

Exploring the Influence of Clinical Externships on Newly Graduated Nurses' Transition to Practice

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This article is based on Jessi Humbrey's master's dissertation (2023). | L'article découle du mémoire de maîtrise réalisé par Jessi Humbrey (2023).

The transition period from student to nurse is challenging and a source of significant stress among newly graduated nurses (NGNs) (Chernomas et al., 2010; Duchscher, 2009; Teskereci & Boz, 2019; Wakefield, 2018). The transition requires a refinement of practical skills, socialization into the professional role, critical thinking, decision-making, and working with interdisciplinary team members (Cantrell & Browne, 2005; Frögeli et al., 2019). While clinical placements and nursing curricula are structured to address some of this dissonance, NGNs continue to struggle with the transition from student to professional, creating stress and, in some instances, intention to leave the profession (Brook et al., 2024; Laschinger et al., 2016). Health care facilities and government organizations have acknowledged this difficult transition and established programs to help alleviate strain on novice nurses. One such type of program is a clinical externship, which was developed in the 1970s to recruit and retain NGNs (Cantrell & Browne, 2005; Ruth-Sahd et al., 2010).

Background

In Ontario, students enrolled in their second, third, or final year of study of a bachelor of science in nursing program can be employed by hospitals as unregulated health care providers (Ministry of Health of Ontario, n.d.) and are often referred to as *clinical externs*. These clinical externs work as part of the interprofessional team under the supervision of a registered nursing professional (Ministry of Health of Ontario, n.d.). The responsibilities, including tasks and skills, qualifications (including year of study), and hours of work allowed are determined by each organization and influenced by provincial legislation.

During the COVID-19 pandemic, the Ontario government provided funding opportunities to support externship programs within hospitals. The programs were created to maintain the provision of care while supporting staffing during shortages of nursing and unregulated care providers, such as personal support workers (Friesen, 2021). The provincially funded program adds to the other provincial program, the Nursing Graduate Guarantee (NGG) program. The NGG began in 2007 to provide full-time employment and to help with the transition of NGNs (Ministry of Health of Ontario, 2024). The NGG differs from clinical externships in that participants must have graduated from post-secondary education and cannot have been employed as a nurse in Ontario in the 6 months prior to starting the program (Ministry of Health of Ontario, 2024). In contrast, the externship program focuses on students working in unregulated roles. Hence, NGNs can participate in both programs.

Similar programs for undergraduate nursing students operate in other provinces (British Columbia College of Nurses and Midwives, 2020; College of Registered Nurses of Manitoba, 2022; Nova Scotia Health Innovation Hub, n.d.). The terms *employed student nurse* (ESN), *undergraduate nurse employee* (UNE), and *undergraduate student nurse* (USN) are used, respectively. As with the Ontario clinical extern program, each of these programs uses undergraduate nursing students as unregulated care providers whose scope of practice is defined by their respective colleges and their reserved acts. Under the supervision of a registered staff member, they work in a paid position that they schedule around their academics.

Clinical Externships

Clinical externships constitute one strategy to support the NGN transition to practice. White et al. (2019) used a quasi-experimental before-and-after design to evaluate a summer externship program's influence on nursing students' confidence and anxiety in clinical decision-making in the northeastern United States. Their findings indicated significant improvements in

self-confidence and decreased anxiety among participants compared to peers who did not engage in such programs. The externship group was notably advanced in clinical decision-making skills, including information gathering and critical thinking, which are crucial for effective nursing practice. Similarly, Shipman et al. (2016) conducted a phenomenological study involving nursing graduates who completed an 800-hour clinical externship. Participants reported feeling well prepared for the transition to professional roles, citing increased confidence in decision-making, prioritization of care, and interactions with interdisciplinary teams. The externship experience provided valuable insights into the responsibilities and scope of nursing practice, aiding participants in making informed career decisions. Shipman et al.'s findings align with those of Ruth-Sahd et al. (2010), who explored how externships influenced nursing students' beliefs and values about their profession and reported that participants expressed enhanced confidence and a deeper appreciation for the nursing role.

Students participating in externship programs have reported personal growth, enhanced self-confidence, and reduced anxiety in providing care (Knepp et al., 2022). Furthermore, researchers reported that an intensive care unit externship at an acute care hospital in the United States facilitated the integration of theoretical knowledge with practical skills, allowing the student to observe and participate in patient care under supervision, thereby enhancing their competence and readiness for clinical practice.

In addition to individual student growth and development, Ruth-Sahd (2016) explored the impact of externships on interprofessional teamwork and workplace environments. Participants in an 8-week externship reported improved understanding of collaborative practice and its impact on patient outcomes. They emphasized the importance of effective communication and teamwork in providing quality care, underscoring the externship's role in fostering a supportive and professional work environment. Furthermore, Ruth-Sahd et al. (2022) conducted research on nursing students participating in an externship focused on interprofessional collaboration and self-advocacy. Participants gained valuable insights into various health care roles through observation and active engagement, leading to increased confidence and competence in interdisciplinary teamwork.

Limited research is available related to clinical externship programs in Ontario, with most research focusing on programs in the United States. There is a lack of available research on the critical transition from student to novice nurse and the influence of clinical externship programs on this transition. This perspective provided the following research question: How do new graduate nurses in Ontario feel that their participation in a clinical externship program influenced their transition from student to nurse?

Methods

Interpretive description (ID) was the chosen methodology for this research based on its emphasis on understanding clinical phenomena and generating knowledge that is relevant and useful to nursing practice (Thorne, 2016). First introduced by Dr. Sally Thorne in 1997 to explore associations, relationships, and patterns within a phenomenon, ID borrows elements from the more traditional qualitative techniques, including constant comparative analysis from grounded theory, multiple ways of data collection from ethnography, and the acknowledgement that multiple realities contribute to subjective human experience (Thorne, 2016). Ethical approval was obtained from Trent University's Research Ethics Board (No. 28243).

Sample and Recruitment

Guided by the current state of knowledge and the research question, we sought a purposive sample of registered nurses (RNs) who participated in a clinical externship program while in school and were within their first year of employment as RNs in Ontario. Recruitment efforts included sharing a poster outlining the study on LinkedIn and with management at several hospitals in Ontario, who in turn shared the poster with former clinical externs and other staff at their respective sites. Initially, recruitment relied on potential participants' reaching out via email once they had seen and responded to the poster either on LinkedIn or at their place of employment. Later in the recruitment stage, individual messages were sent via LinkedIn to newly graduated RNs outlining the study's purpose and asking if they were interested in participating.

Interested participants were given options for the time and means of the interview (in-person or virtual). Providing participants with the opportunity to interview virtually or in person helped to reduce geographical constraints and allowed greater opportunities to reach participants throughout Ontario (Irani, 2019). Participant recruitment started in January 2023 and continued into June 2023, resulting in a sample size of eight. Each participant provided written informed consent before the interview, and the first researcher confirmed consent verbally before interview recordings began. All participants were assigned a pseudonym to maintain confidentiality.

Data Collection and Analysis

Data collection was completed between March and July 2023 through semi-structured interviews. The first researcher developed questions to understand how the participants felt their externship influenced their transition to practice. Though questions were structured with an interview guide, they were open ended, and probing questions were asked when necessary to clarify participants' meaning in their responses. The constant comparative method was used to categorize and compare the data collected for this study (Thompson Burdine et al., 2021). Interviews were audio recorded and then transcribed verbatim using both an online transcription service and manual transcription. The first researcher took notes during the interviews to capture some of the participants' non-verbal language, such as when the participants smiled or laughed. After transcription, the first researcher read the interviews multiple times to gain an overall understanding of the experiences and to identify which statements and phrases seemed particularly revealing to develop themes that captured the essence of the experiences. To minimize personal bias throughout the research process, the first researcher employed reflexivity by consistently reflecting on personal perspectives and preconceptions and used peer debriefing to ensure the findings accurately represented participants' experiences and not one's own assumptions.

The rigour in ID, as outlined by Thorne (2016) and Jackson et al. (2022), involves several key aspects: epistemological integrity, representative credibility, analytic logic, and interpretive authority. Epistemological integrity ensures alignment from the nature of knowledge to research methods. Based on rigour criteria and techniques outlined by Jackson et al. (2022), we explored different qualitative methods before selecting ID and sought guidance from professors with knowledge and training in qualitative methods. The study sample included novice nurses from several acute care hospitals and cities throughout Ontario to ensure a representative sample.

Analytic logic requires clear reasoning from research question to interpretive claims, supported by an audit trail (Jackson et al., 2022). For this study, an audit trail was kept in a journal and discussed with the thesis committee throughout the entire process to support clear and logical steps and to document some of the findings that emerged from the data.

Lastly, interpretive authority necessitates trustworthy interpretations beyond personal bias, supported by methods such as research journalling and frequent discussion with committee members. We applied these strategies throughout the study to uphold interpretive rigour.

Findings

Eight participants completed interviews. Participants worked as RNs from seven acute care hospitals in Ontario, including rural, urban, and tertiary centres, and were employed in various settings, including the emergency department, intensive care, neonatal and surgical units, and float or resource pools. Six participants were female and two were male. For six of the participants, nursing was their first career. One participant had completed the NGG in addition to a clinical externship. Three themes were identified: developing self-efficacy, developing a professional identity, and being on the inside.

Developing Self-Efficacy

The first theme, developing self-efficacy, was defined by the development of psychomotor and communication skills gained during the externship, resulting in a sense of self-efficacy. Discussions with participants showed that they could learn both by doing and through vicarious learning.

Learning by Doing

Many of the participants reported that one of their main motivations for entering the clinical externship was the opportunity to become more comfortable applying many of the hands-on skills expected of them as a nurse. Participants reported that practising these skills in a controlled environment led to an increase in their confidence once they were practising on their own. They took pride in their achievements, which assisted the overall transition to being a practising nurse. For example, one participant, Henry, felt that the repeated exposure to clinical helped his confidence:

I think a lot of it was, as I had more and more exposure to those little [things]—because you're right, you don't think so much about those little things [and], like, get bothered. Not bothered, but you're not as stressed as much because of even just the exposure.

Another participant, Fran, believed the externship program helped them gain confidence and skills:

[The program] made me feel pretty competent. [It] made me feel like I knew what I was doing, and I can actually help them out rather than, like, just being clueless about things. I feel like it really helped me gain confidence and important skills.

Participants reported that they felt the opportunity for practising skills was limited in lab settings while in nursing school and that the clinical externship gave them the opportunity to practise skills in a real-world setting. Emphasizing this, one participant, Anna, said:

We only got to practise skills for 1 week in lab and then it was on to the next skill. So, being able to take that and put that into practice was huge, because catheterizing a dummy is much different than catheterizing an actual person.

Sometimes, the externs were exposed to new skills that they did not have an opportunity to practise in nursing school, as illustrated by comments from one participant, Gail: “Even skills

like feeding patients right, or dysphasia—I've never done that before. And, you know, it's not something you can learn in a lab effectively."

Learning Vicariously

As clinical externs, participants could also observe different skills performed by their mentors and the other nurses they worked with. Even when participants were not able to practise the skills themselves, they felt they benefited from observation. Through this repeated exposure to different skills, assessments, and situations, participants perceived that they gained confidence through vicarious learning. Anna shared, "I learned super great focus assessment skills just by being able to listen to the triage and listen to their assessments, and that was probably the most valuable thing."

These opportunities for observing nurses also supported the participants' learning from different approaches and clinical situations. For example, one participant, Daniel, shared, "I got to see everyone's perspectives on, you know, working through a clinical situation and just identifying signs and symptoms and, you know, subtle changes in clinical presentations of patients."

Developing a Professional Identity

In addition to developing confidence in completing psychomotor skills and communicating with staff and patients, participants discussed the development of other competencies, which expanded into the theme of developing a professional identity. This theme is discussed under the following sub-themes: developing leadership skills and developing values.

Developing Leadership Skills

Many of the participants talked about their experiences working with nurses as clinical externs and how willing the nurses were to teach them. Now, as practising nurses, several of the participants talked about their own experience working with clinical externs and how they wanted to continue their willingness to share and teach students, clinical externs, and newer nurses. For example, Daniel stated, "So, I tried, you know, with my limited experience as a nurse, ... I try to shed some, at least, some knowledge ..., some of my experiences [with] them from my transition into being a nurse." Although one participant, Cara, had some hesitation teaching nursing students, they were still willing to support externs:

At this point in time, I would not want a consolidation student, but I can definitely teach some externs about, you know, some medications or, like, just some stuff that they might not be aware of at this point in their education, and hopefully that would help them with some things because whatever I learned in my externship, ... things were really solidified for me.

Developing Values

Many of the participants talked about how much they valued spending time with patients when they worked as externs. Gail, for example, stated:

I think it really makes a big difference as a nurse; like, I could see how much the patients really appreciated that extra time, and I think in some ways it's helped me to prioritize that patient interaction, like, relationship development, because I think it's really important.

Participants also discussed that they valued being able to practise soft skills with their patients. They valued making patients comfortable through therapeutic touch, listening, and meeting their psychosocial needs, as Anna expressed:

I feel like [a nurse] when I really can, like, make a kind and positive impact on somebody. The rest of the things, like the skills and the catheters, everything else I do, that's just kind of part of the job for me. Like, it doesn't really make me feel like a nurse, but it's the little things that I can do to make people comfortable and happy.

Being on the Inside

Working as clinical externs provided participants with an insider view of nursing. The sub-themes that emerged included the realities of nursing, knowing the organization, and feeling supported.

The Realities of Nursing

One participant, Brittany, discussed that the repeated exposure and opportunity to float to multiple units gave her a more realistic expectation of what nurses do day to day: "With the externship, I felt like it did change my perspective on nursing, because I actually saw what nurses do in a day rather than just, I guess, thinking about it or reading about it in a book." This exposure also allowed participants to understand what would be expected of them once they became NGNs. In her experience floating to different units, one participant, Ellen, stated: "Sometimes we were given the opportunity to float to different floors. So, then you were able to see where a new grad nurse might start out, what they might have to do, certain things like that."

Knowing the Organization

Many of the participants talked about how the clinical externship experience made them more comfortable when they started as an NGN because they were already familiar with the organization. For example, Brittany talked extensively about how she felt more comfortable starting as an NGN because she had done her externship in the same department:

I feel like the extern role specifically has helped ease the transition a little bit because I'm already familiar with the organization and, you know, how to contact various people if needed, how to even, just, work [the charting system], which was completely different than what I was using at school, like, in my placements at school.

Cara also discussed how externing on the same floor that she was now working on gave her a good sense of the flow of the department and made her more confident when she started as an NGN:

It was nice because I was very familiar with the floor, like where everything is, so it gives you the confidence. You kind of know what kind of environment you're in, because it can definitely get a little bit hectic, so you understand the environment. I think it definitely did, like, [make] me more confident. You just know the flow, because it takes a second.

This sentiment was echoed when Henry talked about how his experience allowed him to be comfortable with the facility, including where to find diagnostic imaging, different policies and procedures, and the utility rooms.

Feeling Supported

Most of the participants talked about how they felt supported and like part of the team when they worked as clinical externs. To some participants, this support and sense of belonging felt different from their clinical placements. One participant talked about how as a student on clinical placement, it “felt very [much] like [the students] versus [the nurses].” For example, they felt that they were not welcome in the nursing station. Gail discussed how working as an extern made her feel more like part of the team:

Even, like, in the break room, you know, I could be with the nurses. When I was in my placements, like, separate in the basement, cafeteria area, and we weren’t allowed to discuss stuff like political things like that. ... I felt more part of the team.

This sense of belonging and support was carried over into their transition to practising on their own. When asked at the end of the interview what stood out to her the most about her externship, Brittany commented on her relationships. She talked about how it was “super beneficial” and that it was “nice having that support to fall back on when things [got] rough.” Ellen also left her externship feeling supported, which led to her feeling more supported as an NGN:

It didn’t really ease the anxiety as much, but it still made me, okay, like, it made me feel like I have support. If anything goes wrong, like, everyone’s still there. It reinforced teamwork, collaborative efforts; ... as an extern, you still have to communicate with different disciplines.

Discussion

This study investigated how participation in clinical externships can influence the transition to practice for NGNs in Ontario. The data highlight a positive impact on participants’ transition experiences, unveiling three key themes: developing self-efficacy, developing a professional identity, and being on the inside.

Self-efficacy, according to Bandura’s (1997) social learning theory, refers to one’s perceived ability to perform tasks successfully. Self-efficacy and confidence have been used concurrently in the literature, and although participants did not use the term *self-efficacy*, they used words such as *confidence*, *comfort*, and *competent*. Those terms are used in this discussion to stay connected to the findings.

Participants reported strategies aligning with Bandura’s theory, including learning by doing (personal achievements) and vicarious experiences (observing others). The transition from student to NGN requires the development of several different skills, including psychomotor skills, assessments, and communication skills. However, NGNs often struggle with their self-efficacy in developing these skills independently, which can lead to stress and feelings of inadequacy (Chernomas et al., 2010; Kachaturoff et al., 2020; Toothaker et al., 2022). When asked what motivated them to work as clinical externs, many participants reported a desire to become more comfortable with the everyday tasks of nursing, such as taking vital signs, assessing patients, providing care, and communicating with patients and families. As reported by participants, students learn and practise a skill in the laboratory, then move quickly on to the next skill. The study emphasized the importance of repeated practice and support in enhancing NGNs’ self-efficacy, critical for their successful transition.

Stagnation from initial skill learning in laboratory or clinical practice has been shown to occur over time without repeated refreshing and practice and that the ability to perform a

psychomotor task accurately and consistently over time comes with repetition (Barsuk et al., 2015; Gonzalez & Kardong-Edgren, 2017; Oermann et al., 2016). Lacking opportunities for repetition and skill development is congruent with research related to the challenges of transition to practice for NGNs. Many NGNs come into practice feeling that they lack practical knowledge and dexterity, leading to a lack of confidence and self-efficacy (Ortiz, 2016; Prokop et al., 2021; Toothaker et al., 2022). This finding aligns with the current study, in which several participants reported that they were able to take skills learned as a clinical extern and apply them to their own practice, giving them a sense of confidence and independence.

Participants also reported the benefit of observing skills in the clinical setting, recognizing the benefit of vicarious experience in developing self-efficacy. There is ample evidence that students and NGNs can learn through expert modelling (EM), which is a form of vicarious learning. EM allows individuals to observe expert behaviour prior to practising and building their own skills (Chernomas et al., 2010; Franklin et al., 2020; Jarvill et al., 2018). Even in cases in which participants were not able to perform many skills due to being placed in critical care areas, they still reported that observing the procedures made them feel more self-efficacious once they started their own practice. For example, a participant who externed in the ICU and was not allowed to complete many hands-on skills reported having “seen everything,” leading the participant to feel more comfortable once they started independent practice. This vicarious learning expanded beyond just psychomotor skills. Participants also reported learning how to communicate with patients, families, and professional staff through observation and listening.

Developing a professional identity is crucial for NGNs and is intertwined with their socialization into the nursing profession. Professional identity in nursing is defined as “a sense of oneself, and in relationship to others, that’s influenced by the characteristics, norms, and values of the nursing discipline, resulting in an individual thinking, acting, and feeling like a nurse” (Hinkley et al., 2023, p. 174). Several participants discussed the effect of the clinical externship on their sense of what is important in their nursing practice. One theme that emerged was valuing time with patients. Participants discussed that being clinical externs gave them the freedom and opportunity to spend additional time with patients and build relationships. Previous studies suggest that NGNs are often task oriented rather than focused on building relationships and communicating with patients (Chernomas et al., 2010; Duchscher, 2012; St-Martin et al., 2015). For participants in the study, the extern role provided an opportunity to focus on the relationship building that NGNs may have difficulty finding time for.

One of the most enlightening themes that emerged from this study was the nurse as a leader, as it stands in contrast to some previous research on NGNs and leadership. Multiple participants discussed the significance of the willingness of nurses to teach and that they try to emulate this willingness in their own practice. While acknowledging they are still NGNs and have more to learn, participants sought to include the clinical externs in their own practice, showing them skills, educating them about medications, and delegating tasks to them. Reflecting on their own experiences as clinical externs, they wanted to ensure this new group of students had similarly positive experiences. Participants discussed wanting to share information with the clinical externs and ensure externs participated in more than simply “brief changes and checking vital signs.” This finding contradicts earlier research on the leadership skills of NGNs. Previous research has identified that NGNs often struggle with providing direction to other registered and non-registered staff as they have difficulty asserting themselves and had limited or no experience in this role during their undergraduate education (Casey et al., 2011; Duchscher, 2009; St-Martin et al., 2015).

Based on the current literature, leadership moments and opportunities to work directly with other members of the interprofessional team are lacking in weekly clinical placements or school curriculum (Casey et al., 2011; Duchscher, 2009; St-Martin et al., 2015). The clinical externship experience allowed participants to consistently and more frequently work with different members of the interprofessional team, enabling them to comprehend the different roles and to understand the importance of interprofessional teamwork to improve patient care.

Externships provided participants with invaluable insights into real-world nursing, fostering a deeper understanding of their roles and organizational dynamics. Transitioning to practice involves understanding the role of an NGN and their scope of practice, and clinical externships provided participants with an inside view of the clinical environments they would be practising in. A widening gap between NGNs' expectations and the realities of their practice environment can lead to shock, confusion, and stress within the first year of practice (Duchscher, 2012; Regan et al., 2017; Vabo et al., 2022). Working as a clinical extern meant participants were immersed in the clinical environment, allowing them to become more comfortable with the culture of the unit and the roles and responsibilities of an NGN (Christensen et al., 2023). Researchers have reported that professional identity and confidence cannot develop when expectations and realities differ significantly (Frögéli et al., 2019; Vabo et al., 2022), and this mismatch between NGNs' expectations and the reality of practice can be a major barrier to NGNs' transition (Regan et al., 2017). Working with multiple nurses and patients at a time provided participants with an opportunity to learn how to prioritize and start to apply critical thinking. The immersion into the clinical environment gave participants a sense of familiarity and predictability, offering participants a glimpse into the multifaceted aspects of the nursing profession.

Participants reported feeling supported by the interprofessional team during their externships, which translated into feeling supported during their transition to practice. According to several participants, this support felt different when they worked as a clinical extern compared to as a student. Participants discussed how, when on clinical placements as students, they felt separate from the interprofessional team, but they felt engaged as clinical externs. Duchscher (2009) describes that another factor leading to transition shock is the loss of the support system that NGNs employed during their undergraduate education, including educators and other peers. In the cases of several participants in this study, friendships and connections were carried over from their time as an extern to their new role, helping them to feel supported and more comfortable seeking advice from colleagues. This finding was the case even when participants transitioned to practice in different settings or organizations. The clinical externship could be viewed as a bridge between the academic environment's support and that of the new nursing profession. By becoming comfortable in the clinical environment and being supported by the clinical staff prior to graduation, participants reported a continued sense of support during this critical transition.

Limitations

This study has several limitations. The study used convenience sampling, which Thorne (2016) warned can result in a homogenous sample that may impair the breadth and depth of interpretation. The use of convenience sampling may also have presented a response bias, whereby only participants who had positive experiences volunteered to talk about their experiences. More specific questions about the quality of the externship, oversight, and possible safety risks or concerns (e.g., working outside of scope of practice) need to be explored further. Additionally, personal attributes, length of participation in the clinical externship, and other external factors such as specific health care facilities and mentor quality were not considered. However, since this

qualitative study was aimed at investigating how participants felt their clinical externship influenced their transition to practice, the exclusion of those external factors should not constitute a major problem, though they may present a future avenue for research.

This study was conducted as part of a master's thesis; as such, the scope of the research was limited by factors such as time and resources. These constraints may have influenced the depth and generalizability of the findings.

Recommendations

Overall clinical externships positively influenced NGNs' transition experiences by enhancing self-efficacy, nurturing professional identity, and facilitating integration into clinical settings. One participant reported, "I thought I learned more there [as an extern] than I did as a nursing student." These findings offer valuable insights for nursing practice, education, and policy. Recommendations include advocating for adequate clinical exposure, nurse educators' integrating more experiential and case-based learning, and critically examining current clinical practicum models. The clinical placement models have remained relatively consistent overtime despite significant changes to nursing practice and education. Continued financial support for clinical externship programs is warranted. Public funding or incentives for health care organizations to participate in extern programs can enhance the availability and quality of these critical learning experiences as well as encourage collaboration between academia and health care organizations by creating incentives for partnerships to bridge the theory–practice gap. Furthermore, clinical externship programs can be a component of an organization's recruitment and retention strategy for nursing leadership and administration, providing an opportunity to seek potential new hires and showcase their organization (Rugs et al., 2020).

Conclusion

Participation in clinical externship programs provided participants with an opportunity to gain self-efficacy in psychomotor skills, assessments, and communication. Participants emphasized that these learning opportunities occurred both in accomplishing tasks themselves as well as in observing and listening to experienced RNs. These experiences allowed NGNs to bridge the gap between their classroom learning and real-world patient care, which helped to facilitate their transition to practice. Developing a sense of self-efficacy has also been linked to building a professional identity. Participants in this study discussed how their experiences as clinical externs provided them with the opportunity to spend time with patients, work closely with the interprofessional team, and start to understand the importance of prioritization and advocacy. Lastly, participation in a clinical externship gave respondents an opportunity to see the health care environment from the inside.

By being immersed in clinical practice beyond clinical placements and consolidations, these participants were able to see the realities of nursing, including what might be expected of them as NGNs and the uncertainty that can come with each shift. Additionally, this immersion allowed them to become more familiar with the organization in terms of infrastructure, policies, culture, and people. Externships provide invaluable opportunities for students to apply theoretical knowledge, develop clinical skills, cultivate a sense of professional identity, and get to know the organization.

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