constraints such as covert workplace rules and staff shortages, which make it difficult to fully implement these ideals in practice.

Some researchers highlights that newly graduated nurses often find themselves in a liminal space, not fully belonging to either the academic or professional realms. This transitional phase is further complicated by the need to adapt to the specific workplace environment, as described by Song et al (2020). Gaining access to the workplace context and building competence often depends on interactions with experienced colleagues,

Moreover, newly graduated nurses are expected to integrate themselves into interdisciplinary teams, handle chaotic situations, and make sound, defensible decisions). Yet, despite the expectation to conform to established norms and avoid challenging the status,

Problem statement

When exploring new nurses' perception of competence, research and critical thinking, several key factors come into play. Transitioning from nursing school to clinical practice can be a challenging period, as novice nurses shift from theoretical learning to hands-on patient care. New nurses face a steep learning curve as they transition from student to practicing nurse. Some challenges include:

- **High patient acuity and workload:** New nurses may find themselves responsible for multiple high-needs patients, which can affect their confidence and ability to think critically.
- **Time management:** New nurses often struggle with managing time effectively, which can impact both their perceived competence and critical thinking capabilities.
- **Emotional and mental stress:** The transition to a full-time clinical role can be emotionally taxing, particularly when dealing with patient deaths, difficult cases, or the pressures of meeting expectations in a high-stakes environment.
- **Fear of failure:** New nurses may fear making mistakes, which can inhibit their willingness to make independent decisions and rely on critical thinking.

Purpose of The Study

This study is conducted to assess the perception of new gradate toward competence, critical thinking and research while shedding light on the commonly encountered problems during this process as perceived by the nurses. In this direction, the study aims to improve their learning curve. Simulation-based training, critical thinking workshops, and clinical decision-making.

Aims

· Overall Aim:

· a) To study newly graduated nurses' perceptions of competence, critical thinking, and research utilization.

b) To identify predictors for research use and perception of competence.

· Specific Aims:

· Aim 1: To illuminate how recently graduated nurses experience their first year as a nurse.

Aim 2: To describe research utilization among newly graduated nurses and explore critical thinking dispositions and other individual and contextual factors as possible predictors for research use.

Aim 3: To describe newly graduated nurses' perceptions of competence and identify possible predictors influencing their perception

Significance of the study

The significance of this study new nurses' perceptions of competence, research, and critical thinking lies in its potential to improve nursing practice, patient outcomes, and the overall healthcare system. Here are the key reasons why such research is important:

1. Improving Patient Care and Safety

- **Competence and critical thinking directly impact patient safety:** Nurses who feel more competent and are able to think critically are better equipped to make sound clinical decisions, preventing errors, and ensuring high-quality patient care. The transition from novice to competent nurse is crucial, as inexperienced nurses may struggle with complex care scenarios, making this research critical for identifying gaps in knowledge and skill.
- **Preventing medical errors:** New nurses who lack confidence or critical thinking skills may be more prone to making mistakes, such as medication errors or delays in recognizing patient deterioration. Understanding their perceptions can help design interventions to reduce such risks.

2. Supporting New Nurses During Transition

- **Easing the transition from school to practice:** The gap between nursing education and real-world clinical demands can be daunting for new nurses. By understanding how new nurses perceive their own competence and critical thinking abilities, educators, and healthcare organizations can tailor orientation, training, and mentoring programs to better meet their needs.
- **Reducing burnout and turnover:** Many new nurses experience high levels of stress and burnout during their first year of practice, leading to high turnover rates. Research in this area can help identify ways to improve new nurse retention by addressing factors that contribute to feelings of incompetence, frustration, or inadequate support in developing critical thinking skills.

3. Enhancing Nursing Education and Training Programs

- **Closing the theory-practice gap:** Nursing schools provide foundational knowledge, but the real challenge lies in translating that knowledge into clinical competence and critical thinking in practice. By investigating how new nurses perceive their readiness for practice, educational institutions can revise curricula, introduce more simulation-based learning, and foster critical thinking development early in nursing education.
- **Developing targeted interventions:** Research can inform the creation of specific strategies to strengthen critical thinking, such as improved simulation scenarios, problem-based learning, and reflective practice exercises. This helps new nurses handle complex clinical situations with greater confidence.

4. Improving Organizational Outcomes

- **Higher staff retention and satisfaction:** New nurses who feel competent and confident in their decision-making abilities are more likely to be satisfied with their job, contributing to better staff retention rates. This can reduce organizational costs related to recruiting and training replacement staff, as well as improve overall team morale.
- **Fostering a culture of continuous learning:** Encouraging new nurses to engage in research and critical thinking contributes to a culture of evidence-based practice, which is essential for adapting to advances in healthcare. This culture enhances both individual and collective performance within the healthcare organization.

5. Advancing Nursing Research and Evidence-Based Practice

- **Promoting a research mindset:** Encouraging new nurses to engage in research as part of their professional practice fosters evidence-based care. Understanding their perceptions of research skills can lead to more focused efforts on incorporating research literacy into nursing practice.
- **Supporting lifelong learning:** Critical thinking is closely linked to ongoing professional development and the ability to apply research in clinical settings. Nurses who develop strong critical thinking skills are more likely to remain current with new evidence and incorporate it into patient care, improving healthcare outcomes.

6. Contributing to Policy Development

- **Informing policy and practice standards:** Research on new nurse perceptions can provide valuable data to inform healthcare policies related to nurse education, onboarding, and professional development. This can lead to improved standards for nurse competencies, continuing education requirements, and resource allocation in healthcare settings

Literature Review

In recent years , literature exploring new nurses' perceptions of competence, research, and critical thinking has gained significant attention due to the evolving demands of healthcare systems and the increasing complexity of patient care. This review synthesizes key studies from the past few years, highlighting current trends, challenges, and interventions that impact new nurse development.

1. Competence in New Nurses

Competence remains a critical area of focus in nursing, as it directly impacts patient safety and quality of care. Research between 2020 and 2024 emphasizes the challenges new nurses face as they enter clinical practice.

Transition to Practice Programs: A notable study by Ke et al. (2022) explored the effectiveness of structured transition programs, such as nurse residency programs, in enhancing new nurses' perceived competence. Their findings suggested that these programs improve self-confidence, clinical judgment, and the ability to manage complex patient care. Ke et al. highlighted that ongoing mentorship within these programs was a key factor in competence development.

COVID-19 and Nurse Competence: The COVID-19 pandemic introduced new challenges for nurse competence. Studies like that of Xu et al. (2021) reported that newly licensed nurses experienced heightened stress and a sense of inadequacy during the pandemic due to the unpredictability of the crisis, increased patient loads, and lack of preparedness for pandemic-level care. This study emphasized the need for pandemic-specific training to bolster new nurses' competence in emergency situations.

Self-Efficacy and Clinical Confidence: Research by Yang and Kim (2023) showed that new nurses' self-efficacy—belief in their own competence—was strongly associated with their clinical confidence. This longitudinal study found that new nurses who engaged in regular reflective practice and received feedback from peers and supervisors exhibited higher levels of perceived competence. Self-efficacy was also linked to how well nurses adapted to high-pressure environments such as emergency care units.

2. Critical Thinking Development

Critical thinking is vital for effective clinical decision-making, and recent studies highlight how new nurses develop and perceive their critical thinking abilities.

Simulation-Based Education: A growing body of research advocates for simulation-based learning as an effective tool for developing critical thinking in new nurses. In their study, Smith et al. (2021) found that high-fidelity simulation exercises significantly enhanced new nurses' ability to apply theoretical knowledge in clinical settings, thus improving critical thinking and problem-solving skills. The study demonstrated that simulated scenarios provide safe spaces for new nurses to practice making decisions without the fear of real-life consequences.

Critical Thinking and Decision-Making Under Pressure: A 2023 study by Silva et al. focused on critical thinking in high-stress environments, particularly in critical care units. The researchers found that new nurses often experience decision paralysis when dealing with rapidly deteriorating patients. This study recommended incorporating stress management techniques into critical thinking training to help nurses remain calm and confident when making time-sensitive decisions.

Impact of Preceptorship: Several studies published during this period emphasized the role of preceptorship in fostering critical thinking. In a comprehensive review by Park and Choi (2022), preceptor-led reflection sessions were shown to improve new nurses' critical thinking abilities by encouraging them to assess their own decision-making processes and consider alternative approaches. Preceptors provided feedback that helped novice nurses develop analytical skills and build confidence in their judgments.

3. Engagement in Research and Evidence-Based Practice

New nurses' involvement in research and evidence-based practice (EBP) is essential for maintaining high standards of patient care. Recent literature has focused on how to increase new nurses' engagement with research and EBP in clinical settings.

Barriers to Research Participation: According to Lim et al. (2021), new nurses perceive several barriers to engaging in research, including lack of time, inadequate research training, and limited access to research resources. This study highlighted that while new nurses recognize the importance of EBP, they often feel that they lack the practical skills to critically appraise research or apply it in clinical practice. Lim et al. recommended that healthcare organizations provide dedicated time for research activities and mentorship from experienced nurse researchers.

Integration of Research into Nursing Curricula: A 2022 study by Lopez and Hernandez explored the integration of research education in nursing programs. The study found that new nurses who had exposure to research methods during their education were more likely to engage in EBP once in practice. Lopez and Hernandez proposed incorporating more research-based projects and case studies into undergraduate nursing curricula to better prepare new nurses for the application of research in clinical settings.

Technology and EBP: In their 2023 study, Wilson et al. examined how digital platforms and apps are being used to support EBP in nursing. Their findings suggested that new nurses are more likely to engage with research when they have access to user-friendly, evidence-based guidelines through mobile apps. These digital tools offer new nurses immediate access to research findings, making it easier for them to incorporate the latest evidence into their clinical decision-making.

4. Challenges and Interventions for New Nurses

The literature from 2020 to 2024 also highlights several challenges faced by new nurses in their development of competence, critical thinking, and engagement with research.

Workplace Stress and Burnout: The continued pressures of understaffing and high patient acuity have been linked to burnout in new nurses. A study by Lee et al. (2023) revealed that new nurses who worked in high-stress environments without adequate support reported lower levels of perceived competence and critical thinking ability.

Lee et al. stressed the importance of creating a supportive work environment that prioritizes mental health, resilience training, and regular debriefing sessions to help new nurses cope with stress.

Diversity and Inclusion: Recent research has also highlighted the importance of cultural competence and diversity in nursing education and practice. A 2024 study by O'Neill et al. examined how new nurses perceive their competence in providing care to diverse patient populations. The study found that new nurses often feel unprepared to address cultural differences and social determinants of health in their practice. O'Neill et al. suggested that nursing programs integrate cultural competence training to ensure new nurses can provide equitable and inclusive care.

5. Mentorship and Structured Learning Environments

Mentorship and structured learning environments continue to be crucial in supporting the development of new nurses.

Structured Residency Programs: Research by Taylor et al. (2021) supported the idea that structured nurse residency programs are one of the most effective strategies for promoting new nurse development in competence and critical thinking. The study noted that programs with longer durations (up to 12 months) were particularly effective in improving new nurses' confidence and clinical decision-making abilities.

Peer Support and Team Collaboration: A 2023 study by Mitchell et al. explored the role of peer support in new nurse development. The study found that new nurses who participated in team-based learning and collaborated with peers felt more confident in their critical thinking and competence. Peer support provided an additional layer of learning, as new nurses shared experiences and insights, further developing their problem-solving skills.

Knowledge Gap

Despite significant research into new nurses' perceptions of competence, research engagement, and critical thinking, several knowledge gaps remain. Addressing these gaps can provide deeper insights and lead to more effective strategies for supporting new nurses during their transition to clinical practice. The following are key areas where further research is needed:

1. Longitudinal Studies on Competence and Critical Thinking Development

- **Gap:** Many studies focus on new nurses' competence and critical thinking within the first year of practice, but few investigate how these attributes evolve over several years. Understanding how competence and critical thinking develop beyond the initial transition phase would provide valuable insights into how new nurses become proficient and the factors that sustain or hinder this growth.

2. Impact of Pandemic-Specific Training on Competence and Critical Thinking

- **Gap:** The COVID-19 pandemic has highlighted significant challenges for healthcare systems, but there is limited research on how pandemic-specific training (such as crisis management, infection control, and emergency care) influences new nurses' perceptions of competence and critical thinking.

3. Role of Emotional Intelligence in Perceived Competence and Critical Thinking

- **Gap:** Emotional intelligence (EI) is increasingly recognized as an important factor in nursing practice, particularly for managing stress, patient communication, and decision-making under pressure. However, there is a lack of research on how EI influences new nurses' perceptions of their own competence and critical thinking abilities.

4. Barriers to Research Engagement in Diverse Clinical Settings

- **Gap:** While some studies have examined barriers to research engagement, there is limited understanding of how these barriers differ across various clinical settings (e.g., rural vs. urban hospitals, specialty care units). Moreover, little is known about how workplace culture and resource availability affect new nurses' ability to engage with evidence-based practice.

5. Effectiveness of Mentorship and Preceptorship Programs in Fostering Critical Thinking

- **Gap:** Although mentorship and preceptorship programs have been shown to support new nurses, there is a lack of standardized, evidence-based models for these programs, especially in terms of their impact on critical thinking development. The effectiveness of various mentorship structures (e.g., one-on-one vs. group mentoring, virtual vs. in-person mentorship) is also under-researched.

6. Cultural Competence and Its Role in New Nurse Perception of Competence

- **Gap:** Cultural competence is essential for providing care in increasingly diverse patient populations, but few studies have explored how new nurses perceive their own cultural competence and how it affects their overall sense of competence and critical thinking.

7. Impact of Technology on Critical Thinking and Competence

- **Gap:** While studies have explored the role of simulation in developing critical thinking, there is limited research on how other technologies—such as artificial intelligence (AI), telemedicine, and mobile health applications—affect new nurses' competence and critical thinking in clinical practice.

8. Interventions for Reducing Burnout and Enhancing Competence in New Nurses

- **Gap:** Burnout is a well-recognized problem among new nurses, often negatively affecting their perceived competence and ability to think critically. However, there is a lack of research on specific interventions designed to reduce burnout and improve competence in this population.

9. Self-Perception vs. Objective Measures of Competence and Critical Thinking

- **Gap:** Most research on new nurse competence and critical thinking relies on self-reported measures, which may not always align with objective assessments of performance. There is a need for more studies that compare self-perception with objective measures of competence and critical thinking, such as clinical simulations or standardized assessments.

10. Role of Interprofessional Collaboration in New Nurse Development

- **Gap:** There is limited research on how interprofessional collaboration influences new nurses' perceptions of competence and critical thinking. Understanding how working with other healthcare professionals (e.g., physicians, pharmacists, therapists) shapes new nurses' decision-making and confidence in clinical practice is an underexplored area.

Study design

This descriptive cross-sectional study examines New graduate nurses' perceptions of competence , critical thinking and research at Kalba hospital, an 88-bed healthcare institution in the UAE.

Participants

The targeted research population consists of 10 New graduate nurses working at Kalba hospital.

Inclusion criteria: All new graduate who completed less than 1 year.

Exclusion criteria: All other nurses , all nurses who completed one year or more.

Data collection instrument:

Data was gathered through a well-structured questionnaire administered via email as Microsoft forms survey. The survey consisted of 67 closed-ended questions with a 10 minutes completion time, categorized into four different sections. The first part consisted of 4 questions specifying the demographic variables of the participants (Age, Gender, Educational level, Working

duration at Kalba, and Department). The second part encompassed 20questions tackling NNG competence readiness. The third part to measure research readiness through

15 questions. The fourth section to measure Critical Thinking among NNGs through 18 questions.

Liker t-type questions were scored on a 5-point scale with "1 =Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree and 5 = Strongly Agree". All the questions were single-choice questions and some questions will be with true or false.

Ethical considerations

The study proposal was presented to the Ministry of Health and Prevention and approved by the Research Ethics

Committee (MOHAP/REC/2024/85-2024-F-N) Informed consent was obtained, and voluntary participation was guaranteed. The survey was anonymously completed by the nurses, and the confidentiality of the data was ensured.

Data Analysis

Data emanating from surveys were analyzed using IBM SPSS Statistics 29.0. Descriptive statistics were performed, and the association between variables was determined using the Analysis of Variance (ANOVA) test and the Chi-Square test. Likert scale answers were re-coded and regrouped into three levels: "Strongly disagree" and "Disagree" were both coded as "Disagree =1", "Neutral" coded as "Neutral=2", and "Strongly Agree" and "Agree" were both coded as "Agree=3".

Results

Data collection and Sample characteristics

Surveys were distributed to 10 nurses working at Kalba Hospital . The sample was refined according to the including and excluding criteria.

Characteristics of the participants:

Demographic characteristics:

The sample consisted of 10 (100%) females (N=10). Participants ages ranged from 22 to 23 years. 8 participants (80%) were 22 and 2 (20%) nurses were23 years of age.
Concerning the education level,10 (100%) nurses had a Bachelor of Science in Nursing (BScN) (Table 1).
Table 1
Demographic characteristics of the participants

Characteristic	n	%
Gender		
Male	0	0 %
Female	10	100%
Education Level		
BScN	10	100%
MSN	0	0%
Diploma	0	0%
Total	10	100%

Note. n indicates the frequencies, and % indicates the percentages.

Work-related characteristics:

Concerning their work at Kalba hospital,the new graduate has been distributed in the hosptal facilitates Distribution of Respondents by Unit/Department: Accident and Emergency (AE): 1 respondent Intensive Care Unit (ICU): 3 respondents Special Care Baby Unit (SCBU): 1 respondent Maternity Ward: 3 respondents Medical-Surgical Ward (MSW): 2 respondents
The Length of Employment at Kalba Hospital:More than 1 year: 6 respondents 6 months: 2 respondents More than 3 months: 2 respondents (Table 2)

Table 2
Work-related characteristics of the participants

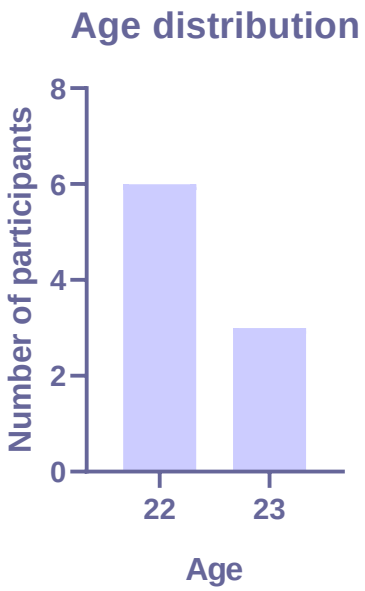
Characteristic	n	%
Working years at Kalba		
<1year	6	40%
> 6 months	2	20%
3 months	2	20%
Department		
AE	1	10%
Critical Area	3	30%
Medical Surgical Ward	2	20%
MAT Ward	3	30%
SCBU	1	10%
Total	10	100%

Note. n indicates the frequencies, and % indicates the percentages.

A new graduate perception of competence, Critical thinking, and research

Questionnaire

1- **Age:** The participants had a mean age of 22.33 years (SD = 0.5), with ages ranging from 22 to 23 years.



2- **Gender:** 100% (9/9) of the respondents were females

3- **Department:** 33.33% (n=3) worked in the maternity ward, 22.22% (n=2) in MSW, 22,22% (n=2) in the ICU, 11,11% (n=1) in SCBU, and 11.11% (n=1) in AE.

4- Working duration at Kalba Hospital: 55.56% (n=5) of the respondents worked for more than 1 year, 22.22 % (n=2) worked for more than 3 months, and 22.33% (n=2) worked for more than 6 months.

5- What is your educational level (degree): **100% (9/9) of the respondents had a Bachelor's degree.**

A Scale to measure NNG competence readiness: (5-point Likert scale)

The frequency of responses for each question is as follows:

2: Descriptive statistics:

Question	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**11**	**12**	**13**	**14**	**15**	**16**	**18**	**19**	**20**
Mean	3.111	3.556	3.000	3.333	3.222	3.444	3.333	3.333	3.444	3.222	3.333	3.444	3.333	3.222	3.333	3.222	3.444	3.000
SD	1.364	0.7265	1.323	1.118	1.093	1.014	0.8660	0.8660	0.7265	0.8333	0.8660	0.7265	1.000	1.093	1.118	1.093	0.7265	1.414

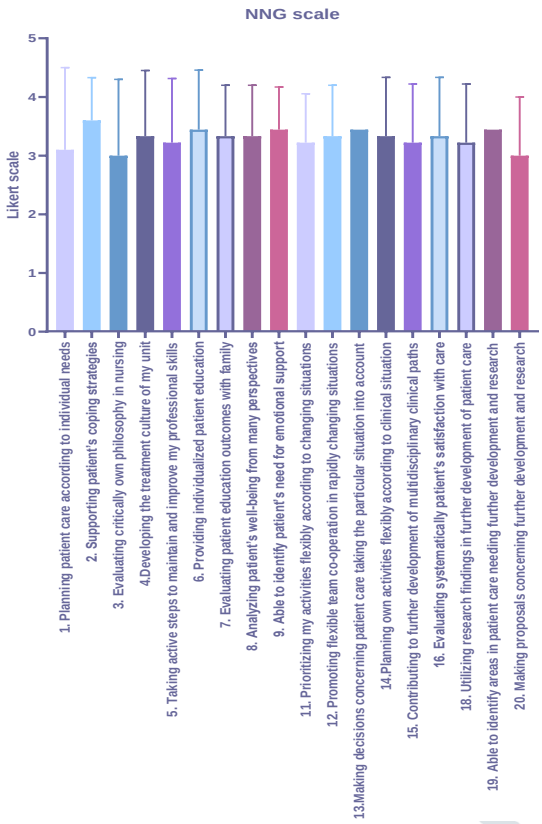
Sum up all scores:

Overall mean = sum up of all means/ number of questions= 59.329/18 = 3.30

Pooled SD = sqrt((∑(n_i - 1) * SD_i²) / ∑(n_i - 1)) = 1.02 (check excel file– NNG scale sheet–for calculations)

Result: On a scale from 0 to 4, participants rated their agreement with the statement as (0 = Never, 4 = Always) with a mean score of 3.30 (SD = 1.02).

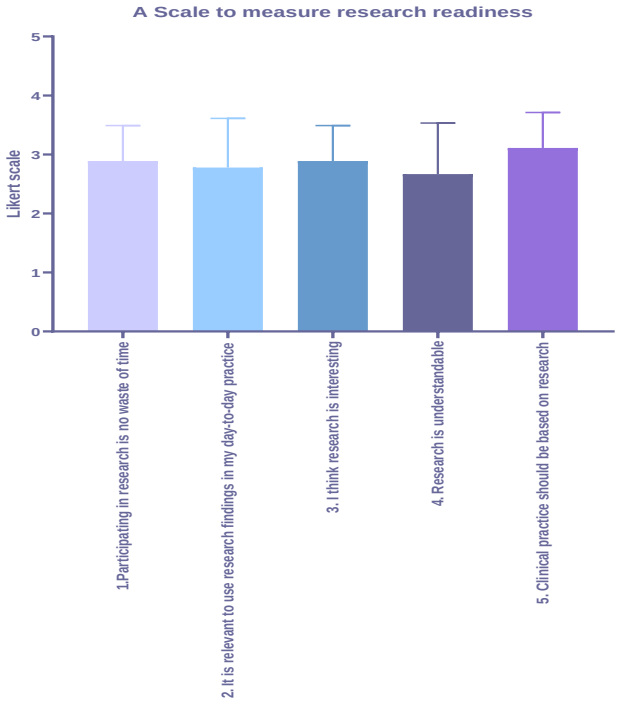
Interpretation: The mean value of 3.30 indicates that, on average, respondents tend towards the "Often =3 " or "Always=4 " categories, indicating a tendency towards agreeing with NNG competence readiness.



The SD of 1.02 suggests moderate response variability, indicating a variation from "Sometimes =2 " to "Always =4".

A Scale to measure research readiness:

A. Attitude towards research



2: Descriptive statistics:

Question	**1**	**2**	**3**	**4**	**5**
Mean	2.9	2.8	2.9	2.7	3.1
SD	060	0.83	0.60	0.87	0.60

Sum up all scores:

Overall mean = sum up of all means/ number of questions= 2.68

Pooled SD = sqrt((∑(n_i - 1) * SD_i²) / ∑(n_i - 1)) = 0.37 (check excel file)

Result: On a scale from 0 to 4, participants rated their agreement with the statement as (0 = strongly disagree, 4 = strongly agree) with a mean score of 2.68 (SD = 0.37).

Interpretation:

The mean value of 2.68 indicates that, on average, respondents tend towards the "Agree=3 " category, indicating a tendency towards agreeing with research readiness.

The SD of 0,37 suggests low response variability, indicating a variation from "Agree =3 " to "Neutral =2".

B. **Availability and support to implement research findings**

2: Descriptive statistics:

Question	**1**	**2**	**3**	**4**
Mean	2.9	3.0	3.0	3.2
SD	060	0.50	0.50	0.44

Sum up all scores:

Overall mean = sum up of all means/ number of questions= 3.025

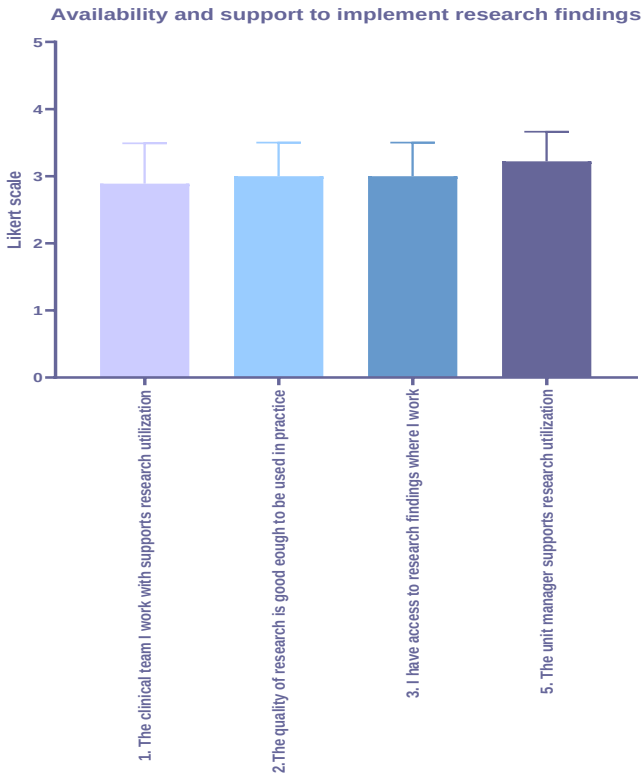
Pooled SD = sqrt((∑(n_i - 1) * SD_i²) / ∑(n_i - 1)) = 0.51 (check excel file)

Result: On a scale from 0 to 4, participants rated their agreement with the statement as (0 = strongly disagree, 4 = strongly agree) with a mean score of 3.025 (SD = 0.51).

Interpretation:

The mean value of 3.025 indicates that, on average, respondents tend towards the "Agree=3 " category, indicating a tendency towards agreeing with research readiness.

The SD of 0,51 suggests low response variability.



C. **Research use in daily practice**

2: Descriptive statistics:

Question	**1**	**2**	**3**	**4**	**5**
Mean	3.0	3.0	2.6	3.0	3.0
SD	0.5	0.5	1.0	0.5	0.5

Sum up all scores:

Overall mean = sum up of all means/ number of questions= 2.92

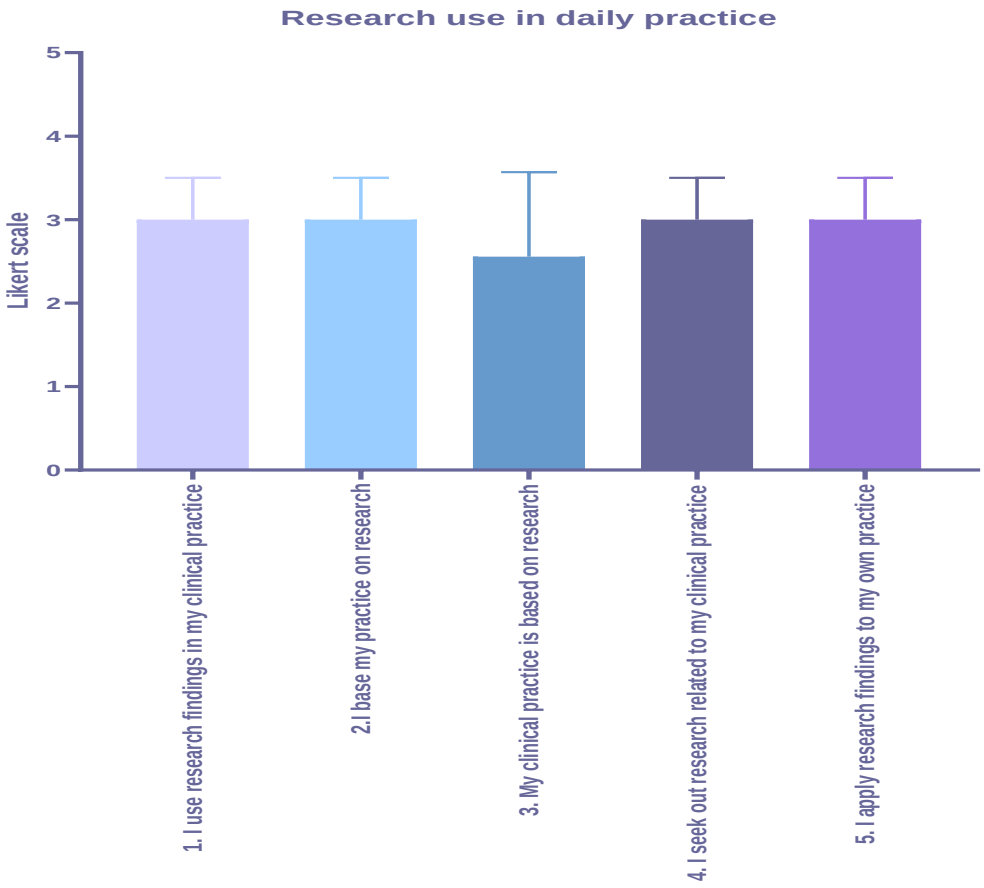
Pooled SD = sqrt((∑(n_i - 1) * SD_i²) / ∑(n_i - 1)) = 0.63 (check excel file)

Result: On a scale from 0 to 4, participants rated their agreement with the statement as (0 = strongly disagree, 4 = strongly agree) with a mean score of 2.92 (SD = 0.63).

Interpretation:

The mean value of 2.92 indicates that, on average, respondents tend towards the "Agree=3 " category, indicating a tendency towards agreeing with research readiness.

The SD of 0,63 suggests low response variability

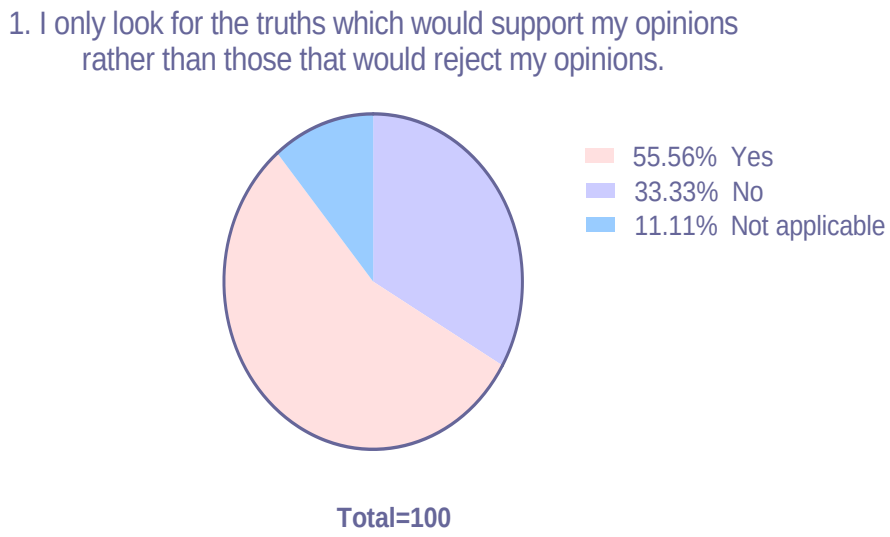


1 **A Scale to measure Critical Thinking among NNGs:**

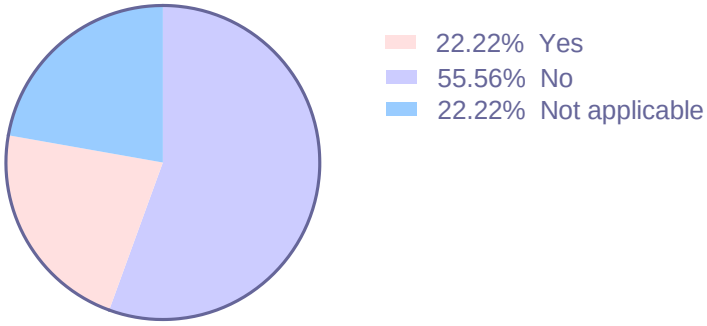
Systematic analysis (Q1-Q5)

Thinking within the box (Q6-Q13)

The frequency of responses for each question is as follows:

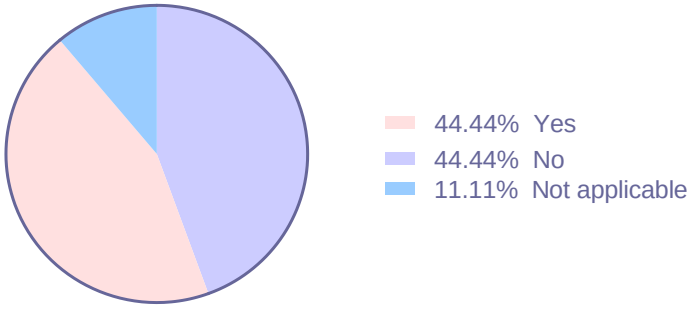


2. I am afraid of discovering the truth in many issues



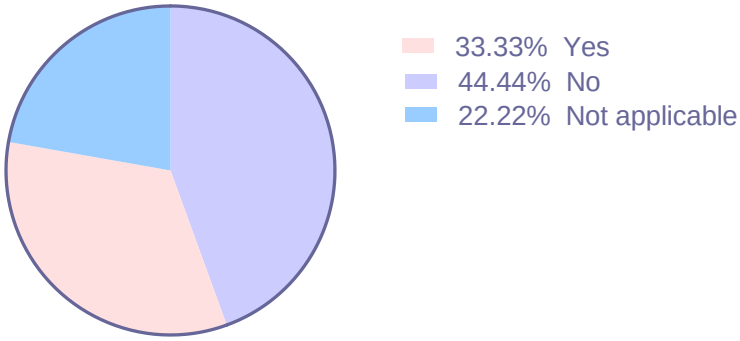
Total=100

3. During a team discussion, if someone's argument had been denied by others, the person would not have a right to express their argument.



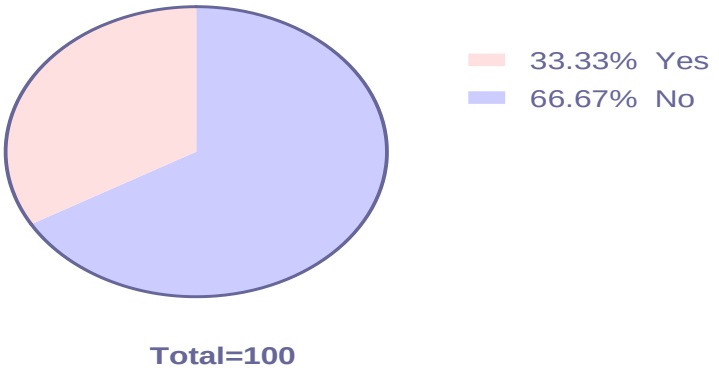
Total=100

5. I pretend to be a logical person, although I'm 0t.



Total=100

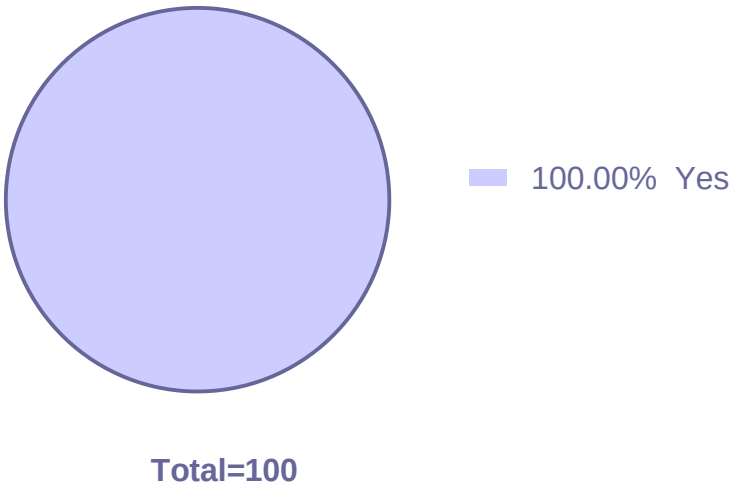
6. Continuing education activities are a waste of time.



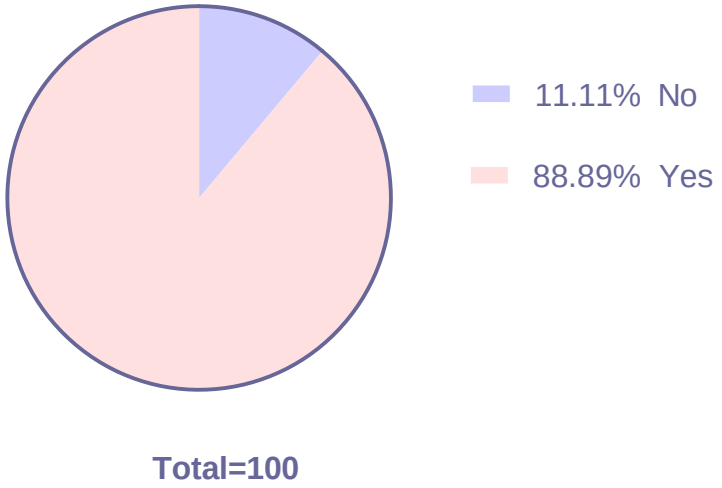
Thinking outside the box (Q14-Q18)

The frequency of responses for each question is as follows:

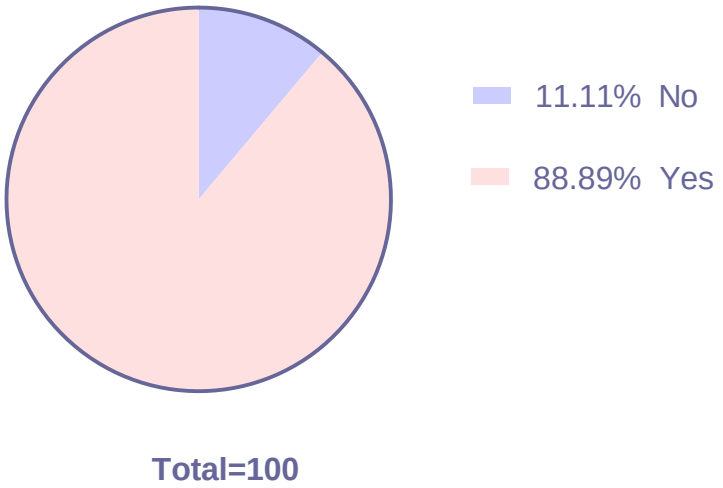
1. I have a strong desire for knowledge.

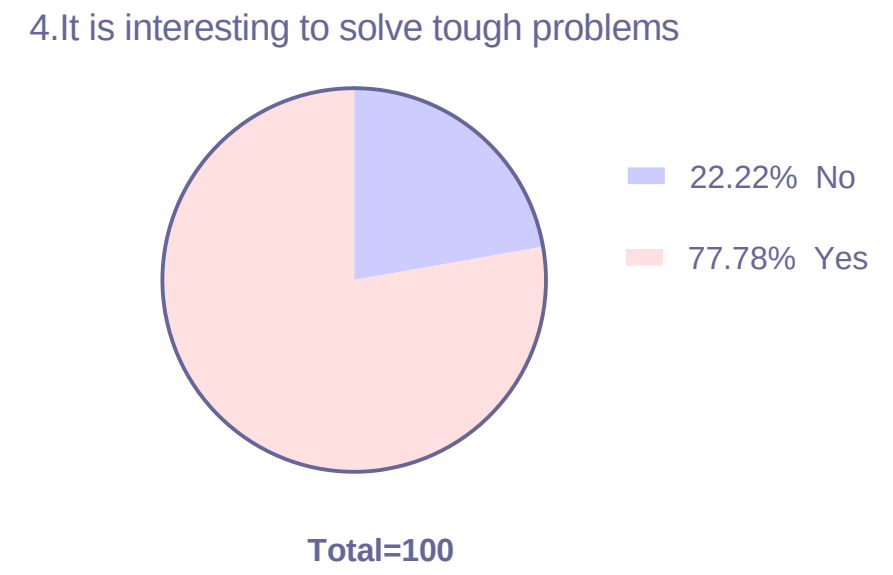


2. I am satisfied that I can understand others' ideas.



3. I expect to face the challenge of patient care





The findings highlight a strong interest among newly graduated nurses in tackling tough problems, with **80%** expressing enthusiasm for this aspect of their work. This willingness to engage with complex issues can enhance their problem-solving skills and contribute to effective patient care.

For the **20%** who do not find solving tough problems interesting, it may be beneficial to explore the reasons behind this sentiment. Providing training in critical thinking and problem-solving skills, along with mentorship, can help them build confidence in tackling challenging situations and develop a more positive outlook toward problem-solving.Overall, fostering an environment that encourages curiosity and creativity in problem-solving can further enhance the effectiveness and satisfaction of newly graduated nurses in their roles.

Based on the comprehensive analysis of the survey data from newly graduated nurses regarding their perceptions of competence, critical thinking, and research utilization, several key themes and insights emerge

Discussion

The findings of this research indicate that new nursing graduates at Kalba Hospital demonstrated moderate to high levels of competence readiness. The majority of respondents reported that they are capable of planning individualized patient care, supporting patients emotionally, and cooperating flexibly in changing situations. Additionally, the participants expressed confidence in analyzing patients' well-being from multiple perspectives and actively seeking to improve their professional skills. However, some variability in scores suggests that while most respondents are comfortable with their competencies, a subset may require further experience and targeted support to achieve a higher level of confidence in their professional abilities.

The study also shed light on the critical thinking abilities of new graduates. Most respondents rated themselves positively in areas related to systematic analysis, including logical thinking and problem-solving. However, the results suggest some participants may exhibit tendencies toward rigid thinking patterns (e.g., avoiding challenging established norms or resisting new ideas). This aligns with previous research, which highlights that inexperienced nurses may initially prefer familiar frameworks over innovative approaches, especially in high-pressure clinical environments. Encouraging reflective practice and team-based discussions could foster a more flexible mindset among new graduates, enabling them to adapt more easily to evolving patient needs.

Moreover, the study explored participants' research readiness by assessing their attitudes toward the use of research and the integration of research findings in clinical practice. While participants generally agreed that research is important and relevant to practice, the overall mean score (2.68) suggests there is room for improvement. Some respondents indicated difficulty in understanding research or questioned the feasibility of applying research findings in their daily practice. This reflects the common challenges faced by newly employed nurses, who often struggle to balance clinical responsibilities with the demands of evidence-based practice.

The study also examined organizational support for research utilization, revealing that while most respondents found the research environment supportive, a few barriers were identified. Participants working in departments such as the ICU and outpatient services reported occasional challenges with access to research resources and interruptions during research-based activities. These findings align with studies that highlight the impact of environmental factors—such as workload, time constraints, and noise—on the integration of research into practice.

Chiefly, this study highlights the importance of training in fostering competence and research utilization among new graduates. The data suggest that experienced staff were more likely to agree that adequate training is provided to new employees. However, some new graduates felt that the training received did not fully meet their expectations, which underscores the need for targeted mentorship programs. Research supports the idea that insufficient training can lead to job dissatisfaction, burnout, and errors, especially during the transition to professional practice.

Overall, the participants reported a positive perception of their competence, critical thinking, and research engagement, but identified areas for improvement. Providing continuous education, access to research tools, and structured reflective practice will be essential in supporting new graduates as they build confidence and transition smoothly into their professional roles.

Limitations

This study had some limitations. First, it was conducted in a single setting (only at Kalba hospital); thus, the results could not be fully generalized to other hospitals in the UAE. Moreover, Sample Size and Diversity as a small or homogeneous sample may not accurately represent the broader population of new graduates, leading to biased results. Variability in fields of study, backgrounds, and demographics can affect perceptions.

Implications for Nursing Education

The literature indicates a clear need for nursing programs to address these perceptions. Strategies such as enhanced clinical experiences, mentorship opportunities, and integrated research training can support new graduates in developing their competence and critical thinking skills. Additionally, fostering an environment that encourages inquiry and application of research can empower nurses to utilize evidence-based practices effectively.

The transition from nursing education to clinical practice presents significant challenges for new nursing graduates, particularly concerning their perceptions of competence, critical thinking abilities, and engagement with research. Evidence suggests that while many new nurses enter the workforce with a foundational understanding of clinical skills and theoretical knowledge, they often grapple with self-doubt and anxiety regarding their competence in real-world situations. This is especially true in high-pressure environments, such as emergency and critical care settings, where the stakes are significantly higher.

Research indicates that structured transition programs, including nurse residency initiatives, play a crucial role in enhancing new nurses' self-efficacy and clinical judgment. Mentorship and peer support emerge as vital components that foster confidence and facilitate the development of critical thinking skills. Moreover, the integration of simulation-based education is shown to be effective in creating a safe space for new nurses to practice decision-making without the fear of negative outcomes, thereby enhancing their problem-solving abilities.

However, barriers such as time constraints, limited access to resources, and insufficient training can hinder new nurses' participation in research and evidence-based practice. Addressing these barriers is essential for cultivating a culture of inquiry and ensuring that new nurses feel equipped to apply research findings in clinical settings.

Conclusion

Supporting new nursing graduates requires a multifaceted approach that emphasizes structured learning environments, mentorship, and ongoing professional development. By addressing their concerns about competence and critical thinking and fostering engagement with research, healthcare organizations can better prepare new nurses for the complexities of modern healthcare, ultimately leading to improved patient outcomes and a more resilient nursing workforce. Continued research in these areas is vital to identify effective strategies for enhancing the transition experience and empowering new nurses as they embark on their professional journeys.

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