

Registered Nurse

Graduate Survey



Department of Nursing Education

Joliet Junior College

Nursing Graduates of Spring 2020

(6 - 9 month follow-up)

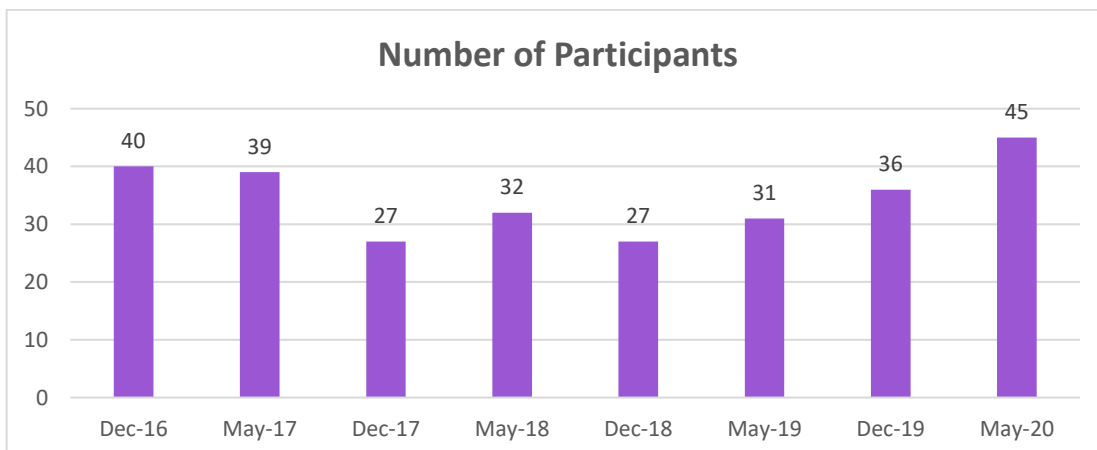
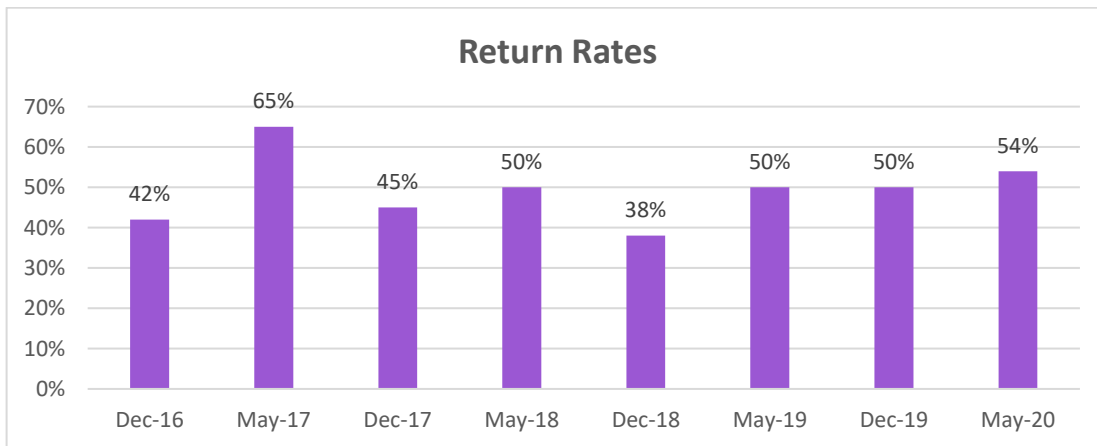


Introduction

Graduate surveys (obtained via Survey Monkey) are sent approximately six (6) months to nine (9) months after the student graduates, which made the target date in December 2020 for the graduating class of May 2020. The survey was sent out to eighty-four (84) graduates on November 21, 2020 via the student's personal e-mail address, which they provided to us prior to graduation. On November 30, 2020, twenty-nine (29) graduates completed the survey and another reminder was sent. On December 7, 2020 forty (40) graduates responded and another reminder was sent. On December 14, 2020 forty-five (45) graduates responded and the survey was closed. Overall response/return rate was 54%. This is the first graduating class during the Covid-19 pandemic. Additional/specific questions were asked within the survey regarding the pandemic.

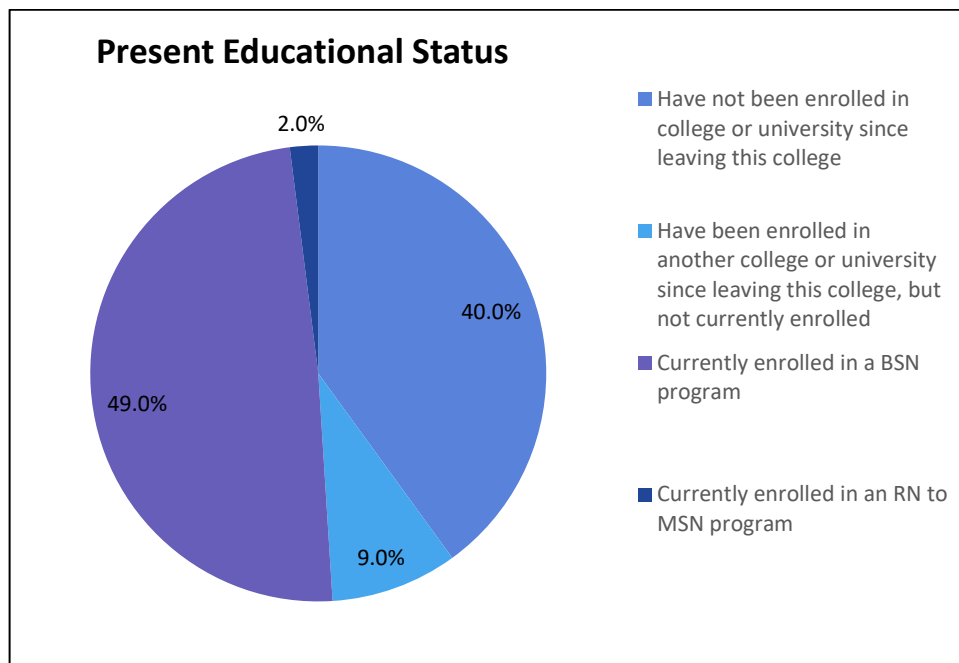
Please Note: graduate responses/comments in *Italics* are reprinted as they appeared on the survey, including spelling and grammatical errors..

Historical Data Trends:



Results:

Educational status (45 out of 45 responded): 49% (n=22) indicated that they are enrolled in a BSN program, 40% (n=18) have not been enrolled in college or university since leaving this college, 9% (n=4) have been enrolled in another college or university since leaving this college, but not currently enrolled, and 2% (n=1) indicated enrollment in a MSN program



Enrollment in a BSN program by educational institution (22 out of 22 enrolled responded): 40% (n=9) at Western Governors University, 36% (n= 8) at Purdue University (Northwest), 12% (n=3) at University of St. Francis, 4% (n= 1) at Chamberlain University, 4% (n=1) at Ohio Univeristy, 4% (n=1) at University of Phoenix.

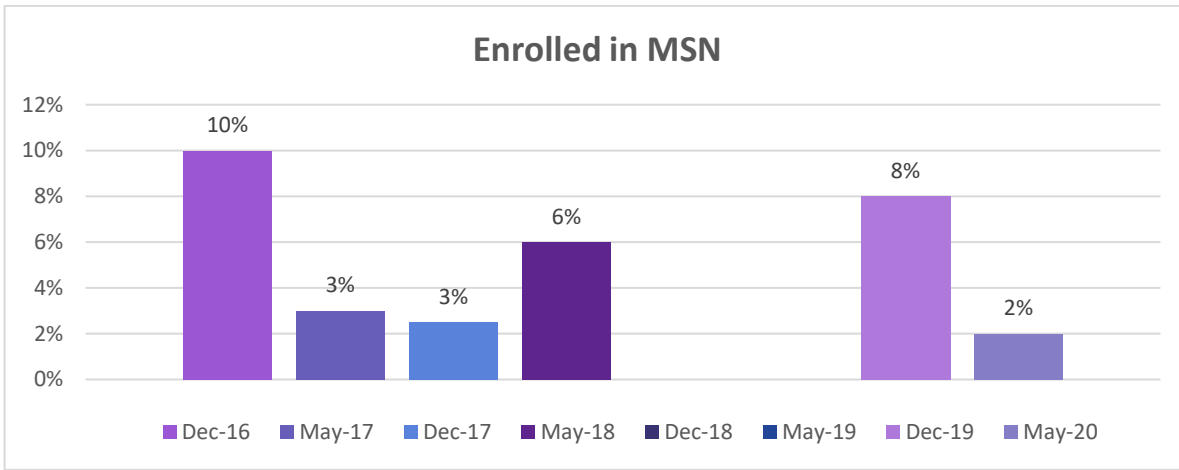
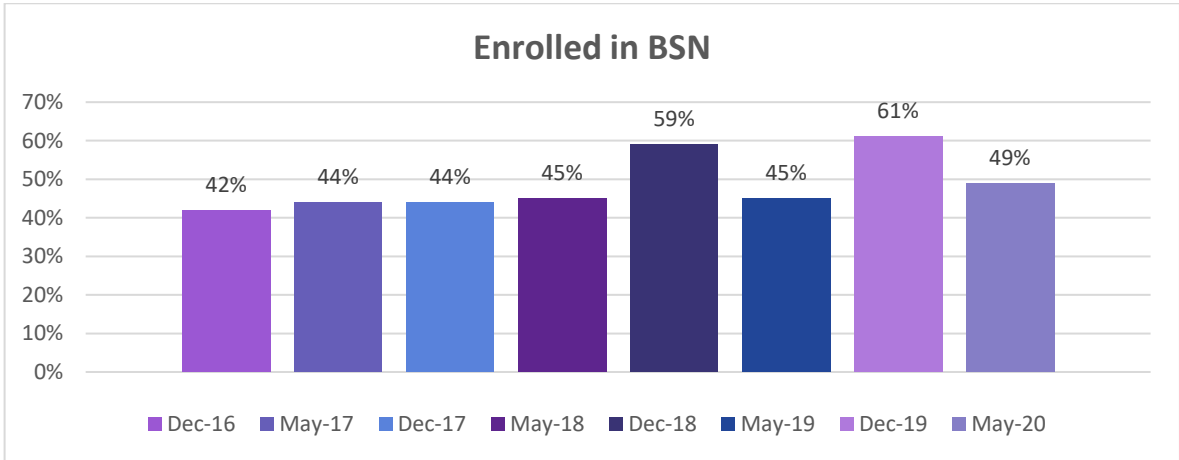
Enrollment in an MSN program by educational institution (1 out of 1 responded): 100% (n=1) at Purdue University (Northwest).

When asked why they were not enrolled in a BSN program, twenty two (22) graduates responded that are not currently enrolled in a BSN/MSN Program. Of the responding students, 33% (n=8) cite too many family responsibilities; 31% (n=7) were not required by their employer, 25% (n=5) cannot afford school right now, and 11% (n=2) not motivated to continue their education.

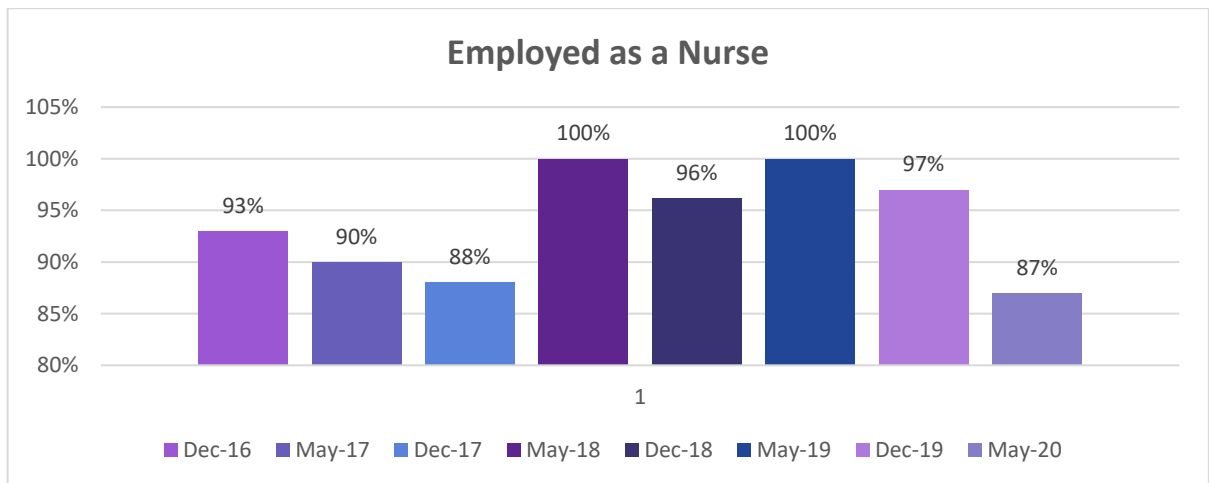
Some of the respondents comments:

- *Currently trying to apply for a mortgage and trying not to overwhelm myself financially.*
- *Wish JJC would have a BSN program.*
- *I applied and started at Grand Canyon University. I was losing points and had to screenshot professor to get points back, I lost motivation and dropped out. I plan to attend Purdue in January but still feel I'm not ready after what happened with Grand Canyon.*
- *Difficult role transistion/overnight hours.*
- *I plan to return to school in the near future but am trying to figure out my career plans.*
- *I wanted to take a break from school before getting my BSN, Also, I had to focus on studying for an exam that is required for the operating room.*
- *Will be enrolled by spring-due to Covid.*
- *Awaiting 6 month anniversary at work when the hospital will reimburse tuition.*
- *I need a break from stress of COVID and school.*
- *Going back to school in 2021.*
- *Want to start a job and get financial aid through the hospital as well as JJC alumni.*
- *Waiting to be eligible to get tuition reimbursement at my job.*
- *Not required, But looking at options now that I am employed.*

Historical Data Trends:



Employment status (45 out of 45 responded): 87% (n=39) of the graduates were employed as a nurse, 11% (n=5) is unemployed, and 4% (n=2) are employed in a non-nursing area.

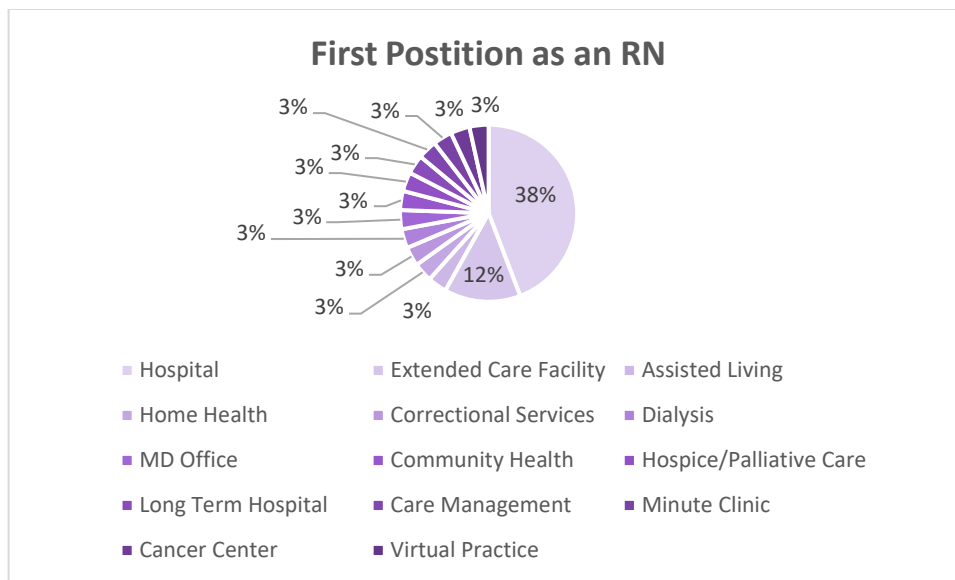


Did Covid have an impact on finding employment as a nurse? (45 out of 45 responded). 45% (n=20) said “yes” and 55% (n=25) said “no”. Our employment as an RN decreased, but may partially be due to Covid. Here are some comments:

- *I have applied to other places than where I currently work and most of them are internally hiring (from what I have been told). I currently hold my job as an RN at an assisted living facility still.*
- *I was able to find a contract job testing people for COVID a few months after graduation. Prior to this offer I was having a hard time finding hospitals to hire new grads so COVID worked in my benefit.*
- *I have to stay home with my kids, instead of work.*
- *Many places put on a hiring freeze.*
- *I am still working as an LPN at my job because covid has HR backed up.*
- *A job shado, which could not be completed, is usually required during the hiring process. Because of this delay and other regulations concerning visitors in the hospital, the hiring process was unstable.*
- *Delay in getting ATT to sit for the boards, and by the time I was able to take it, all the surrounding acute care facilities were on a hiring freeze and the office, outpatient services, and school settings required experience.*
- *I have a child that requirs medical attention.*
- *Had a baby and due to covid postponed finding child care.*
- *Not being able to walk in person for interviews.*
- *Working on a covid unit, was hired via zoom interview.*
- *Yes and no, I only got an interview at the hospital I worked for already as an aid. I got the job, but had a lot turned away because of a closed HR response from other hospitals.*
- *I had trouble getting an interview place, I eventually found employment as an RN.*
- *Jobs were hard to find. Elective surgeries were cancelled. Staff was cut. New employee orientation was not being held.*
- *Many hospitals were on a hiring freeze.*
- *Many hospitals on hiring freezes.*

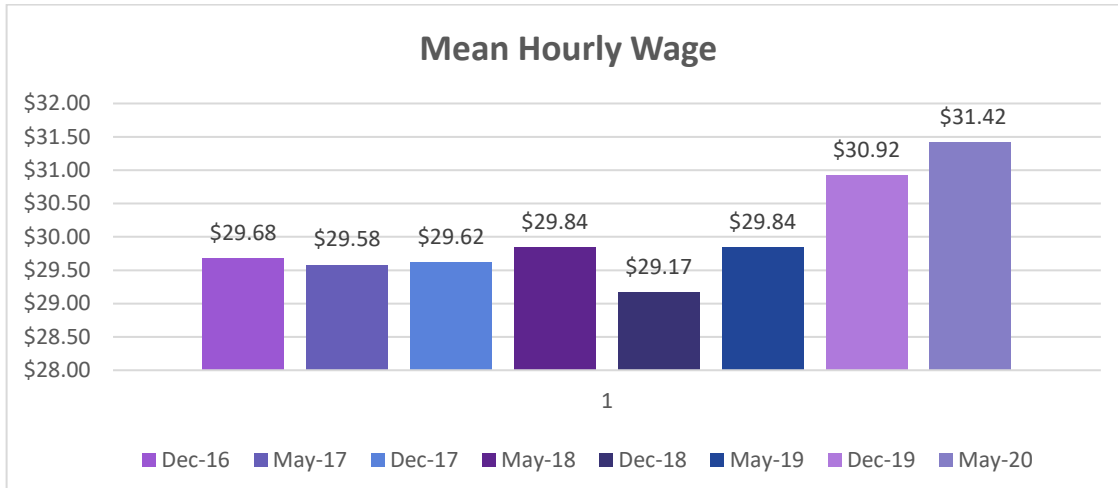
- *Most nurse residency programs were cancelled or pushed back.*
- *Applied to over 80 different positions while the hospital was on a freeze. Started applying to jobs in the beginning of May, finally started in October.*
- *The job market was extremely difficult due to COVID. Lots of places were looking for experienced nurses, and places who were not looking for experience preferred BSN-educated nurses.*
- *Many facilities had hiring freezes which prolonged the process.*

First position as a nurse: (39 out of 39 who indicated being employed as a nurse responded): 38% (n=15) obtained their first RN job in the hospital, 12% (n=5) in an extended care facility/nursing home, 7% (n=3) in home health, 7% (n=3) in assisted living, 7% (n=3) in correctional services, 5% (n=5) in dialysis, 3% (n=1) in MD office, 3% (n=1) in community health, 3% (n=1) in hospice/palliative care, 3% (n=1) in long term care hospital (RML), 3% (n=1) care management, 3% (n=1) in a minute clinic, 3% (n=1) in a cancer center, and 3% (n=1) in a virtual practice (healthcare services that take place virtually using communications technology).



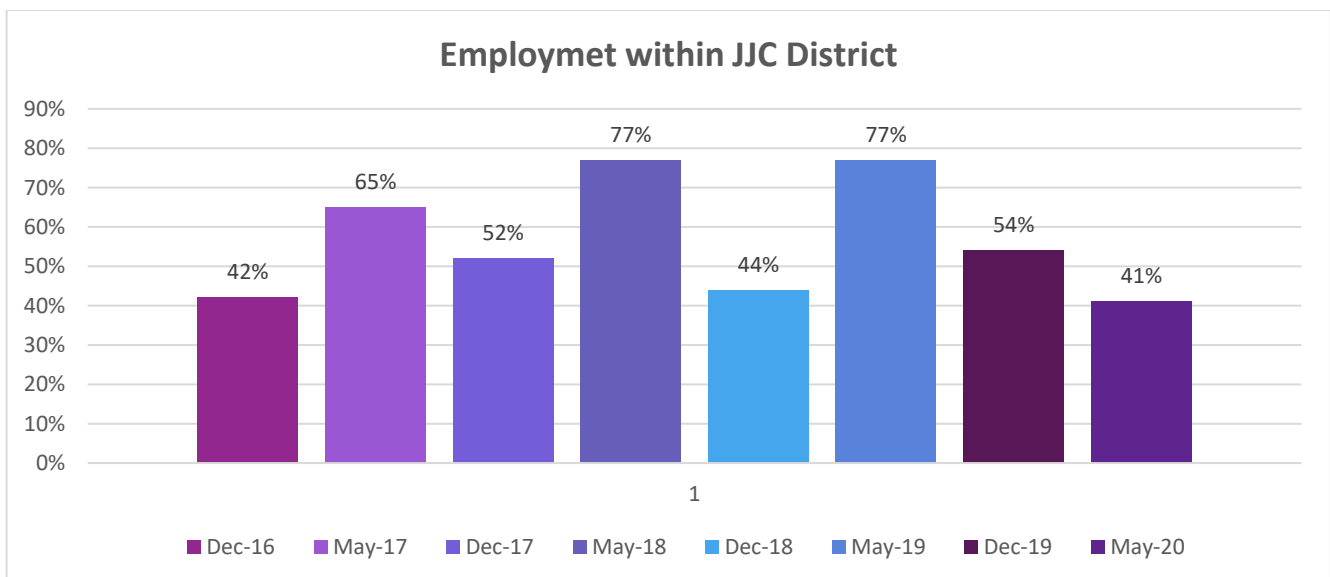
Hourly salary: (39 out of 39 who are employed as a nurse responded): before deductions (does not include overtime). Range of responses: \$25.96 to \$60.00 per hour, with an average of \$31.42 per hour.

Historical Data Trends:

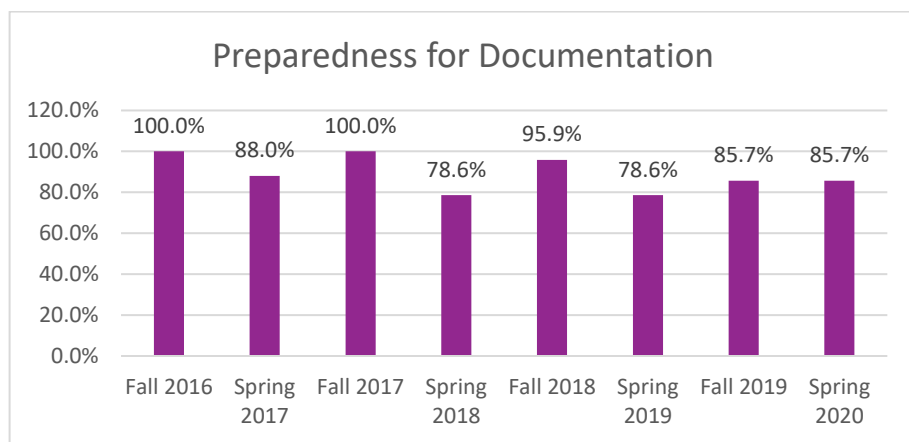


JJC Community: (39 out of 39 who are employed as a nurse responded): Employment within the JJC community district is 41% (n=16) and 59% (n=23) outside the JJC community district. Previously, we asked the graduates if they worked in or out of district. Since the in-district numbers were decreasing, the nursing faculty decided to just ask what city they are employed in. The faculty felt that some students may not be fully aware of how large the JJC district really is, thus they may had thought that they worked out of district if they did not work in the immediate Joliet area. Several students are out of state: Virginia, Texas, Utah, Indiana, and Wisconsin.

Historical Data Trends:



How well prepared were you in your job as a registered nurse related to documentation? (39 out of 39 who are employed as a nurse responded). The nursing faculty identified in past graduate surveys that documentation consistently scored at or below our expected level of achievement (ELA) of 80%. The nursing program does provide practice documentation in each semester, but the faculty were not sure why the students rated this area as “somewhat unprepared” or “very unprepared”. Thus, the faculty decided to ask a specific question about documentation and provide a commentary section to find out more specific needs/concerns in order to make changes in the program regarding documentation.



As this graph demonstrates, we did reach our expected level of achievement (\geq to 80%). Nearly 86% responded positively to documentation preparedness. 44% (n=17) of respondents indicated they were very prepared and 49% (n=19) felt somewhat prepared, but 7% (n=3) felt somewhat unprepared to document in their job as a registered nurse. Comments given to us by respondents to indicated their choice of level of preparedness included:

- *I think documentation is different everywhere you go. It would be nice to have a cheat sheet to go off of when documenting, in general. But it also helps to know key phrases like “at this time”.*
- *Documentation is different depending on your workplace.*
- *We could have focused more on it in school. We were made to purchase documentation software but only used it 2 or three times during the first semester.*
- *Different systems, cannot possible learn them all.*

- *Very prepared.*
- *We did not practice documentation enough in the nursing program.*
- *I never worked as a PCT or a CNA. I feel all students should have to get a PCT job while in school.*
- *As an LPN notes are the same but RN's admit, I don't.*
- *Inability to chart during clinicals. It takes up a LOT of time during a 12 hour shift.*
- *Honestly, we didn't practice enough regarding documentation.*
- *Because school always reminded me how if it's not documented it's not done and there has been times that I can go back to documentation to prove a point.*
- *Paper charting was a focus in school, electronic charting is the primary source of charting in today's healthcare.*
- *I do not feel prepared enough to work in an acute care setting.*
- *Documenting in the OR is different, but I also didn't get many opportunities to practice while in nursing school.*
- *We had very, very minimal chances at documenting during our nursing program, In the first semester, we were required to purchase DocuCare but used it less than 3 times and received no feedback on it.*
- *Very prepared.*
- *I wish there would've been other synonyms for describing patients. I have trouble finding the right words to describe my patients.*
- *We never actually documented in a computer. Just takes getting used to.*
- *Documentation should be expanded more upon.*
- *School and real-life charting is unfortunately very different. And, I feel we needed more practice with computer charting, and not so much paper charting.*
- *I feel prepared when documenting. I learn a lot on the job on how to improve on how to document properly.*
- *The system at my hospital is completely different than those we trained on during clinicals.*
- *Not a lot of time spent on documentation. It would be nice if we could somehow document during clinicals to get more of a similar experience to working in the field.*
- *EMR are all different.*
- *In clinicals, it was hard to actually document in the system itself. Once I went into preceptorship, I got more insight on the documentation on the job.*

- *I think it takes experience to do things really well and a new grad it's impossible to be very experienced in anything.*
- *Everything I learned, I learned from another nurse. We never documented in nursing school.*
- *I am very prepared.*

Update: The nursing faculty has agreed to implement an EHR program through one of the textbook publishers with whom JJC works. There was a selection process that took place and the faculty decided on DocuCare. All new students were required to purchase this program starting in Fall 2019. The graduates of the Spring 2021 semester will be the first set of students to have the EHR documentation tool implemented into the program.

How well prepared were you in your job as a registered nurse related to the following? Graduates (39 out of 39 who work as a nurse responded). Expected level of achievement (ELA) is 80% for each line item for responses “Very Prepared & Somewhat Prepared”. We reached our ELA for each line item.

| | Very Prepared | Somewhat Prepared | Somewhat Unprepared | Very Unprepared | Rating of Very Prepared & Somewhat Prepared |
|--|---------------|-------------------|---------------------|-----------------|---|
| Nursing Skills (catheterization, IV, IM, suctioning, etc.) | 20 | 19 | 0 | 0 | 100% |
| Utilization of the nursing process | 33 | 6 | 0 | 0 | 100% |
| Delegation skills | 26 | 12 | 0 | 1 | 97.4% |
| Patient/family physical assessment skills | 31 | 8 | 0 | 0 | 100% |
| Patient/family psychosocial assessment skills | 28 | 10 | 1 | 0 | 97.4% |
| Nursing care prioritization | 31 | 8 | 0 | 0 | 100% |

| | | | | | |
|--|----|----|---|---|-------|
| Cultural competence | 31 | 8 | 0 | 0 | 100% |
| Using evidenced based practice in patient care | 28 | 9 | 2 | 0 | 94.9% |
| Critical thinking skills | 29 | 10 | 0 | 0 | 100% |
| Nursing care prioritization | 31 | 8 | 0 | 0 | 100% |
| Patient communication skills | 36 | 2 | 1 | 0 | 97.4% |
| Legal/ethical issues | 24 | 13 | 2 | 0 | 94.9% |
| Clinical decision making skills | 26 | 12 | 1 | 0 | 97.4% |
| Patient/family teaching skills | 23 | 13 | 3 | 0 | 94.9% |
| Collaboration with other healthcare members | 26 | 12 | 1 | 0 | 97.4% |
| Medication knowledge/skills | 22 | 16 | 1 | 0 | 97.4% |
| Patient safety issues | 33 | 5 | 1 | 0 | 97.4% |

Comments from graduates on preparedness:

- *I work in assisted living so I don't feel that I have all the experience in this particular area.*
- *I think in practice it's different than school. In school everything is perfect and there is a hoyer and a second nurse at your side. In practice, your by yourself and your patient has just had her diarrhea and she can't turn and you don't have wipes in the room because they're stocked in Omni cell with the diapers and new sheets.*
- *Learn more about culture diffences on my own.*
- *It was hard to get experience with certain skills depending on the hospital or unit you were on.*
- *Not enough practice.*
- *I need more experience and practice.*
- *Unprepared because we were not exposed or speaking with families.*

- *Lack of confidence, need more practice.*
- *I have yet to successfully get an IV start as a nurse. Lab hours mean nothing on human veins that don't have previous poke holes in it.*
- *Need more clinical practice.*
- *I felt very prepared but wish we had more experience with starting IVs.*

Historical Data Trends:

| | Dec 2016 | May 2017 | Dec 2017 | May 2018 | Dec 2018 | May 2019 | Dec 2019 | May 2020 |
|---|----------|----------|----------|----------|----------|----------|----------|----------|
| Nursing Skills (catheterization, IV, IM, Suctioning, etc) | 93% | 90% | 100% | 96.4% | 87.5% | 96.4% | 91.4% | 100% |
| Utilization of the nursing process | 100% | 97% | 100% | 100% | 95.8% | 100% | 97.2% | 100% |
| Delegation skills | 96% | 90% | 100% | 96.4% | 95.8% | 96.4% | 91.4% | 97.4% |
| Patient/family physical assessment skills | 96% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Patient/family psychosocial assessment skills | 96% | 97% | 100% | 100% | 95.8% | 100% | 97.2% | 97.4% |
| Patient/family spiritual assessment skills | 89% | 94% | 100% | 96.4% | 90.8% | 96.4% | 96.4% | 97.4% |
| Nursing care prioritization | 96% | 97% | 100% | 100% | 100% | 100% | 100% | 100% |
| Cultural competence | 96% | 94% | 100% | 100% | 95.8% | 100% | 97.1% | 100% |
| Using evidenced based practice in patient care | 96% | 94% | 100% | 96.4% | 92.2% | 96.4% | 94.3% | 94.9% |
| Critical thinking skills | 96% | 90% | 100% | 96.4% | 90.8% | 96.4% | 100% | 100% |
| Patient communication skills | 100% | *N/A | 100% | 100% | 95.8% | 100% | 100% | 97.4% |
| Legal/ethical issues | 93% | *N/A | 100% | 100% | 87.5% | 100% | 91.4% | 94.9% |
| Clinical decision making skills | 100% | *N/A | 100% | 100% | 95.8% | 100% | 97.1% | 97.4% |
| Patient/family teaching skills | 93% | *N/A | 100% | 96.4% | 90.8% | 96.4% | 97.1% | 94.9% |
| Collaboration with other healthcare members | 86% | *N/A | 100% | 96.4% | 90.8% | 96.4% | 94.3% | 97.4% |

| | | | | | | | | |
|-----------------------------|------|------|------|-------|-------|-------|-------|-------|
| Medication knowledge/skills | 93% | *N/A | 100% | 96.4% | 95.8% | 96.4% | 94.3% | 97.4% |
| Patient safety issues | 100% | *N/A | 100% | 100% | 95.8% | 100% | 100% | 97.4% |

***NOTE:** In the May 2017 graduate survey, the final 7 categories were inadvertently omitted in the survey data collection (as indicated by N/A). This was rectified for the Fall 2017 graduate survey report.

Did Covid-19 have an impact on taking the NCLEX Exam or getting results? (42 out of the 45 who took the survey provided comments). 45% (n=19) replied “no”, 7% (n=3) replied “yes”, 7% (n=3) replied “delay”, and 41% (N=17) provided more insight. See comments below:

- *I had to schedule a test date later than I would've liked to test due to the capacity of testin facilities. I also traveled to Peoria to take my exam.*
- *I wasn't able to schedule my exam as quickly as I wanted but I got my results back in a week.*
- *A little bit, had to wait for an open spot a bit longer to take the test. I had 60 questions and felt very confident.*
- *I was able to take within 1 month but had to check the site multiple times a day to find an early date.*
- *Close area dates were hard to come by.*
- *Yes, I tested later than anticipated but results were given within the time specified.*
- *I believe so, I pass my exam on my second attempt. The first timewhen I took the test I was so anxious sue to the fact that I've never taken a test wearing a mask before. I think that was one of the reasons because I failed my test the first time.*
- *Yes, there was a delay and very litle availability to sit for it.*
- *Yes, wasn't comfortable wearing a mask when I already felt like I couldn't breathe.*
- *Yes. Had to wait 8 weeks to get approval from state to test because they were so backed up. Drove to st louis to take exam because I didn't want to wait another 2 months to take the exam in the Chicago area.*
- *Yes. Delayed NCLEX verification. The earliest I could sit was June 21st.*
- *Kind of, I registered for NCLEX after graduating in May, but was unable to take til July which allowed me time to study. And no I was able to get my results in a timely manner.*
- *Yes I wasn't able to take the exam as early as anticipated due to covid.*
- *Yes- I had to wait 3 months to take nclx. I was hoping to take it sooner than that.*
- *The testing centers were closed for a period of time, so it pushed back all exam dates.*
- *Yes I had to take it in Wisconsin, I only had 60 questions as well.*

- *Yes, I wanted to take the test as early as May or June, but was unable to take it until July due to overload and things being backed up.*

If you are currently employed as an RN, what impact, if any has Covid-19 made on you as you started into your nursing career? Here are their comments:

- *I became the lead COVID nurse in my building, as my boss saw that I was the most competent, complimenting me on my keen assessment skills and ability to keep critical situations under control. I worked long hours and 5-6 days a week during this period of time at work. I believe COVID helped me grow as an RN during this time. COVID helped me understand a lot of principles taught during school in the real-life scenario.*
- *The hours and balancing work and life and family. I missed a lot because of work or having to stay later because of short staffing. My kids being in E-school was awful and trying to complete the ADN and getting mandated and working 60hrs a week was brutal.*
- *Infection control x 10*
- *COVID had an impact on my career in a positive way because there were more positions in other areas beside hospital experience.*
- *Lots of PPE*
- *More PPE*
- *It made me hate my current job and actively looking for employment outside the hospital.*
- *I work as a case manager RN so for me getting to do in person assessments with patients has been difficult.*
- *I just don't want to put any of my family at risk bc I work in an environment with sick people everyday.*
- *Weekly covid testing*
- *Well, I have Covid right now. I've been working with Covid patients which has been a great learning experience. I've been able to identify patients that have the signs and symptoms of Covid, and after we isolate them, they test positive.*
- *Too many staffing issues.*
- *COVID added a new barrier to the patient. There is little access to the patient without a whole process and it's difficult to ask questions when donned in an isolation room.*
- *I am working virtually because I was unable to find work as an RN in an acute care setting.*

- *Since I work in the OR, we have had to cancel numerous surgeries as well as educational meetings.*
- *It gave me time and a half for 2 months.*
- *Staffing concerns and overall patient demand.*
- *PPE skills greatly practiced.*
- *Very challenging being a new grad during a pandemic. Short staffed, very sick patients.*
- *Staffing is extremely unsafe.*
- *I'm currently working on a covid unit.*
- *I am grateful for my dream job in the ICU, but it has been hard with so little staff and so many patients. I already feel burnt out watching most of my elderly patients die a horrible drawn out death from COVID.*
- *It has made me even more passionate about promoting social distancing, wearing masks and abiding by all guidance so that we can prevent the hospital system from getting overwhelmed and overrun.*
- *The greatest impact the pandemic had on me was emotionally. I work in critical care and the majority of our patients are covid patients that are struggling to live. Nursing school couldn't prepare me to watch people suffer from an uncontrolled pandemic. It's absolutely heart breaking.*
- *More opportunity to work extra shifts.*
- *The other nurses on my unit are stressed out, and overworked. Training someone (me) was the last thing they wanted to do and it definitely showed.*
- *It made starting my job take longer.*
- *Working more hours and was pulled off orientation weeks early.*
- *Caught it from a patient.*
- *Hard to start job. Wisconsin State took a very long time to look at my application for my license. I could have started at the hospital a month earlier if I had my license when they had their "expected" time.*
- *I have been home for the last week because I had felt sick at work on Tuesday with a bad headache. They had to rule out COVID so I was to stay home until the test results came back, resulting in pushing off my training for a week.*

- *More worried to infect my family.*
- *I'm not employed as a RN. I do not want to expose my elderly parents to Covid.*
- *Times are unpredictable now so it's a learning process not only for new nurses but everyone as well.*

Comments made by graduates of ideas/suggestions not addressed in the survey are noted below:

- *JJC Nursing program is rigorous and I applaud all the instructors I had along the way. The structure of the material allows for recall. There were many times I was able to touch back on information when necessary because the program takes emphasis on learning the material and not just memorizing. I felt prepared with my transition into the RN role.*
- *I think that JJC nursing program was amazing perfect for preparing the ADN. However it was not easy for a nontraditional student to complete. My suggestion would be to offer 2-3hr babysitting for students with children during the evening classes. Help students get Medicaid and food stamps if they qualify. It's temporary and it alleviates some of the pressure off students raising a family and trying to improve their career opportunities. Be more child friendly in general. As a society, We treat children like pets. Expecting others to not have them if they can't take care of them. As a community college, JJC is the first choice for people wanting to switch careers or ones trying to make life better. Remember that most women were pulled from the workforce to be stay at home parents so they could do e-learning with their children. These women may need skills down the line to return to the workforce. Childcare is necessary for that to happen. Offer basic health services/clinic for students. Offer vaccinations and chrome books to rent during the school year/day.*
- *I would advise students that most helpful jobs would like at least one year of experience so it would be beneficial to work as a CNA or SNA as soon as possible.*
- *I hope the May 2020 graduates will be properly recognized when possible.*
- *Great Nursing Program!*
- *I feel like I needed more hands on experience with patients after I graduated.*
- *As a nurse I value my PCT and now see all the Nursing students just standing around not doing much. I think it would be good to have them work one day a week as a PCT for an entire semester before they do clinical at a sight. I think it would help them become more confident.*
- *Covid as ruined my pay and delayed my RN position. I feel well prepared since I will be at the same job and am familiar with the systems.*
- *I found the skills Lab was so helpful prior to COVID and the weekend lab hours really made a difference for me!*
- *JJC nursing faculty did an amazing job! Thank you so much!*

- *Age is not an obstacle when you're determined to accomplish your dream. I'm so thankful for being part of JJC, this college gave me the opportunity to move up, and to prove my self that regardless of the age you can accomplish anything that you want! By the way I'm 44y/o.*
- *Nothing could have been done differently under the circumstances. It was unfortunate that we ended the way we did and a lot of us missed out on the 1:1 experience. I feel like that would have helped some confidence issues I had the first few weeks of my current position.*
- *Spring 2020 pinning and graduation was handled very poorly. Many students were left disappointed and frustrated at a nursing school they had otherwise loved. It felt as though we were forgot about and things were all thrown together at the very last minute.*
- *During the program, there was a lack of communication between the curriculum and the staff to the students. There was not continuity of expectations across the staff and the consequences and disciplinary action was not standardized. For example during Pharm when it was provided online; some students missed the first couple of tests (which would have failed them) yet were still able to make them up and continue the semester and pass. There were multiple ways to get help and a week each test administration, so there should not have been any excuses accepted. However, there were exceptions!!!!*
- *I love the nursing program at JJC & I'm proud to be an alumni!*
- *I feel that the commitment to a BSN program prior to graduation should have been stressed more. If I hadn't committed to a BSN program, I would not have been a candidate for my current job. I also feel that job resumes, applications, and interview help would have been a huge benefit.*
- *Please build students, don't tear and nit pick their assignments/skills. Doesn't help with confidence building.*
- *Definitely need to spend more time on IV starts. Let us practice on our willing classmates.*
- *I love JJC! I feel that this program prepared me so much!*
- *I wish we had a better graduation.*
- *JJC should not force students who have religious exemptions into getting the flu vaccine. It is a huge shame that the Dean feels the need to bully and degrade students who have strongly held religious beliefs. This needs to be addressed.*
- *No graduation, no pinning, no picture review.*
- *I think JJC did a great job preparing me regardless of the answers I provided regarding how prepared I felt. I think there is always going to be a learning gap as a new grad, so I would not have expected JJC to do anything more than they did to prepare me as a nurse. I am working*

in a cancer center, so I have a lot of chemotherapies to learn. There is no way JJC could have prepared me for that.

- *Simulation day sucked!!! Every semester except the last. Also, I feel that nursing school instructors made us feel very scared to be a nurse except the instructors our last semester. If the instructors semester 1-3 treated us the way semester 4 did, we would all feel way more confident as a new nurse.*

- *I mentioned in another section, I feel very prepared but wish there were more IV hands on experience rather than 2-3 day IV coverage and starting on a model arm. I did learn a lot from the knowledge I was given from the seminars and the small practice, however, I would've felt more confident as I felt in all other fields had I had more of that experience.*