### RESEARCH ARTICLE

# **Beyond the Bedside: Understanding Nurses' Transition into Academic Roles**

Judith Odanee Magwilang<sup>1</sup>, Steven Pasayan<sup>2,3</sup>, Christian Gaerlan<sup>2</sup>, and Alfredo Fomocao Jr.<sup>4</sup>

#### **Abstract**

**Introduction:** While research has explored various aspects of nursing practice, there is a limited understanding of the specific challenges and experiences of nurses' transitioning into the academia. This knowledge gap hinders the development of effective support strategies to facilitate career transition. This study aimed to explore the lived experiences of nurses who transitioned from bedside to academic roles.

**Methods:** This study employed an interpretive phenomenological approach guided by the Consolidated Criteria for Reporting Qualitative Research (COREQ). The participants of this study were 21 faculty members from the two Colleges of Nursing (University of Cordilleras and Mountain Province State University). Purposive sampling was used in the selection of participants. Data was collected between April and June 2024. NVIVO 15 was used to organize, analyze, and visualize the data.

Results: Five primary themes emerged, highlighting the complexities of transitioning from bedside to academia. These said themes included: Navigating the Transition, encompassing the integration of clinical identity with the faculty role and adapting to new responsibilities; Impact of Clinical Experience on teaching; Reconciling Professional Identities, involving adaptation to the academic environment and balancing clinical knowledge with academic expectations; Challenges and Support Systems encountered during the transition; and Motivations in Shaping Future Nurses, reflecting the desire to mentor and guide. These themes underscored the significant adjustments that nurses have to undergo and the interplay between their clinical background and academic responsibilities.

**Conclusion:** The findings of this study highlighted the struggles experienced by nurses as they shift from clinical roles to work in academic institutions. To enable this transition, such support measures should be designed to deal with specific problems not captured within more general support measures. Furthermore, the integration of the clinical and academic roles was equally important for not only quality nursing education but also for safe and quality patient care. Making use of the clinical perspective in positional environments can improve nursing education. Mentorship programmes may also be used to foster the transition and development of future nurses. Lastly, studies have shown the importance of developing policies and programs capable of encouraging this particular change in career and, more broadly, ensuring a healthy nursing education workforce.

Keywords: Transitioning, clinical/community, academe, roles, phenomenology

# Introduction

oving from being a healthcare provider to teaching in an institution of higher learning can be very difficult (Barken, 2023) which means completely shifting professional identities and skills. This career trajectory requires a profound understanding of the factors influencing this transition in order to inform effective support strategies. Many new nurse educators

have been asserted to face problems when given different roles, such as support systems that are well structured, mentors, and good communication methods (Khan, 2023). Given this situation, this study's goal requires an understanding of the experiences of nurses during such moments; hence, calling for a redefinition of the professional role played by nurses while

<sup>&</sup>lt;sup>1</sup> Corresponding author; College of Nursing, University of the Cordilleras, Governor Pack Road, Baguio City; Email: magwilangjudithg@gmail.com

<sup>&</sup>lt;sup>2</sup> Faculty, College of Nursing, Star Colleges Inc. Pico La Trinidad, Benguet

<sup>&</sup>lt;sup>3</sup> Medical Service, Bontoc General Hospital, Bontoc Mountain Province

<sup>&</sup>lt;sup>4</sup> College of Nursing, Mountain Province State University, Bontoc Mt. Province

going through such transformation (Cowley et al. 2020). It is difficult to transition from new nurse educators to new roles. As such, the provision of support systems, such as mentorship programs, is important (Sodidi & Jardien-Baboo, 2020; Barken, 2023). This adjustment can be eased through peer support, which includes attending workshops and receiving feedback (Laari et al., 2021; Sodidi & Jardien-Baboo, 2020).

When nurses think about transitioning from bedside caregivers to teachers at colleges or universities, they have to go through complex routes that can both hinder and greatly help them in terms of their professional identities and roles (Schoening, 2013). For instance, the role transition framework is a theoretical framework that is used to explain how people view various positions during this time to enable comparisons between old and new posts, particularly within nursing practice settings. This includes job readiness levels, skills needed for success in every position, and availability of a support system vis-a-vis organizational climate/culture fit, etc., required for a successful shift (Almasoodi & Ali, 2022). However, this may be the most difficult time for novice nurse educators, who usually require more support than anticipated (Laari et al., 2021). In addition to having mentors with experience in bedside care settings, leaders should also be well-versed in safety aspects while handling patients and taking up academic work (Booher et al., 2021). Moreover, patient handover safety can be enhanced by including strategies such as bedside shift reports in nursing education programs to maintain continuity (Mathews & Olson, 2017).

While research has explored various aspects of nursing practice (Barken & Robstad, 2023), there is a limited understanding of the specific challenges and experiences of nurses transitioning into academia. This knowledge gap hinders the development of effective support strategies to facilitate career transition. Understanding this transition is crucial for improving nursing education and ultimately, enhancing patient care. This study aims to bridge this knowledge gap by investigating the determinants of such career change. Through the evaluation of supportive mechanisms, experiences of new nurse educators, and the effect of healthcare environments on transition, the findings from this study will provide valuable information that could be used to enhance future nurse education sessions. This study sought to answer the research question: What are the lived experiences of nurses who have transitioned from bedside clinical practice to academic roles? Understanding these experiences is crucial for informing the development of effective support strategies to facilitate this transition, ultimately contributing to the competence of nurse educators and the quality of nursing education and patient care. Moreover, the findings of this study could aid in developing focused interventions to improve transition processes, leading to increased competence of nurse educators, students' outcomes, and eventually, better patient care.

# Methodology

### Design

This study employed a qualitative interpretive phenomenological approach guided by the Consolidated Criteria for Reporting Qualitative Research (COREQ). The use of COREQ in this study permits a level of depth to phenomenological research that enhances its transparency. rigor, and critical appraisal. In order to meet the need for distinctive reporting. COREQ outlines essential components of research steps including the members of the research group, the study conducted, data acquisition and analysis, and the results. Also, COREQ highlights issues of methodological rigor by incorporating such significant aspects as participants' selection, data gathering methods, and data analytic strategies into the overall design of studies, thus strengthening credibility and trustworthiness. Lastly, COREQ facilitates assessment of research quality, enabling the reader to judge the originality, execution, analysis, and conclusions of a given case study in relation to qualitative materials.

### Participants/Sampling

The participants of this study were 21 nurses who had transitioned from clinical/community practice to academic roles. The sample was selected using purposive sampling, where inclusion criteria required that: (a) registered nurses with a minimum of one year of clinical/community experience, (b) successful transition from a bedside nursing role to an academic position within the past six months, and (c) voluntarily agreed to participate in the study by providing indepth interviews. Table 1 provides the demographic information of the participants.

### Setting

The study was conducted at two Colleges of Nursing (University of the Cordilleras and Mountain Province State Polytechnic College). The University of Cordilleras is located at the heart of Baguio City, whereas Mountain Province State University is located in the capital of Mountain Province. These two colleges strictly require faculty members to have at least a one-year minimum of clinical/community experience.

**Table 1.** Demographic information of the participants. N=21

Participant	Highest educational attainment	Years working in the hospital prior to joining the academe
Participant 1	MAN	12
Participant 2	MAN	15
Participant 3	MAN	3
Participant 4	PhD	15
Participant 5	MA on-going	3
Participant 6	MAN	5
Participant 7	MAN ongoing	10
Participant 8	MAN	1
Participant 9	MAN	1
Participant 10	MA on-going	10
Participant 11	MAN	9
Participant 12	MAN ongoing	10
Participant 13	PhD ongoing	5
Participant 14	MAN ongoing	6
Participant 15	MAN	4
Participant 16	MAN	5
Participant 17	MA on-going	8
Participant 18	MAN	10
Participant 19	MAN	3
Participant 20	MAN	2
Participant 21	MAN	5

#### Data collection

After receiving approval from the institutional review committees of the two participating institutions, the data collection began. Personalized letters were sent to 21 potential participants, inviting them to participate in the study. Although there was no financial compensation provided for participating, prospective participants were made aware that their engagement in the study provided numerous direct advantages. Firstly, the interviews served as an opportunity for them to discuss their experiences as well as think critically about important changes in their careers. Such an opportunity may enhance personal understanding of their career by

allowing for thoughtful reflection and for a narrative construction too. Secondly, participants were able to contribute their perspectives toward a greater understanding of the shift from clinical practice to academic nursing and the implications for nurses within the discipline. Such evidence has the potential to help inform the formulation of supportive organizational structures and policies for nurse educators in the future, thereby optimizing not only their practice and but also the quality of education in nursing. Lastly, participants provided their perspectives which by definition is constructive and affirming because their input aids efforts directed toward change within their professional domain. It was made clear that there are no costs associated other than the time spent in the

interview. To encourage comfort and openness, concerns regarding confidentiality and anonymity were also addressed.

Following phone calls, 21 favorable responses were received, with participants expressing a willingness to participate fully until the end of the study. Investigators conducted face-to-face meetings to mutually decide on interview dates, times, and modes. These dates aligned well with the participants' schedules, making it feasible to obtain oral informed consent before recording sessions due to the confidential nature of one-on-one interviews. Each interview lasted approximately 60–70 minutes and was recorded with participants' verbal permission. To ensure transparency, researchers took notes during the interviews and produced detailed transcripts. Nonstructured interviews or interactive dialogues were used to collect data, with questions such as "Can you describe your experiences in transitioning from clinical/community practice to being an academician"?

Although data saturation was reached with the 19th participant, two more participants were included to further strengthen the validity of the study and to provide a more comprehensive understanding of the phenomenon. Data were collected from April to June 2024 and involved four researchers (one female and three male instructors). These well-trained interviewers had a strong interest in improving nursing education programs and equipping future nurses with necessary skills.

### Data analysis

An inductive thematic analysis was employed. Data analysis began immediately after the completion of the first transcription. Each researcher worked independently on the initial data analysis procedures following predetermined steps. First, the researchers read the transcriptions and field notes for each interview numerous times to ensure clear understanding. Phrases and expressions that described the experiences of nurses in their transition from being beside to academe were chosen. Finally, meanings related to participants' experiences were generated. The researchers collaborated in groups and organized the themes, and any discrepancies were resolved by re-evaluating the transcriptions and field notes until an agreement was reached. Subsequently, the transcriptions were compared and analyzed for phrases that reflected similar themes (Braun & Clarke, 2006). These themes were revised and described in greater depth. Statements from the participants who reflected on each topic were chosen and rewritten. All 21 participants were requested to examine the findings (themes and descriptions) to ensure that they matched the information provided. The validation process did not reveal any discrepancies in the information provided. NVIVO 15 was used to organize, analyze, and visualize the data.

#### Narrative reflection

To better understand the evolving perspectives of nurses transitioning from bedside care to academia, participants' narratives were examined. Distinguishing between lived experiences and described experiences is crucial to avoid conflating causation. While individuals possess unique stories, their core identity persists and is influenced by their responses to challenges. These internal transformations, which are often imperceptible to others, shape the individual narratives. By comparing these accounts, insights into the impact of the transition on participants were gained. Each narrative offers a novel perspective that emphasizes its intrinsic value. Acknowledging the potential influence of interviewer bias, the study aimed to balance the exploration of the key areas. Participants frequently integrated the past, present, and future into their self-narratives, revealing both public and private aspects of their identity.

# Rigor

To establish credibility, the study also employed member checking, providing participants with transcripts for verification, and additional input. To enhance transferability, detailed descriptions of the participants' experiences were documented. Dependability was ensured through an inquiry audit comparing the data collection processes with subsequent findings and interpretations to confirm evidence alignment. Confirmability, a critical aspect of phenomenological research, was addressed through audit trails, explicitly outlining the rationale for data-collection decisions.

### **Ethical Consideration**

Prior to the commencement of data collection, ethical approval was obtained from the Standing Committee of the University of the Cordilleras. The study was conducted in accordance with ethical principles for research involving human participants. This included providing potential participants with comprehensive information about the study, obtaining their informed consent before participation, ensuring their right to withdraw at any time, and guaranteeing the anonymity and confidentiality of their responses.

**Table 2.** Themes and subthemes of the study

Themes	Subthemes
Traversing the Changing Landscape of Nursing Education	Unifying Clinical Identity with Faculty Role
Overcoming Challenges and Seeking Support	Adapting to New Roles and Responsibilities
The Impact of Clinical Experience on Faculty Roles and Contributions	
4. Reconciling Clinical Identity with Faculty Roles	Adapting to the Academic Environment
	Balancing Clinical Knowledge with Academic Expectations
5. Nurturing the Next Generation	Passing the Baton

### Results

From the verbatim accounts of the 21 participants, five themes and five subthemes emerged. Table 2 presents the summary of the themes and subthemes.

# Theme 1. Traversing the changing landscape of nursing education

This theme involves adapting and interacting with the evolving context within one's profession, including new situations, opportunities, and threats to nursing education practice. This theme further discussed confronting problems arising from demographic changes, changes in healthcare systems, and new technological approaches.

Through the responses of the participants in this research, a general point of view was demonstrated regarding the continuous changes in nursing education which calls for the profession to adjust consistently. For instance, participant 1 claimed that it is essential to stay updated on the latest trends and innovations in the field. In addition, another participant stressed the need to embrace new technologies such as virtual reality-based learning and e-learning formats for improving student's engagement and student's educational outcome (Participant 2). These nurse educators appreciated the need for leveling up educational programs and pedagogical approaches to the new realities of healthcare (e.g., growing elderly and chronic patient populations).

### Subtheme 1. Unifying clinical identity with faculty role

The reconciliation of clinical identity with the faculty role as the subtheme captures the concerns of the participants in moving from the age of attending to patients to one of the instructing roles. Participants raised apprehensions that they would not be able to move adequately in the new role and be able to relate with the students in the academic set up. To elaborate on their previous clinical nursing practice and the subsequent shift towards nursing education, specifically an academic role, the participant responded that:

Participant 4: "Having worked as a clinical instructor... I am both eager and apprehensive about the prospect of teaching nursing students in a traditional academic setting and having the opportunity to physically engage and connect with them."

In this exploration, many participants expressed mixed emotions about the transition from clinical practice to faculty roles. While they were excited about the opportunity to shape the next generation of nurses, they also acknowledged the challenges associated with this shift. The demands of teaching, research, and service, coupled with the loss of direct patient care, created significant stress and uncertainty.

Overall, the evolving nature of nursing education coupled with the shift from clinical practice to faculty roles presents unique challenges for participants.

### Theme 2. Overcoming challenges and seeking support

This theme extends to problems, barriers, and transitions that the participants have to undergo in their socialization from a clinician to a faculty member, as well as the strategies they used to cope with and seek help. The transition is said to be quite challenging, but the participants were able to manage these challenges by appropriately utilizing a number of mentors, colleagues, and faculty development offerings.

Transitioning from bedside nursing to a faculty position was not an easy walk for the participants. Many found it hard to transition from practicing nursing which involves direct patient-contact to academics which prompted problems in: presentation and implementation of lectures, preparing interesting learning resources and assessing students' work. Typically, the teachers' workload was not restricted to teaching alone and research and service also became an additional burden and a competition of priorities. Problems of this nature, coupled with some participants' dissatisfaction with their clinical professional identity and how such will fit into their academic orientation, made them feel disoriented regarding their self-concept and purpose. To tackle these challenges, participants had several options: learning from others who had been in the profession longer, attending relevant workshops, and networking with peers and exchanging ideas and materials.

Participant 14: "One of the challenges I encountered was how to give a good lecture and achieve the objectives in every topic I deliver to my students."

# Subtheme 2: Adjustment to the new roles and responsibilities

In this subtheme, the particular aspects of the new universal role taken by the participants, which is that of the faculty members, involve specific challenges. The emphasis is on the need to embrace new roles, such as content delivery, supervising students, and evaluation, pointing to possible problems that can be encountered in medical education, especially when moving from clinical work to academic practice.

The shift to a faculty role has its peculiar problems which often results in an identity crisis for the participants. Many were used to the rapid rewards of hands-on, direct patient care and did not easily adapt to the slow rhythm which is typical of the academic calendar cycle. As one participant put it, there were cases of going from a clinical situation to an educational situation which can be called crisis of identity (Participant 3). Another participant voiced the same anxiety

claiming that while he was not geared for the academic profession, he had to manage expectations and think about how his input and teaching would make an impact on student development (Participant 8).

Such a transition required participants to be prepared and, in such cases, include the usual wide array of reading and professional development.

# Theme 3: The impact of clinical experience on faculty roles and contributions

This theme explores how faculty members' clinical experience can influence their effectiveness in teaching and their overall contributions to nursing education. This suggests that clinical experience can provide valuable insights and practical knowledge that can be applied in the classroom.

The effectiveness of the faculty was considerably influenced by the clinical experience they had. Because of their practical knowledge and expertise, they could increase student engagement, develop meaningful learning opportunities and help in curriculum development. In the words of one of the participants: "Experience in the clinical setting helps a lot when you shift to nursing education" (Participants 15). Another participant observed that their experience of practice "enriched your professional development and improved your responsibility capacity" (Participants 16). These perspectives showed that there is a great benefit that the practice area offers to nursing education.

Participants' clinical practice turned out to be very beneficial when they assumed the role of the faculty. It was their vast knowledge of personal care, enhanced thinking ability and love for nursing that enabled them to offer real experiences. They made the class more realistic by designing clinical simulations and case studies which paralleled real-life practices. Furthermore, in a meaningful manner, their practical experiences of real life activities demonstrated how difficult ideas could be understood thereby generating students' involvement. Lastly, their professional practice made it possible to design advanced courses which were based on the current standards of nursing and prepared the future nurses adequately for the demands of the profession.

### Theme 4. Reconciling clinical identity with faculty roles

This theme explored the challenges and strategies involved in transitioning from a clinical nursing role to a faculty role. This highlights the need to balance one's clinical expertise with the new responsibilities of teaching and mentoring students.

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The participants sought to explain their experienced problems associated with changing from a mainly clinical position to a faculty one. They addressed the problem of synergetic usage of their practical skills and medical professionalism with teaching. researching and serving. However, several participants underscored the necessity of applying their real life clinically performed tasks in their academic synthesis. In attempting to provide an education which was more realistic and relevant. they used practical illustrations and case studies in their teaching so as to provide students with a better perspective of the nursing profession. For example, participant 18 tried to use her past experiences, knowledge, and skills from clinical practice into teaching, mentoring, and guiding future nurses. To participant 19, he integrates practical knowledge such that clinical background enables him to infuse real-world scenarios into the curriculum. Lastly, participant 11 asserted that clinical experience and expertise can offer insightful case studies and examples to clarify theoretical ideas and close the knowledge gap between theory and practice.

## Subtheme 3: Adapting to the academic environment

This subtheme focused on the specific strategies that participants employed to successfully transition from clinical practice to faculty roles. This highlights the need to adapt to new demands and expectations of the academic setting.

Participant 14: "In order to reconcile my clinical identity with my new faculty role, I will need to find a balance between preserving my clinical expertise and accepting the responsibilities that come with being an educator."

Participant 17: "In order to ensure a seamless transition from clinical practice to education, it is necessary to employ a number of strategies..."

Participant 20: "Nursing is both theoretical and skills based and it is not easy to unlearn it."

As the participants explained, in order to accomplish this transition, suitable adjustment to different requirements and expectations of the academic environment is vital. Blending their professional skills with other duties, these educators could assert themselves as efficient new members of the faculty.

# Subtheme 4: Balancing clinical knowledge with academic expectations

This subtheme deals with the difficulty of maintaining the right balance between the purely clinical roles and the research or academic duties of faculty members. It focuses on the importance of incorporating practices into education without compromising the demands of the institution.

In the words of the respondents:

Participant 18: "Mentorship, professional development, and institutional support help a lot."

Participant 21: "Relationship – to students, colleagues and others"

Participant 13: "Supports: from the college/ university – FDP, seminars, and training"

The participants stressed the importance of mentorship, professional development, and institutional support in achieving a healthy balance between 'clinical' and 'academic' within their activities. They believed that these factors were necessary if one was to successfully bridge pragmatic knowledge into an instructional setting but still within the constraints of academia. The importance of strong relationships with students, colleagues, and others in accommodating the difficulties encountered in this dual role is also underscored.

### Theme 5: Nurturing the next generation

This theme supports the idea that current nurse educators consider their incomplete goals to complete them successfully for the new generation of nursing students.

Participant 5: "The fundamental intention with regard to one's role as a faculty member in nursing education is to supplement traditional methods of teaching with a modern approach in the paranormal scope while increasing the level of student performance and comprehension of nursing's specificity".

Participant 8: "In the OR, there is often no time for long chains of reasoning, and I must say that the circumstances cannot be as pre-arranged as it sometime is in a classroom... I attempted to instill in my students the ability to ideate quickly and explore different options concerning patient care in an effort to nurture this ideology."

### Subtheme 5. Passing the Baton.

This subtheme puts emphasis on the important aspects on the part of the faculty members which are their guidance and influence to the students. Participants displayed a keen readiness to play a role in the development and guidance of the future nurses. In this regard, it is mentioned that faculty members intended to provide their students with direction, instilling in them a strong clinical commitment accompanied by a passion for nursing. As one of the interviewees said that it is her responsibility to encourage students to be focused on nursing care (Participant 9). Also, participant 10 shared that faculty has a responsibility to light the way for the next generation of nurses. She shared her knowledge and experience with the student, hoping to inspire them to become passionate and dedicated healthcare professionals."

In this regard, the faculty belongs to the holder of a torch where students are cared for and inspired to grow into good nurses. For instance, Participant 9 and Participant 10 manifested that the faculty members were also very keen to make these future healthcare professionals fall in love with nursing.

### Discussion

The transition of nurses from clinical practice to an academic career is a complicated process that has been analyzed in detail in current studies. Hence, the themes better explained this transition, as they avoided locking into a single perspective with five primary themes and five associated subthemes.

The theme of traversing the changing landscape of nursing education illustrates the challenges that nurses face when switching from a clinical to an academic role. This is not simply a new role taking on new work as it requires cultural work in which a clinical self and an academic self must be reconciled. In an academic environment in which clinical practice is not prioritized, nurses struggle with the notion that their practical skills might be devalued. Further research also supports these results as it captures the various complexities faced in this transition. In particular, Dandong et al. (2017) point out that in Nigerian context the shifting of the nursing educational model from hospitals to universities has attracted both profits and bottlenecks in making it possible for nurses to shift practice to the classroom while retaining clinical skills (Dandong et al., 2017). The same sentiment was observed by Rahmani et al. (2019), who found that psychiatric nurses in Iranian settings were not adequately prepared to embrace and perform shifts in academic roles. This lack of readiness is sometimes the result of the separation between what is done clinically and what is taught in the classroom.

Moreover, the experiences of inexperienced nurse educators further explained the challenges experienced during this transformation. According to Laari et al. (2021), turning points that lead to a shift from practice to teaching will be the same factors that will inform both job and satisfaction among nurse

educators (Laari et al., 2021). Consequently, the gap in the provision of appropriate interventions, including mentoring, is essential in supporting this new group of educators while on their twinning process (Sodidi & Jardien-Baboo, 2020). Fundamentally, numerous challenges and opportunities arise with caregivers shifting to the academics of the nurses' profession, which require intensive comprehension in the changing context of nursing education. The blend of practice and theory seems rather necessary to ensure a consistent development of self in the dual role of practitioner and educator. There is a need for further investigation, as well as the creation of frameworks and solutions for nurse educators to best adapt to this multidimensional occupational change.

The theme 'overcoming challenges and seeking support' with the subtheme "adapting to new roles and responsibilities" focuses on the challenges encountered by faculty members who are shifting from clinical practice to academic practice. The literature suggests that there is a need for ongoing education and mentorship to enable such adjustments and reconcile the difference between practice and teaching. Effective mentorship is critical for assisting nurses progressing into academia in their professional development by equipping them with effective strategies for successful role adaptation (Althagafi et al., 2019). Regardless of their needs, patients were unaware of the importance of the continual education of nurses in healthcare systems. For instance, the training of nurses continues to be a necessity for them to face the challenges of the current health systems, and it is argued that education alone is not enough (Aziz, 2023). The current findings are also supported by Althagafi et al. (2019), who found that nurture programs greatly assist in the clinical practice of nursing interns, thus augmenting their professional competency (Althagafi et al., 2019). These ways not only strengthen the capacity of clinical skills but also promote selfregard to the new members of the faculty such that they are able to carry out their work more efficiently. Mentoring is a crucial element in this transition because it offers both emotional and professional assistance that is focused on the fact that mentoring in nursing education may help improve the comprehension and training of their profession, especially in its practical component (Froiland et al., 2023). Nurse educator mentors help boost the pedagogical competency of registered nurses, which is very important whenever a new teacher recruits the workforce. To achieve this, shifting from clinical practice to the academic world for nurses has been faced with many hurdles, such as incompetence and sue to inadequate measures. To accomplish this training and teaching, continuous learning and guidance are important to help this process, which minimizes the gap between clinical work and

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teaching. Support from the institution enhances this process, reduces stress, and increases job satisfaction among new nurse educators. The combination of these factors is fundamental to achieving successful change and promoting the professional development of nurse educators.

The theme of 'reconciling clinical identity with faculty roles' is one of the most important issues that nurse practitioners encounter as they shift to active employment in the academic setting. Given this reality, they usually confront the problem of matching their vast amount of clinical skills with the requirements of being an academician and an educator. In perspective, 'Adapting to the academic environment' means that nurses must go through how they define their profession. Consistent with previous research, many individuals in the studies experienced a sense of unease and discomfort when confronted with these unfamiliar tasks. For example, Haase et al. (2021) called for nurses to include both professional and science - clinical duties. In the nursing career stages, their active clinical duties can be balanced with the academic duties, research, and education of the graduate students. This dual activity assists in accruing their professional academic identity and simultaneously infusing the pragmatic aspect of the line of work in the academic sector. Furthermore, with this transition, yet another critical area that needs emphasis is the 'how' of effective management and retention of both academic and clinical knowledge. Scholarly work has always engaged nurses, although they are under the strain of doing clinical work. Byumbwe and Mtshali (2018) noted that professional nurses are unable to manage both service provision and nursing education. causing them to be overwhelmed and traumatized unless there are enough measures taken.

It is essential to implement structured university mentorship programmes that have to be put in place. These programmes help in understanding the academic demands and, at the same time, the new faculty can make use of their clinical skills. In this connection, Ortiz (2021) mentions that mentoring assists beginner nurse educators in balancing and overcoming the academic environment, thus enabling their assimilation into their surroundings. This collegial support is essential in the establishment of a space for collegial relationships destined to make members feel a part of the academic family. For nurses who move into academia, these challenges become particularly relevant because of their attempts to integrate their clinical self into faculty practice. Changes in the professional context and balancing clinical information with academic demands require great networks of support, mentorship, and partnership with the institution. Encouraging these factors may enhance the career development of nurse educators, nurturing students, and faculty

in equal ways. Integrating clinical practice into academics not only adds value to teaching and those trained in nursing but also enhances nursing as a profession.

The theme of 'nurturing the next generation of nurses is particularly important in the area of nursing education, as it highlights the need for faculty members to serve as mentors to students. This is all the more applicable considering the current shortage of nursing faculty and the ever-increasing need for more qualified nurses. The subtheme of "passing the baton" illustrates the aspect of socialization that is necessary for the development of nursing as a profession, which is the passing of knowledge, skills, and values from the teaching staff to new cohorts of nurses. Perceptions of these role models substantially influence the shaping of nursing students' professional development and competencies. Endeavoring towards evidence-based practice is a key element for clinicians, and as Berthelsen and Koreska (2021) maintain, it is made possible only by the establishment of a practice culture for research. This interaction not only improves the learning outcomes for nursing students but also equips them with skills appropriate for the clinical environment. In particular, where students are encouraged to participate in research as well as evidence-based practice oriented objectives, faculties develop inquiry and critical judgment oriented towards the future of nursing. In addition, Lauck et al. (2021) focused their attention on how academicclinical activities increase retention and promote professional development in nursing thereby making it possible to pool skills and knowledge and orient students more effectively by teaching theory through practice. Developing as such gradually helps not only students' satisfaction with the educational process but also instills in nursing students' concern for assimilation and application of ever-evolving information and skills. Through such baton transformation, the faculty enables successor nurses to perform greater duties in nursing careers. Moreover, it is critical to equip the upcoming generation of nurses due to the current global nursing faculty shortage. Earlier study highlighted the need to get more nurses into employment and make a case for clinical nurse specialists to address this problem (Nardi & Policies such as these allow for the Gvurko. 2013). advancement of the issue of the deficit of advanced nursing practice by increasing the other resources, namely the nursing faculty and the culture of mentoring, teaching experienced nurses how to prepare future nurses, while ensuring quality practice as well. This is of paramount importance, as it not only secures the quality of nursing education but also the future of nursing itself. In addition, it was noted that nurse scholars encounter difficulties in their role performance, and such role challenges constrain their student support potential (Singh et al. 2020). Resolving such challenges calls for institutional evolution and staff development endeavors that do not permit sympathies but rather enable the faculty to fulfill their childbearing duties.

### Study implication

This study highlights areas of implications for improvements in both nursing education and practice. Nursing institutions ought to develop customized support programs that aim to help nurses who want to move away from practice and teach instead, for example, mentoring, workshops, or professional development. The duality of education and clinical practice in nursing has become more achievable through faculty development programs. Mentoring programs can assist in aiding the transition and growth of nurses. In addition, nursing programs should create nagging policies and programs that promote evaluative and educational work among nurses. For the successful mastery of this additional role, respect for such a practice has and will, in general, become key elements for further professional development. These expectations demonstrate how nursing institutions and organizations can enhance the ease of transfer from practice to the academic role of nurses and increase the nursing workforce.

# Limitations of the study

In this study, some drawbacks must be taken into account. The first is the relatively low number of participants, which may affect the representativeness of the sample for the general population. In addition, focusing on the two institutions may affect the relevance of the findings to nurses in some areas. Interviewer bias, temporal factors, cultural and contextual obstacles, and social desirability are possible limitations. To overcome these limitations, future studies should include a larger sample size and different geographic areas, use various contrast methods to decrease bias, and examine nursing toward education transition within a historical framework. Contemplating these limitations will enhance future studies to improve nursing practice in an education setting transition that will make it more holistic.

# **Conclusions**

The findings of this study highlighted the struggles experienced by nurses as they shift from their clinical roles to work in academic institutions. To enable this transition, such support measures should be designed to deal with specific problems not captured within more general support measures. Furthermore, the integration of the clinical and academic roles is equally important. Making use of the clinical perspective in positional environments can improve nursing education. Mentorship programmes may also be used to foster the transition and development of future

nurses. Lastly, studies have shown the importance of developing policies and programs capable of encouraging this particular change in career and, more broadly, ensuring a healthy nursing workforce.

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### **ABOUT THE AUTHORS**



Judith Odanee G. Magwilang, PhD, RN, is the Academic Dean of the College of Nursing at the University of the Cordilleras, Baguio City, where she leads initiatives in nursing education, research, and faculty development. She began her early career as a staff nurse then head of the nursing service of saint Theodore's hospital of

Tarsus in Sagaada Mountain Province for a decade before joining the academe. She holds a Bachelor of Science in Nursing from

Pines City Colleges, a Master of Arts in Education major in Nursing from Saint Louis University, a Master of Arts in Nursing from Lorma Colleges, and a Doctor of Philosophy in Nursing Education from Saint Paul University Manila. Dr. Magwilang's scholarly work focuses on nursing education, maternal health, nursing leadership, and health research ethics. Her commitment to advancing evidence-based practice and promoting ethical research has contributed to strengthening nursing scholarship and improving healthcare outcomes in the Cordillera region.



Steven G. Pasayan, RN, MD, is a Medical Officer III at Bontoc General Hospital, where he chairs the Hospital Emergency and Disaster Preparedness Committee and the Smoke-Free Task Force. He also serves as Secretary of the Continuous Quality Improvement Committee and

the PMA–Mountain Province Medical Society. He obtained his BS in Nursing from the University of the Cordilleras and Doctor of Medicine from Saint Louis University, and holds master's degrees in Hospital Administration and Public Health from the University of the Philippines. He is a Diplomate of the Philippine College of Lifestyle Medicine and the International Board of Lifestyle Medicine, a Fellow of the Philippine College of Hospital Administrators and the Philippine Society for Quality in Healthcare. His research interests include lifestyle medicine, community health, healthcare leadership and management, and quality improvement.



Christopher Ian Gaerlan, RN is a clinical instructor at the College of Nursing, Star Colleges, La Trinidad, Benguet. A TESDA-certified national TVET trainer and accredited competency assessor in the human health sector, he brings a strong commitment to advancing healthcare education. He earned his Bachelor of Science in

Nursing from PLT College in Bayombong, Nueva Vizcaya, and is currently pursuing a Master of Arts in Nursing, majoring in Maternal and Child Nursing, at the University of Northern Philippines. Beyond academia, he is actively involved in occupational health and safety, as well as quality assurance initiatives. His research interests focus on competency-based training in the technical-vocational education and training (TVET) sector and quality improvement in healthcare education and services.



Alfred Jr. Osdawen Fomocao, RN, MAN, is the Dean of the School of Healthcare Education at Mountain Province State University (MPSU) in Bontoc, Mountain Province, Philippines. He earned his Bachelor of Science in Nursing from Pines City Colleges in Baguio City and his Master of Arts in Nursing from Trinity University of Asia in

Quezon City. He is set to pursue his Doctor of Philosophy in Nursing Education at Saint Paul University Manila. With over 22 years of experience in nursing education, Dean Fomocao is a committed educator and researcher whose interests include mental health and well-being, nursing education, and reproductive health. He previously served as a member of the MPSU Institutional Research Ethics Committee, contributing to the advancement of ethical research practices within the university.