

The journey from enrolled nurse to registered nurse: A mixed-methods study

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ABSTRACT

Objective: To explore the experiences of nursing students undertaking a vocational entry pathway of a Bachelor of Nursing course.

Background: In Australia, there are three levels of nurses: Nurse Practitioners (NP), Registered Nurses (RN), and Enrolled Nurses (EN). ENs typically undertake vocational diplomas, while RNs complete bachelor's degrees, and Nurse Practitioners undertake postgraduate master's degrees. Many ENs seek career advancement to become RNs through degree pathways, a transition that offers expanded knowledge, skills, and scope of practice. This study examined the difficulties and experiences of ENs undertaking bachelor's degrees to become RNs, particularly under challenges posed by the shift to online education during the COVID-19 pandemic.

Study Design and Methods: A concurrent mixed-methods approach was employed. Qualitative focus group interviews, individual interviews, and cross-sectional surveys were conducted among transitioning ENs at an Australian university in 2022 and 2023. The qualitative component comprised of three focus groups with a total of 18 participants and five semi-structured individual interviews. The quantitative survey was disseminated to the same student population. Descriptive frequencies were

used to analyse demographic and rating survey questions, summative content analysis for open-ended survey questions, and thematic analysis for individual interviews and focus groups.

Results: Of the 77 students surveyed, 70 responded (90.91% response rate), with most participants being female and Australian-born. Survey data showed academic writing and referencing as the top academic challenge (mean score = 2.21), while managing work and study was the leading personal challenge (mean score = 1.81). Content analysis of open-ended responses revealed key concerns such as pace of learning, work-life balance, and short-notice placements. Thematic analysis of interviews and focus groups identified five overarching themes: academic challenges with course structure and online learning, balancing diverse commitments, adapting to university expectations, course management and support systems, and the transformative impacts of COVID-19.

Conclusion: The transition from enrolled to registered nurse is marked by numerous obstacles, further exacerbated by the pandemic. Educational institutions and healthcare stakeholders need to recognise these challenges and provide individualised support. The study underscores

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the importance of holistic support mechanisms in assisting ENs in their professional development and ensuring the healthcare industry benefits from competent RNs.

Implications for Research, Policy, and Practice:

Research should focus on effective educational models for transition programs, considering online and traditional environments. Policies need to support flexible learning, resource allocation, and clinical placement management. In practice, institutions should implement support systems and individualised learning approaches, and healthcare settings should develop holistic development programs for transitioning nurses.

What is already known about the topic?

- Enrolled Nurses frequently advance their careers by transitioning to Registered Nurses via degree pathways.
- Transitioning from Enrolled to Registered Nurse involves gaining broader skills and knowledge.

What this paper adds:

- Offers detailed accounts of Enrolled Nurses' transitions during COVID-19, focusing on academic, personal, and professional hurdles.
- Enrolled Nurses transitioning to the Registered Nurse qualification were uniquely affected by COVID-19, particularly within the online learning environment.
- Sheds light on educators' roles in easing this transition and the importance of administrative support in nursing education.
- Stresses the need for personalised support for transitioning nurses, mindful of socioeconomic and family challenges.

Keywords: Challenge; Conversion; COVID-19; Enrolled Nurse; Mixed-methods; Registered Nurse; Transition

OBJECTIVE

To explore the experiences of diploma-qualified nursing students undertaking a vocational entry pathway of a Bachelor of Nursing course.

BACKGROUND

Globally, nursing workforces typically consist of three levels: Nurse Practitioners (NP), Registered Nurses (RNs), and second-level nurses, whose roles vary by country. In Australia, New Zealand, and Singapore, second-level nurses are known as ENs, while in North America, they are called Licensed Practical Nurses (LPNs). These levels differ in education, scope of practice, and responsibilities, but all are essential to the healthcare system, with RNs often supervising second-level nurses.

In the middle of the twentieth century, the rebranding of 'nurses aides' to 'enrolled nurses' in Australia signified a significant shift in their role and the nature of education they received, reflecting increased responsibilities and expertise.¹ As the complexity of healthcare increased, Australia recognised the need for an advanced nursing workforce. Hospital-based programs gave way to vocational colleges offering a national Diploma of Nursing to equip nurses with the skills necessary to face contemporary healthcare challenges.² ENs are now integral contributors to the healthcare system, albeit under the supervision of RNs, as opposed to being merely adjuncts in the past.³ The growing scope of practice for ENs over recent years has further

enabled greater contribution to health care and raised some confusion around differences in scope of practice, with RNs seen to have greater accountability, responsibilities, knowledge, and clinical decision-making, as well as being able to delegate care-related activities.^{1,3}

For many ENs, the decision to undertake further studies to become an RN is not merely a change in title, but a transformational step with profound personal and professional implications.⁴ Although the exact number of ENs transitioning to the RN role is not stipulated in the literature, within Chisholm Institute there are approximately 400 Diploma of Nursing students across two campuses each year. From that number, approximately 20% (100 students) express an interest and cross over to further their studies through a pathway into a Bachelor of Nursing degree.

The appeal of becoming an RN can go beyond promotion or better financial prospects. It is inextricably intertwined with a passion for delivering superior patient care, aspirations of specialisation, an eagerness for professional development, and a desire to impact the broader healthcare ecosystem.⁵ Although this transition has historical roots and appears linear, it is not without complex obstacles.⁶ Transitioning EN students frequently face challenging academic pressures, must assume broader responsibilities, and adapt to an ever-changing professional environment.⁴ Attention and comprehension are necessary for navigating these professional shifts and adjusting to the diverse workplace dynamics that accompany them.³

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Despite the number of ENs seeking to make the transition, there is a gap in the literature regarding their unique journeys after gaining substantial experience at their level, when seeking to pursue RN certification. To date, their unique challenges and potential opportunities have not been thoroughly investigated, creating a compelling case for further examination. Recently, the transition of ENs has been further complicated by the COVID-19 pandemic, which prompted a paradigm shift in the educational spectrum. While the transition to online education was unavoidable, it introduced its own set of obstacles and learning dynamics.⁷ Thus, this study aimed to explore the experiences of nursing students undertaking a vocational entry pathway of a Bachelor of Nursing course.

METHODS

STUDY DESIGN

The study was designed as a concurrent mixed-methods study utilising both qualitative and quantitative components simultaneously for data collection and analysis.⁸ The mixed-methods strategy was chosen because it offered the flexibility to investigate the research question in depth. The qualitative component facilitated a comprehensive examination of the complexities and nuances of the research questions, while the quantitative component enabled a broader examination of trends and relationships within a larger dataset.^{9,10}

STUDY SETTING

This study was conducted in Melbourne, Australia, over the 2022 to 2023 academic years, to explore the experiences of students in the 2022 intake of a two-year Bachelor of Nursing transition course. The students were undertaking the course offered by La Trobe University at two campuses of a dual (vocational and higher education) provider. The first intake for the transitioning pathway course was in 2018, and enrolled approximately 40 students, of which 30 students (75%) graduated. Since then, there have been 110 students enrolled across two campuses each year, with a graduate completion rate of approximately 98%.

RECRUITMENT

Purposive sampling was used to identify students and graduates of the university pathway who met the inclusion criteria. Eligible participants were ENs admitted to the Bachelor of Nursing transition pathway who had previously completed a Diploma of Nursing. This included all students enrolled in 2022–2023 and graduates of the 2021 cohort. Exclusion criteria included anyone under the age of 18 years.

Recruitment for Survey

The research study assistants used student email addresses to send invitations via QuestionPro, introducing the research

project and the study's objectives and a link to the survey. They also coordinated Zoom meetings between educators and students, where they introduced the survey, ensured that students received the survey link, and addressed any questions or concerns students had with completing the survey. The survey link remained open for a total of two weeks. A reminder email was sent to non-responders approximately one week after the initial distribution to encourage participation and thus maximise response rates.

Recruitment for Focus Groups and Interviews

To recruit participants for focus group sessions, we employed a strategic and multifaceted recruitment strategy. Initially, a research assistant reached out to prospective student participants, providing them with an introduction to the research project. During this initial contact, the study objectives and goals were communicated. A purposive sample was drawn from students who expressed interest, and those selected were invited to participate in focus-group sessions.

For interviews, course coordinators facilitated initial contact by introducing the study to graduates. The contact details of those who agreed to participate were subsequently forwarded to a designated research assistant, who then liaised with participants to arrange interviews at mutually convenient times.

DATA COLLECTION

A combination of qualitative semi-structured individual interviews, focus groups and quantitative cross-sectional surveys was employed.

Survey

The survey comprised a total of 24 questions and collected demographic data and insights into students' experiences and perceptions while undertaking the pathway program. The development of the questions was informed by a scoping review of the research question and piloted with topic experts, including academics and clinicians. Seven questions required respondents to rate their experiences on a scale of 1–5, where a score of 1 indicated the greatest significance or value and 5 indicated the least. Six open-ended questions prompted students to elaborate on challenges and enablers they encountered. The rating questions enabled participants to prioritise varying aspects of their transition experiences, while open-ended questions offered an opportunity to share detailed insights and narratives. The remaining eleven questions collated data on student demographics.

Focus groups and Interviews

Two trained research assistants, previously unknown to students, oversaw focus groups in order to facilitate candid responses and foster an environment conducive to open

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discussion. Their responsibilities included ensuring that discussions remained structured while allowing for the free flow of personal experiences and viewpoints.

Semi-structured interviews were conducted via Zoom and typically lasted between 30 and 40 minutes. They consisted of four parts, comprising demographic characteristics, diploma experiences, degree study experiences and perspectives on transition (Supplementary Material).

DATA ANALYSIS

Survey

Demographic and educational profiling survey data were analysed using descriptive frequencies. A quantitative descriptive statistical approach was applied to the rating questions, which used a five-point Likert-type scale where participants rated a series of determinants based on their perceived significance and impact. A score of 1 indicated the highest level of significance, while a score of 5 indicated the least.

Responses to open-ended survey questions were subjected to comprehensive content analysis. This method, as described by Hsieh and Shannon¹² enables elucidating nuances of concise survey responses. Initially, one researcher immersed themselves in the data, identifying recurring themes and classifying them appropriately. Afterwards, frequencies of these themes were evaluated to provide context for findings. To ensure consistency and validity of the categorisation procedure, a second researcher performed cross-verification.

Focus Group and Interviews

Two researchers independently conducted a comprehensive thematic analysis of the interview and focus group transcriptions. This procedure adhered to the six-step methodology proposed by Braun and Clarke which included familiarising with the data, generating initial codes,¹³ searching for themes, reviewing themes, defining and naming themes, and producing the report. Individually, the researchers immersed themselves in the data to gain an understanding of the overall content. The qualitative data analysis software NVivo facilitated the process and provided a framework for coding and classifying the rich participant narratives.¹⁴ Codes were then organised into potential themes, which were reviewed and refined on an ongoing basis.

ETHICAL CONSIDERATIONS

Ethics approval was granted by the La Trobe University Human Research Ethics Committee (HEC22023). All students were provided with participant information sheets explaining the study purpose and assured of the privacy and confidentiality of their information. Students also had the opportunity to ask the research assistants any questions or seek clarification. Written informed consent was obtained

before surveys, focus groups, or interviews proceeded. Participants were able to withdraw their participation at any stage in the research process with no implications for them. Potential power imbalances were managed through the use of research assistants, not known to students, managing all correspondence, surveys, interviews, and focus groups. This also included recording of interviews and focus groups, coding and analysis. Data security was managed by ensuring files were stored within locked password applications and in a secure centrally located area under the university data management system. All participants remain anonymous, and their data was coded to maintain their confidentiality. Focus groups were conducted on campus in an area away from teaching staff, and interviews were conducted privately over a Microsoft Teams meeting.

STUDY RIGOR

Rigour of the study was intended to enhance its credibility, dependability, and applicability. Combining qualitative and quantitative methods, a mixed-methods approach was strategically employed to increase the breadth and depth of the data, thereby yielding additional insights. Utilising standardised tools such as QuestionPro ensured uniformity, precision, and objectivity in data collection and analysis for the survey. Survey reliability was enhanced by its cross-sectional design, which captured a snapshot of students' experiences at a particular time. The multiple researcher approach in both the content and thematic analysis served as a safeguard against possible biases for the qualitative component, thereby enhancing the study's validity. Constant comparison, iterative theme refinement, and researcher consensus building increased reliability.¹⁵ The use of NVivo, a qualitative data analysis software, ensured systematic, exhaustive, and replicable coding, thereby enhancing the credibility of the findings.

RESULTS

GENERAL CHARACTERISTICS OF ALL PARTICIPANTS

Participants' ages ranged from 18 to 64 years (Table 1). The largest age group was 35-44 years (36.49%), followed by 25-34 years (33.78%). Most participants were female (83.56%), while 1.37% identified as 'other'. Most were born in Australia (63.51%), while 36.49% were born in other countries. The majority reported speaking English as their primary language at home (82.43%), while 17.57% spoke other languages, including Hindi and Punjabi, Filipino, Dari, Sinhalese, and Gujarati and Chinese, suggesting a multicultural and multilingual population of students.

About a quarter of participants (23.61%) reported entering the Diploma of Nursing as school leavers, while 76.39% went on to further education. Participants were asked to report their highest level of education completed prior to

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entering the Diploma of Nursing. The highest proportion (27%) held diplomas, followed by bachelor's degrees (10.8%), before starting within the nursing field. Other education levels represented included Year 12/final year of secondary schooling (35.1%), vocational Certificate III (lays groundwork for further learning into Certificate IV level, with main purpose to qualify people to undertake skilled work) (10.8%), Certificate IV (generally accepted by universities to be equivalent to six to 12 months of a bachelor degree, with credit towards further studies often granted) (10.8%), Certificate II (qualifies people to undertake mainly routine work and lay groundwork for further education) (1.4%), and did not finish secondary school (2.7%).

TABLE 1. DEMOGRAPHIC AND EDUCATIONAL PROFILES OF ALL PARTICIPANTS

		n	%
Age (years) (n=74)	18-24	14	18.92
	25-34	25	33.78
	35-44	27	36.49
	45-54	7	9.46
	55-64	1	1.35
Gender (n=73)	Female	61	83.56
	Male	12	16
Country of Birth (n=74)	Australia	47	63.51
	Others	27	36.49
Language Spoken at Home (n=74)	English	61	82.43
	Others	13	17.57
School-aged Children (n=74)	Yes	36	48.65
	No	38	51.35
School leaver prior to entering EN (n=72)	Yes	17	23.61
	No	55	76.39
Education level prior to entering EN (n=74)	Did not finish secondary school	2	2.7
	Completed Year 12	26	35.1
	Certificate II	1	1.4
	Certificate III	8	10.8
	Certificate IV	8	10.8
	Diploma	20	27
	Bachelor	8	10.8
Other	1	1.4	

SURVEY

The total population of students enrolled in the 2022 intake numbered 77. The response rate for the survey was almost 91% (70). Response rates varied significantly for particular survey questions. For example, only 31% of students responded to the question related to specific transitional challenges, while a response rate of 85% and 80% was obtained regarding personal and academic challenges. This could indicate that

the majority experienced difficulties or felt uncomfortable discussing them, or interpretability issues may have been present.

Survey Rating Questions

Participants were asked to rate various academic and personal challenges encountered during their transition, using a five-point Likert-type scale in which 1 indicated the most significant impact and 5 the least. Among the questions within academic challenges, academic writing and referencing were rated as the most significant (mean score = 2.21), followed by the independent nature of learning (2.90), assessment requirements (2.92), and complexity of concepts (2.97), thus reflecting the academic demands associated with university-level study. For personal challenges, managing work and study emerged as the most significant issue (mean score = 1.81), followed by clinical requirements (2.70), understanding university expectations (3.19), and being located on the vocational campus (3.42).

TABLE 2. DISTRIBUTION OF STUDENTS' RATING QUESTIONS

Question	Influences	Score
What have been the academic challenges you have faced studying at degree level? Response rate: (62 / 77) = 81%	Other	3.60
	Complexity of concepts	2.97
	Assessment requirements	2.92
	Independent nature of learning	2.90
	Academic writing and referencing	2.21
What have been the personal challenges you have faced studying at degree level? Response rate: (66 / 77) = 86%	Other	3.44
	Managing work and study	1.81
	Understanding university expectations	3.19
	Clinical requirements	2.70
	Being located on the (vocational institution) campus	3.42

Survey Open-Ended Questions

Open-ended survey questions were comprehensively analysed through content analysis and revealed key challenges and supports experienced by students. Three key themes emerged where 'other' was selected as the highest common response: work-life balance, pace of learning, and short notice of placements. Overall, the most frequently cited challenge was managing work-study balance (38%), followed by limited face-to-face learning (29%), difficulties with assignments (15%), and course co-ordination issues (10%). Less common concerns included limited progress in placement, lack of laboratory practice, and gaps in prior education. In terms of support, teacher engagement was identified as the most helpful factor by 76% of respondents, emphasising the critical role of approachable and responsive educators. Other supports included laboratory-based learning (10%), peer

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TABLE 3. DISTRIBUTION OF OPEN-ENDED RESPONSES

Question	Response	Frequency
Tell us more about any challenges you have encountered. Response rate: (48/77) = 62%	Work Study Balance	18 (38%)
	Limited Face-to-Face Learning	14 (29%)
	Struggling with Assignment	7 (15%)
	Course Coordination Issues	5 (10%)
	Finding No Progress in Placement	2 (4%)
	Lack of Lab Practice	1 (2%)
	Education Gap	1 (2%)
Please tell us more about the things that have helped with your degree studies. Response rate: (42/77) = 55%	Teachers	32 (76%)
	Productive Lab Education	4 (10%)
	Peer support	3 (7%)
	Library Facilities	2 (5%)
	Previous nursing experience	1 (2%)
If you have used university support services, which ones have you used and how have they assisted you? Response rate: (39/77) = 51%	Not Used	10 (26%)
	Library/Librarian	9 (23%)
	ASK (University)	7 (18%)
	Studiosity	7 (18%)
	Counselling Services	3 (8%)
	Student Online	2 (5%)
	LMS	1 (3%)

support (7%), and library resources (5%). When asked about university support services, many students reported not using them (26%), while others highlighted assistance from librarians (23%), ASK and Studiosity (each 18%). Counselling and digital platforms were mentioned less frequently.

Under academic-challenges, 81% of respondents (62/77) completed this question. Pace of learning and work-life balance were highlighted as the most common recurring themes.

SR “Pace of learning.” and SR: “The intense study workload within a concentrated time of approx. 3-8 weeks when there is a 12 week semester.”

Respondents felt the intense study load, limited face-to-face learning time, and trying to juggle family and time off work was extremely overwhelming.

SR “Juggling family and placement and assessments and work all together.”

Within the question of personal challenges, 86% of respondents (66/77) completed this question, and the recurring themes identified included work-life balance again, and short notice of placements. In relation to work-life balance, survey respondents identified that studying at a degree level posed a number of issues, especially with trying to balance family commitments, work, and complete the required placement, within the allocated time frames.

SR “Managing family and study.”

SR “Managing placement and children, work and study.”

SR “Combining the young family commitments and responsibilities with available study time and work.”

It was also observed that the short notice of placements not only intensified the challenges faced by students but also compounded the pressure they faced.

SR “Very little downtime and very consuming when considering placement times.”

FOCUS GROUPS AND INTERVIEWS

Transitional experiences of students from ENs to RNs were illuminated through a thorough examination of the collected data. Five key themes emerged: 1) Academic challenges of course structure and the new realm of online learning, 2) Balancing work-life diverse commitments, 3) Transitioning to university culture with its nuanced academic expectations, 4) Course management and organisation, and 5) Transformative impacts of the COVID-19 pandemic. Together, these themes capture the multifaceted journey of these nursing students, offering valuable insights into their unique transitional experiences.

Academic Challenges of Course Structure and the New Realm of Online Learning

Participants identified a variety of academic hurdles while pursuing their degrees. Factors such as pace of learning, heavy workload in a short period of time, and limited class time were rated highly as the main academic challenges. Some students viewed the lack of face-to-face classes as a disadvantage, particularly those who found it difficult to adapt to online learning and navigate contemporary digital systems.

FG1 “I did my diploma 10 years ago and really struggle with online learning.”

Due to limited in-class time, some reported feeling they had to teach themselves about the subject, resulting in frustration and dissatisfaction. They emphasised the difficulty in participating in online group discussions and the significance of these discussions to their learning process.

FG1 “The amount of online learning has been a challenge; I much prefer in-class sessions as I’m able to participate in group discussions easily and that gives me a better understanding of the concepts we are learning”.

Balancing Work-life Diverse Commitments

Findings revealed complexities faced by participants in balancing family and professional responsibilities while pursuing their studies, thus illustrating the challenges of managing multiple commitments simultaneously. Participants vocalised juggling their roles as family members,

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employees, and students, as well as specific difficulties in obtaining time off from work and family for placements. This was expressed by participants as seen below:

FG1 “Working, studying and family who relying [sic] on you only.”

FG2 “Juggling all placements, family, loss of income due to placements and still maintaining the study load.”

Financial issues also emerged as a significant challenge. This sub-theme encapsulated the financial strain participants experienced due to a lack of income, coupled with the pressure of financially sustaining their families whilst also studying.

FG2 “Time off from work and family commitments.”

FG3 “Fitting in family and no income support...available for family studying.”

Other responses emphasised the complexities of undertaking full-time study, working full-time, being a single parent, and managing expectations associated with clinical placements.

FG3 “Juggling children, work and study and placements as a single mum.”

Transitioning to University Culture with its Nuanced Academic Expectations

Understanding and adapting to university expectations also emerged as challenging for participants. For many, entering the university ecosystem was a unique experience. Intricate theoretical concepts proved intimidating, with many expressing difficulties. In addition, difficulties of academic rigour and writing demanded adaptable approaches. The structured protocols of academic writing, particularly referencing, presented steep learning curves.

FG3 “My learning style, I hate writing. That was a personal challenge.”

FG3 “I think the lecturers definitely were the biggest resource for us, especially the ones in the class. They were very understanding. They were just so good at explaining things. That was probably one of the other reasons why I chose to stick with (the university). I really liked the lecturers and the way they always supported us and explained certain concepts.”

For some participants, clinical settings were both a testing ground and a realm of transformation. Many found it to be a humbling experience when they returned to their work settings as students, particularly after enjoying the autonomy of their previous roles. Shifting between these roles often felt disorienting, as one participant noted,

IP “I had the experience, but on placements, it felt like I was starting from scratch.”

Participants indicated that, when comparing the EN and RN curricula, the RN curriculum was more academic and theory-oriented. Nonetheless, as they progressed, many began to appreciate and embrace the expanded RN responsibilities. One student reflected:

IP “Over time, I began to understand the depth and breadth of being an RN.”

IP “Clinical knowledge actually at the beginning I didn’t think there was a great deal of difference between an EN and RN... now I’m at the end of the course I realised there’s a huge difference not just clinical knowledge but critical thinking.”

Course Management and Organisation

Support services and support staff was another recurring theme noted under facilitation of the course. Participants identified a variety of support services whilst pursuing their degrees as facilitation towards their success. The use of library services, Studiosity (an online academic support platform which provides free and personalised help for students), or seeing librarians to help them with their studies from both institutions and being able to seek university support services were noted. All students had the ability to access resources from both the TAFE and the university through the partnership program. This gave them opportunities to gather a wealth of knowledge and support through each infrastructure setup. This was reiterated through qualitative comments such as:

FG2 “The librarian, for references checking (has been) very useful.” “ASK (university) has been a big help in navigating things. The (university) library has been fantastic resource also.”

Participants consistently identified teacher support as the most prevalent form of assistance, with multiple references to its significance throughout.

FG2 “Supportive (university) nursing educators at (the) campus who understand students’ concerns & difficulty with navigating the course content, placement & requirements.”

FG3 “Supportive learning to cater for different learning needs.”

FG1 “Knowledgeable, approachable and helpful educators.”

In addition to teacher support, participants also identified peer support as a significant source of assistance, highlighting their complementary role in fostering engagement and learning.

FG2 “Having a friend to support and encourage me through the pressures of studying and expectations of the degree, honestly without the support I would probably have quit.”

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The transition to university for a profession as demanding as nursing, however, was also difficult in and of itself. The significance of nursing placements could not be overstated. Nonetheless, a majority of participants expressed concerns about placement allocation processes. Students frequently described feeling marginalised, whether due to placements that did not align with their academic goals or logistical nightmares caused by last-minute announcements, which were more pronounced because of the COVID-19 pandemic. The sentiment of one participant resonated with many:

FG3 “Juggling work commitments with short-notice placements felt like walking a tightrope.”

Participants frequently cited a lack of timely communication related to clinical placement as a significant obstacle as a result of COVID-19 challenges. Students are required to align their schedules and make logistical arrangements in advance for clinical placements. Without proper communication, many reported being left in limbo, leading to stress, confusion, and sometimes missed opportunities.

IP “Cancellation like a couple of days before or not receiving information on where to go for placement that was to be tricky.”

IP “Very short notice of placement.”

COVID-19's Double-Edged Sword

The COVID-19 pandemic was not only a health crisis but also created academic upheaval that altered the educational paths of many. This period was reported to be both difficult and transformative for nursing students transitioning from ENs to RNs. The abrupt transition to online learning created a void for many. Some lamented the loss of face-to-face interactions, with one recalling:

IP “The pivot to Zoom felt isolating. The absence of hands-on practice felt like a setback.”

This situation also posed a threat to integral clinical placements of nursing education. Students reported shorter, more intense placement periods, which, despite being beneficial, were often exhausting.

IP “Then last-minute placements in December before the end of the year, after you'd finished all your coursework, just to get those hours up, and sometimes you'd have a week here or a week there ... then you go into the hospital setting where it's N95s, full PPE ... I went straight into Emergency for my first rotation.”

However, the pandemic also saw positive aspects. The transition to online platforms offered flexibility in balancing work, family, and school. As one participant noted:

FG3 “The blended approach was a lifesaver, making juggling work and university commitments possible.”

Moreover, institutional support played a crucial role. The university's role in assisting students through these uncertain times was commended. Interestingly, some students believed that their transition experience was largely unaffected by the pandemic, with one expressing:

FG3 “Nice balance of face-to-face and online which makes work/uni [university] achievable.”

DISCUSSION

This research sought to explore the experiences of nursing students undertaking a vocational entry pathway to a Bachelor of Nursing. In doing so, it uncovered a variety of reasons and motivations for ENs to pursue degrees, as well as academic challenges faced. According to the findings, there was a substantial overlap between conclusions drawn from the survey ratings, open-ended question responses, focus groups, and interviews. The survey responses provided a broader perspective and allowed for quantitative comparisons, whereas the focus groups and interviews provided rich, detailed narratives that captured the subtleties and complexities of participants' experiences. Despite their dissimilar formats, both data sources converged on a number of central themes, demonstrating consistency of the findings.

While pursuing nursing degrees, many students reported experiencing academic overload as a result of the course's pace and structure, confirming prior research.^{16,17} In an integrative review, Pitt et al. discussed the rigorous requirements of nursing curricula and the need for educational reforms.¹⁶ Reverte-Villarroya et al. further confirmed this in their multi-centre study research showing that the mental health of students was a significant factor that could influence university studies within the health sciences.¹⁷ Challenges for students in this area may also contribute to issues such as student burnout, mental health concerns, or increased attrition rates.^{16,17,18}

Following the COVID-19 pandemic, there is a need to revisit academic curricula to include promoting healthy habits and providing appropriate coping strategies for nursing students.¹⁷ The research findings concur with the recommendations above, indicating a universal need for curriculum modifications that take the mental and emotional health of students into account.^{17,25} Institutional supports that are available to students and could help mitigate these risks include student support services, counselling, library and academic support, career support, success and wellbeing support, and Koorie student support.

According to the participants, the difficulty of maintaining a healthy balance between work, study, and personal lives were a recurrent problem in their course experience. Similarly, Hodge et al. found in their descriptive survey that working students needed to constantly juggle their academic and professional obligations.¹⁸ This frequently

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impacted their academic performance and well-being. The research highlights the unique socioeconomic pressures faced by these transitioning nurses. Whilst the EN cohort at Chisholm Institute are usually working ENs, this does not diminish the desire to achieve an undergraduate qualification in nursing. In addition to the obvious financial constraints associated with tuition and reduced work hours, the participants highlighted the difficulty of supporting their families without their usual income. The dual burden of financing an education and supporting a family has been somewhat neglected in prior research. Notably, the findings highlight the nuanced complexity of balancing familial obligations, professional obligations, and academic rigour. This is especially true for single parents who must navigate the academic world while ensuring their families' well-being. With these insights in hand, the need for individualised and targeted assistance becomes even more pressing. To assist transitioning nurses, institutions should provide flexible study schedules, financial aid, or stipend opportunities.

ENs transitioning to Bachelor of Nursing qualifications frequently struggle with the rigorous academic requirements of university settings, particularly when confronted with intricate theoretical constructs.^{6,19,20,21} The feedback from the participants highlights the difficulties posed by academic rigour and the peculiarities of their writing requirements.²² Differences between EN and RN curricula highlighted in the study are consistent with prevalent shifts in nursing education. The EN curriculum focuses on practical, task-specific skills, whereas the RN curriculum emphasises theory and a holistic understanding of patient care.¹⁹ This emphasis on theory is crucial, especially when considering the diverse roles of RNs, which include both caregiving and advocacy. Dyson as well as Rojjanasrirat and Rice highlights the transformative potential of the RN curriculum,^{20, 21} which aims to shape students' identities and prepare them for the extensive responsibilities of an RN. Particularly those students with a clinical background, found the transition to a theory-heavy academic setting extremely intimidating. Similarly, den Hertog and Boshuizen discovered a difference between practical nursing experience and academic writing standards.²² This gap emphasises the need for individualised support and resources to facilitate students' integration and development within the RN curriculum.

Clinical placements, recognised for their transformative capacity, can also be intricate learning terrains, as noted by Scammell et al.²³ For those who have previously functioned independently as ENs, revisiting clinical settings highlights the interaction between their established professional roles and their developing student identities. This variation is consistent with Huston's analysis of the difficulties faced by professionals readjusting to educational environments.²⁴ Such transitions require individualised mentoring and reinforcement, particularly when reconciling seasoned clinical practice with the evolving student role.

Embarking on the journey from EN to RN is seldom a solitary experience. The participants consistently underscored the pivotal role of educators in this transformation. In transitioning from the more autonomous domain of the EN role to the structured, theory-rich environment of the RN program, many students reported feeling adrift. Educators did more than just impart knowledge; they served as navigators, helping students bridge the gap between their prior experiences and the new academic demands of the RN curriculum. It has been demonstrated that educators play a crucial role in facilitating the smooth transition of nursing students by providing them with guidance, mentorship, and support as they negotiate the complexities of their evolving professional identities.²⁵

However, while academic and clinical challenges remain paramount, administrative barriers must not be overlooked. Ineffective course management, particularly in the area of communication, can exacerbate students' anxiety, particularly in fields requiring logistical precision, such as nursing. The significance of effective course administration emphasises that proactive and clear communication is crucial to the success and well-being of students.²⁶ Students voiced concerns regarding placements, which are a cornerstone of nursing education, and this shed light on a situation requiring immediate attention. To ensure that learning is optimised without additional stressors, it is essential that placements correspond to academic goals and are logistically feasible.

The impact of the COVID-19 pandemic on students' experiences in this study was diverse, reinforcing the varied online learning experiences reported by participants in other studies.^{5,7} These experiences were significantly influenced by individual learning styles, digital literacy, and home learning environments. A variety of responses were found to online education. Some students found the flexibility and convenience of online education advantageous, as it allowed them to effectively manage their schedules. This viewpoint supports findings of a study by Bao, who argued that online learning platforms could provide students with opportunities to personalise their learning experiences, thereby improving academic outcomes as a whole.⁵ On the other hand, lack of access to necessary resources and the inability to gain practical experience were frequently cited as issues by some students. This observation is consistent with the findings of a study conducted by Khalil et al., who noted that the abrupt shift to online learning in response to the pandemic posed significant challenges, especially for students who lacked necessary technological resources or whose courses relied heavily on practical, hands-on experiences.⁷

This study, to the best of the researchers' knowledge, includes a much-needed current investigation to examine students' experiences as they transition across roles. However, the study also has some limitations. Participants were drawn

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from only four cohorts of students with a limited sample size. Hence, being able to capture further cohorts would be beneficial to the current research and enhance overall results. In addition, students were only sourced from one specific EN to RN education pathway with a dual sector education partner and the experiences of students in other similar programs, pathways, and other settings might be different. Despite these limitations, the findings do provide useful insights into an important student group in addressing the shortages of RNs.

CONCLUSION

The journey from EN to RN is filled with both obstacles and opportunities. This study shed light on multifaceted experiences of these professionals, illuminating the complexities of their academic, clinical, and administrative challenges. As the terrain of higher education was navigated, the participants were confronted with hurdles such as academic expectations, a tug of war between work, study, and personal life, and complexities of revisiting clinical settings in a new role. The added complication of the COVID-19 pandemic and abrupt transition to online education highlighted the resilience and adaptability required for their transitional journeys.

It is imperative that educational institutions, policymakers, and the broader healthcare community recognise these challenges and work collaboratively to develop individualised support mechanisms for these students. This would ensure that the healthcare industry has access to RNs who are well-prepared, rounded, and competent, in addition to facilitating smoother transitions. Future research should delve deeper into the development of innovative pedagogical strategies and support systems that cater to the specific needs of this population, with the goal of bridging the gap between personal aspiration and professional excellence.

IMPLICATIONS FOR RESEARCH, POLICY, AND PRACTICE

Future studies should focus on developing specialised teaching methods and support systems tailored for ENs transitioning to RN roles. Investigating the long-term career impacts and efficacy of educational models for ENs is crucial.

Education policies need to cater specifically to the challenges faced by ENs, offering flexible learning and assessment options that consider their work-life balance. Ensuring equitable access to technology and streamlined clinical placements for ENs is vital for their professional development. Enabling policies that capture the students' wellbeing, such as library and academic writing support and counselling is essential to student success.

Practice settings should provide targeted mentorship and support for ENs during their transition. Healthcare

institutions must create environments that recognise and utilise the unique experiences and skills of ENs, promoting their continuous professional development and providing effective feedback mechanisms.

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