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Cherubims in Rdu: Experiences of Novice Nurses in Renal Dialysis Unit Among Tertiary Hospitals in Davao City

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Abstract: Finishing this thesis has been a significant journey of philosophical and personal revelation rather than just an academic undertaking:Samuel F. Migallos, PhD, RN, mentor, whose support in challenging conventional wisdom and delving into the complex web of ideas has been a beacon of hope;My heartfelt gratitude flows to my family, whose unwavering support, boundless understanding, and eternal love remain steadfast, a constant bonfire through every storm life may bring;Dr. Sarah Bernadette L. Baleña, as chairperson, Dr. Cherry Mae M. Manual, Dr. Anna Liza A. Saus, and Dr. Lea F. Elivera, my esteemed scientific panels I extend my heartfelt thanks; Dr. Sarah Bernadette L. Baleña, chairperson, Dr. Cherry Mae M. Manual, and Dr. Anna Liza A. Saus, my validators. Your scholarly suggestions have woven a tapestry of wisdom throughout the various stages of my research, enriching its essence and elevating its impact with your discerning guidance; Sr. Zoselie Escolano, O.P., Prioress General, and Sr. Aida T. Frencillo, O.P., Local Superior of the Holy Rosary Convent, along with the beloved Dominican Sisters of the Trinity, I extend my heartfelt gratitude. Your generous provision of resources and unwavering support have been the nurturing light guiding my journey toward this degree. However, words may fall short, but my deep appreciation resonates in the silence of my soul; The twelve novice nurse participants, I extend my heartfelt gratitude to my cherished friends who lent their support through referrals, my Renal Dialysis Unit family, San Pedro Hospital, San Pedro College, and all those who quietly worked behind the scenes. Your contributions have woven a tapestry of kindness and support, enriching my journey in ways words alone cannot capture;Above all, I offer my deepest gratitude to the Blessed Holy Trinity—Father, Son, and Holy Spirit—alongside all the angels and saints in Heaven and the revered Blessed Virgin Mary. Your divine grace and eternal guidance have been my steadfast source of strength, for which my heart sings its profound thanks.

Keywords: Cherubim, Experiences, Novice Nurses, Renal Dialysis Unit

Purpose of the study. This study explores the experiences of new nurses working in renal dialysis units in Davao City's tertiary hospitals. The study aims to draw attention to how the workplace affects the professional growth and job happiness of new nurses. Ultimately, the results will improve nurse practice and education, guaranteeing improved patient care in renal dialysis units.

Research Method. The study broke through long-held preconceptions and challenged conventional wisdom by using a qualitative descriptive phenomenological research design to examine in-depth first-hand accounts of the lived experiences of novice hemodialysis nurses in Davao City. This allowed for a deeper understanding of their motivations and actions. It might support the creation of fresh hypotheses, modifications to laws, or adjustments to reactions. Additionally, as it looks for various realities, feelings, thoughts, outlooks, and experiences of new hemodialysis nurses in Davao City, it will be examined within the framework of the ontological philosophical premise.

Findings. The findings from the 12 novice nurses interviewed in this study emphasized several essential themes, including flexibility and adaptability while transitioning, skill acquisition to achieve competence, seeking mentorship and utilizing management techniques, and work flexibility with compassion. These results highlight the various obstacles and coping mechanisms that new nurses must overcome to establish themselves in this challenging profession.

Implications. This study provides valuable insights into the experiences of new nurses working in Davao City's tertiary renal dialysis facilities. Using a qualitative descriptive phenomenological design, the study illuminates the complexities of their transitions and the impact of the workplace on their career development and job satisfaction. The findings not only contradict conventional thinking but also emphasize the need for targeted training and support systems to increase nurses' proficiency and resilience. By supporting the implementation of nursing education and policy, this research seeks to enhance patient care and foster a more supportive atmosphere for novice nurses in the demanding field of renal dialysis.

Introduction

"New nurses are like cherubim in the sickroom, offering hope and healing with their fresh energy and compassion."

Florence Nightingale

Background of the Study

When the kidneys fail to clear waste, dialysis nurses play a key role in providing hemodialysis and peritoneal dialysis. They monitor fluid and electrolyte balance, record medical data, assess patients before treatment, and educate families about kidney disease (1). New dialysis nurses face challenges, especially in countries like Germany, where high patient-to-nurse ratios limit

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patient education and raise the risk of missed symptoms—particularly for those with language or health literacy barriers. These nurses need support to communicate clearly with the healthcare team, improve outcomes, and prevent burnout (2).

The Italian Nursing Society of Renal Care reports that biological risk is a significant concern for dialysis staff due to frequent contact with blood and bodily fluids. New dialysis nurses are especially vulnerable to needle stick and sharps injuries, often during blood collection and AVF cannulation. These incidents are linked to inexperience, lack of knowledge, and low confidence and are frequently underreported by both nurses and doctors (3).

Iranian novice nurses reported that limited knowledge and experience in their early clinical years hindered their ability to uphold professional values and made them hesitant to approach patients due to confusion, conflict, and harassment in the workplace. One new dialysis nurse recalled a patient bleeding from a jugular catheter that went unnoticed until the end of treatment, requiring an emergency blood transfusion. Another admitted struggling with AVF cannulation due to a lack of confidence and skill (4).

Novice nurses often lack clinical skills and competence, leading to more mistakes, risky practices, and lower confidence. They experience higher stress and lower job satisfaction and are at greater risk of burnout and resignation (4). As they are still learning, novice nurses feel the ethical climate at work influences their behavior. According to Victor and Cullen (5), the moral environment refers to "shared perceptions of what ethically correct behavior is," and novice nurses with less than a year of experience are particularly vulnerable to its impact (5).

As a new dialysis nurse, the researcher felt intimidated by patients with difficult AVF insertions, intubated patients, and those receiving inotropes and vasopressors. Caring for these complex cases requires skill, bravery, and faith. The researcher worked alongside experienced nurses during her training to build competence and confidence. After three years in the renal dialysis unit, the researcher gained proficiency but recognizes that every day offers a new learning opportunity. As a novice, the real challenge for the researcher was the overwhelming responsibility and complexity of handling high-risk patients with complex presentations.

Novice renal dialysis nurses are vital to healthcare institutions, and the researcher acknowledges the importance of examining their experiences. This study highlights the need for patience and understanding, as these nurses are still learning and vulnerable. By developing clear, accessible work guidelines for new dialysis nurses, this study benefits both healthcare facilities and nurses, improving hemodialysis care and patient satisfaction. Additionally, a deeper understanding of their experiences can inform the creation of targeted training programs, raising the standard of care for hemodialysis patients. These findings could also support the development of national training standards or regulatory frameworks to equip novice dialysis nurses better. This project aims to engage new nurses in nursing research, empowering them to apply evidence-based practices and improve patient care in hemodialysis.

Literature Review

To close the study gap, this section examines the positive and negative changes that new hemodialysis nurses encounter, concentrating on their difficulties and coping mechanisms. Their personal and professional lives may be profoundly impacted by the shift to hemodialysis nursing. To shed light on how new hemodialysis nurses deal with challenges and build resilience, this review summarizes earlier research and draws attention to the complicated terrain of this field.

Positive Experiences

Specialized skill development. The growth of novice hemodialysis nurses' specialized skills increases significantly as they become more comfortable in their roles. This approach requires complete patient care, an understanding of complex procedures, and proficiency with dialysis equipment. Through hands-on training and mentorship, new nurses acquire critical skills that increase their competence and confidence. Research indicates that structured orientation programs and ongoing instruction are essential for fostering this skill development (7). Furthermore, the ability to effectively manage patient care and collaborate with a multidisciplinary team improves clinical outcomes and contributes to new nurses' job satisfaction (8). The emphasis on particular abilities equips new nurses to provide exceptional care in the rigorous dialysis environment.

Team collaboration. Having trainers present throughout the first few months of a new nurse's employment in a renal dialysis unit has helped the new nurses adapted to the work environment, along with giving them all the answers to their questions and teaching important knowledge and abilities, the trainers and preceptors also teach students how to work and communicate with patients in a situation. The work lives of the new renal nurses were improved by the trainers' constructive engagement in the workplace. Additionally, the new renal nurses started by caring for stable cases when they first entered the nursing profession. Critical cases were handled gradually until the patient's condition stabilized. As a result, this helped the new renal nurses become more accustomed to their jobs and expanded their knowledge and abilities, allowing them to handle patients' techniques gradually (9).

Positive impact on patients’ lives. To help patients maintain their health while receiving dialysis, postpone the start of chronic dialysis therapy, or transition from chronic dialysis therapy to a more normal lifestyle after a transplant, novice renal nurses enjoy getting to know their patients and working as a team. They also enjoy helping patients feel at ease and home. "When patients share stories about milestones and celebrations they were able to attend, it is rewarding to know they are alive for those moments

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because of the dedication of those in the profession," the renal nurses (10) said. "It is rewarding to know the care you provide is life-saving."

Structured work environment. For inexperienced hemodialysis nurses to transition into clinical practice with ease, a structured work environment is essential. The defined roles, standardized procedures, and explicit standards offered by this controlled setting help new nurses better handle the complexities of patient care in dialysis. Research indicates that a clean workplace enhances learning opportunities and increases new nurses' self-confidence, allowing them to focus on skill development and patient interaction (11). Additionally, comprehensive orientation programs and supportive mentorship are often provided by organized organizations, both of which are critical for building competence and resilience (12.). A well-organized and supportive work environment ultimately contributes to new nurses' job satisfaction and ability to deliver quality patient care in the dialysis sector.

Opportunities for career advancement. Novice hemodialysis nurses have many choices for career advancement, which significantly enhances their professional development and job satisfaction. Becoming a Certified Nephrology Nurse or entering management and teaching roles are two possible specializations in the dialysis sector. Certification and ongoing education help them advance their clinical expertise and prepare them for leadership positions in healthcare settings (13). By providing mentorship programs and professional development activities that support career advancement, several companies encourage nurses to pursue higher degrees and further training (14). Additionally, research indicates that a commitment to professional development is linked to improved patient care outcomes and job retention (15). This focus on career advancement benefits nurses as well as the healthcare system.

Negative experiences

High emotional demands. The research claims that burnout among new renal hemodialysis nurses occurs when an individual's emotional reserves run low, and they are unable to give of themselves anymore—"you cannot provide what you do not have (16). Stress, dissatisfaction, a diminishing sense of accomplishment, and low self-esteem are the results. To put it briefly, burnout and job dissatisfaction can result from working in an unsupportive workplace that jeopardizes the ability of inexperienced renal hemodialysis nurses to deliver care that is considered high-quality (17).

Stressful work environment. As a new renal nurse in the UK, the first six months were difficult. A Filipino novice renal nurse who worked in the UK claimed that it was challenging to adapt to a new setting and profession and that working in a limited scope was frustrating (18). Newly graduating registered nurses (RNs) face challenging challenges as they acclimate to their new jobs as novice nurses. Novice nurses may face difficult situations when they first start their clinical appointments, such as complex environments with contemporary medical technology, high patient-to-nurse ratios that call for advanced skills, the need to learn for patients and their families while delivering safe, high-quality care, and demonstrating respect and compassion for people and their families. Recently minted nurses may need more effort to develop their critical thinking skills, prioritize patient care requirements, and identify patient needs (19).

Complexity of technical skills. Novice dialysis nurses who wanted to acquire the necessary skills and knowledge for HD procedures worked in the hemodialysis unit. When it comes to AVF (Arteriovenous fistula) cannulation, nurses in particular, face difficulties, and one of the most important things they should understand is the HD machine. For novice dialysis nurses, AVF cannulation is a challenge that calls for problem-solving abilities. Nurses faced patient refusal due to their lack of familiarity with AVF cannulation. The patient's AVF status was unpredictable for nurses, and there were insufficient possibilities for AVF cannulation. In case the AVF cannulation failed, the nurses were worried. Understanding how to operate HD machines is essential for patient care. Inexperienced dialysis nurses need to adjust to operating complex HD equipment, controlling many alarm systems, and performing (20).

Experience of patient loss. Losing a patient can be very difficult for novice hemodialysis nurses, and it can have a big effect on their emotional health and sense of fulfillment at work. They have to deal with the reality of mortality daily as they provide care for people who have chronic illnesses. When patients decline or die, research shows that new nurses frequently experience grief and a sense of powerlessness (21). Since compassion fatigue can result from these emotional strain healthcare facilities have sufficient support networks, such as counseling and mentorship (22). Establishing a culture that promotes candid conversations about loss and sorrow can assist new nurses in processing these events and building resilience, which will eventually enhance their general well-being and retention in the field.

Inadequate support and mentorship. New nurses' progress in hemodialysis might be seriously hampered by insufficient support and mentorship from more seasoned colleagues. To handle the challenges of patient care, novice nurses frequently need mentorship; nevertheless, insufficient mentorship might leave them feeling alone and overburdened. According to research, a lack of mentorship might raise the risk of burnout, increase stress, and lower job satisfaction (23). Since it equips novice nurses to manage difficult circumstances and emotional demands, effective mentoring is essential for developing clinical skills and boosting confidence (24). Healthcare organizations can foster a supportive environment that improves the transition experience for new nurses and boosts patient care results by prioritizing structured mentorship programs.

Coping

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Seeking support from mentors and colleagues. One essential coping strategy for new hemodialysis nurses is to ask for help from mentors and coworkers. By offering both professional and emotional assistance, this supportive network is essential in facilitating the transition into this challenging sector. According to research, mentoring helps new nurses deal with difficulties like complex patient care and mental stress while fostering resilience, increasing job satisfaction, and improving general well-being (25). An atmosphere where new nurses can exchange experiences, ask for guidance, and learn from one another is produced via collaborative connections with colleagues (26). Building these relationships can help new nurses better handle the demands of their jobs, which will eventually enhance patient outcomes and boost nursing retention.

Ongoing education. New hemodialysis nurses must participate in ongoing education since it improves their clinical expertise, understanding, and self-assurance in patient care. Nurses can stay current on the latest developments in dialysis methods, technology, and patient care approaches with the support of ongoing training. Their dedication to lifelong learning enhances their proficiency and has a favorable effect on patient outcomes and safety (27). Additionally, ongoing education promotes opportunities for professional development and career progression making it essential to keep qualified nurses in the dialysis industry (28). Healthcare organizations may give new nurses the resources they need to succeed in their positions and deliver high-quality care by placing a strong priority on education and skills.

Prioritizing self-care and wellness. To handle the mental and physical demands of their jobs, new hemodialysis nurses must prioritize their wellness and self-care. Self-care techniques reduce stress, avoid burnout, and improve general job satisfaction. According to research, nurses who put their health first can better care for patients with excellence and remain resilient in trying circumstances (29). Organizations that support wellness initiatives and self-care behaviors establish a positive atmosphere that increases nurse retention and job satisfaction (30). Healthcare organizations may guarantee that new nurses are competent caregivers and also healthy people by highlighting the significance of self-care.

Developing effective time management skills. For new hemodialysis nurses to effectively handle the intricacies of patient care, they must learn excellent time management techniques. By prioritizing work, lowering stress levels, and increasing productivity, nurses can improve patient outcomes through effective time management. According to research, nurses can more effectively balance clinical duties, paperwork, and teamwork when they employ time management techniques (31). Additionally, efficient time management lowers the risk of burnout and increases job satisfaction, both critical in high-demand fields like dialysis (32). Healthcare organizations can provide new nurses with the skills they need to succeed by including time management instruction in orientation programs.

Participating in team-building activities. New nurses frequently experience stress due to a lack of knowledge and skills, poor self-confidence from negative interactions with coworkers, and insufficient institutional support. These difficulties might result in feelings of loneliness and fatigue, underscoring the significance of thorough orientation courses and continuous mentoring to ease the transition and boost their self-assurance and professional skills (33); (34). Long orientation periods, mentorships, and sufficient resources should be offered by the institutions to new nurses to ease their transition to clinical settings. To create a supportive work atmosphere, it is also critical to develop good relationships among the various healthcare professionals (35).

Work Atmosphere. To give patients safe, effective, and efficient care, nurses must become proficient with complicated hemodialysis equipment, which makes the work environment extremely technical. Able to develop cultural awareness with their patients, novice dialysis nurses frequently find a deep feeling of purpose in their work. Novice nurses create deep connections that promote trust and understanding by paying attention and showing respect for people from different backgrounds. This method helps novice nurses, making them more sensitive to the needs and experiences of each patient. These novice nurses cultivate a sense of empathy as they accept and value each patient's individual story, which changes the way they provide treatment. The new nurses learned that cultural sensitivity and adaptation enhance their abilities, bringing satisfaction and joy into their work while providing loving care and fostering compassion. This improves their personal growth and confidence, strengthening trust and rapport with patients. As a result, they provide more effective care, leading to better patient outcomes and greater fulfillment in their roles (36).

Policy

Importance of New Renal Dialysis Nurses. Novice dialysis nurses are critical to healthcare systems, and understanding their experiences is essential for improving care quality.

Need for Standardized Guidelines. Developing clear and accessible guidelines for new dialysis nurses can enhance competence, improve patient outcomes, and ensure consistent care across healthcare facilities (33).

Policy-Level Implications. Findings could support the creation of national training standards for novice dialysis nurses, ensuring uniformity and high-quality education across the healthcare system. Regulatory support could be established to create a structured, supportive environment, addressing issues like burnout, competence, and error reduction (34).

Development of Specialized Programs. The research could inform the creation of targeted training programs that equip nurses with technical skills and clinical expertise specific to hemodialysis care (34).

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Improving Nurse Competence and Patient Care. These policy changes and training programs would enhance the skills of new nurses, leading to better hemodialysis services and improved patient satisfaction (35).

Long-Term Workforce Development. Foster

ing a more structured and supportive learning environment for novice dialysis nurses will contribute to developing a more skilled and resilient nursing workforce (36).

Theoretical Lens

Benner's Novice to Expert Theory (1982), which outlines the path from beginner to expert, provides a valuable framework for understanding the phenomenon this study studied. Novice dialysis nurses can substantially benefit from this theory. In this specialized field, novice nurses typically lack experience with complex hemodialysis patient needs and dialysis technologies. As they gain clinical exposure and supervision, they progress through the five stages: novice, advanced beginning, competent, proficient, and expert (37). To manage the unique challenges in hemodialysis care, such as monitoring fluid balance and understanding how patients respond to therapy both before and after hemodialysis treatment, this framework emphasizes the necessity of clinical judgment and experiential learning. Supporting new nurses through structured orientation, continuing education, and mentorship improves patient outcomes in hemodialysis settings by increasing their competence, confidence, and abilities (38).

Learners progress through five levels as they work toward competency: novice, advanced starting, competent, proficient, and expert. Instead of being a sequential process, being an expert is a cyclical one. As a result, novice nurses may not necessarily master particular abilities or move through the phases in a systematic manner. Instead, as they acquire new knowledge and skills, novice nurses might constantly go from one stage to the next. The first level of proficiency is novice nursing, when novice nurses find it difficult to decide which tasks are most important to do because they haven't acquired any prior information. The novice level of proficiency in the context of new nurses working in a dialysis unit is characterized by inexperience and difficulties setting priorities for patient care duties. Due to their limited knowledge of dialysis processes and patient needs, novice nurses sometimes find it difficult to recognize important interventions. Since they lack the clinical judgment required for complex situations, such as managing fluid overload or identifying indicators of problems, they mostly rely on rules and guidelines. At this point, core knowledge and assistance are provided by effective orientation programs and mentorship. Novice nurses can get the abilities and self-assurance required to advance to greater levels of proficiency by being progressively exposed to real-life situations in the dialysis unit with different exposures of dialysis cases.

In the advanced beginning stage, new dialysis unit nurses learn to identify trends and develop their clinical abilities. They can recognize recurring signs and symptoms, such hypotension during treatments or indications of infection, because they have experienced a variety of patient circumstances. At this level, nurses can give more effective care by following set guidelines on how to prioritize patient requirements. In order to provide a supportive environment for nurses and patients, mentorship from seasoned staff members can improve their capacity to recognize trends and implement evidence-based procedures. In addition to improving patient outcomes, this enhanced competency gives new nurses greater confidence in their ability to handle the challenges of dialysis treatment.

Third is Competent; after two to three years of experience, the competent stage represents a significant advancement for new nurses working in a dialysis unit. At this stage, nurses can improve their efficiency and organizational abilities by prioritizing patient care chores according to plans and goals. For example, they might create care plans that cater to the specific requirements of each patient, like dietary restrictions and fluid control. Offering focused training opportunities, such seminars on dialysis technology or patient education techniques, is crucial to fostering their development even more. Their clinical skills are strengthened by this extra training, which also increases their self-assurance in handling challenging circumstances. Experienced nurses are better equipped to handle the particular difficulties of dialysis care, which eventually improves patient outcomes.

Fourth is Proficient; during the competent stage, new nurses in a dialysis unit begin to take a comprehensive approach to patient care, making judgments based on established criteria and evidence-based procedures. They improve their critical thinking abilities by learning to spot subtleties and patterns in patient presentations. For instance, skilled nurses can use case studies and prior experiences to assess possible reasons and solutions when a patient shows symptoms of hypotension while receiving treatment. This approach helps them to resolve conflicts between concepts, including juggling a patient's nutritional requirements with hydration management. By honing their analytical abilities through case studies, they may make well-informed judgments that put patient safety and wellbeing first, leading to better care outcomes in the dialysis context.

The learner in the fifth level of proficiency, nurses in a dialysis unit demonstrate a profound understanding of complex patient scenarios, moving beyond mere adherence to rules and guidelines. They possess the ability to assess unique situations and make nuanced decisions based on a comprehensive analysis of patient needs. For instance, when managing a patient with multiple comorbidities, expert nurses can integrate their extensive knowledge to develop tailored care plans that address not just the immediate dialysis needs, but also overall health goals. This level of proficiency allows them to tackle unexpected challenges, fostering innovation in care practices. Moreover, facilitating opportunities for experts to mentor new nurses promotes knowledge

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sharing, enhances critical thinking skills, and strengthens the overall competency of the nursing team, ultimately leading to better patient outcomes in the dialysis setting (39).

These different levels of skills show changes in the three aspects of skilled performance: movement from relying on abstract principles to using past experiences to guide actions, change in the learner's perception of situations as whole parts rather than separate pieces, and passage from a detached observer to an involved performer, engaged in the situation rather than simply outside of it. The levels reflect movement from reliance on past principles to the use of experience and change in the perception of the situation as a complete whole with certain relevant parts. Each step builds on the previous step as principles are refined and expanded by experience and clinical expertise. Benner's theory of going from Novice to Expert changed the understanding of what it means to be an expert in nursing. Moves the label from a nurse with the highest pay or the most prestigious title to the nurse who provides the best care to his or her patients (40).

When it comes to comprehending the experiences of novice renal hemodialysis nurses, Benner's Novice to Expert Theory is quite helpful and most fitting among theories that define the gradual change in becoming an expert in skills as a nurse. Dr. Patricia Benner is a nurse who worked both theoretical perspectives, offering an overview regarding what a novice nurse is, what to anticipate from them, and how to manage these nurses—especially in a renal dialysis unit. By understanding and applying Benner's theory, experienced nurses and leaders in the renal dialysis unit can provide targeted guidance and mentorship, facilitating the growth of novice nurses as they transition through the stages of skill development and clinical competence.

According to the Dictionary of Oxford Languages, novice means new to or inexperienced in a field or situation. A person who is new and has little experience in a skill, job or situation. According to the Cambridge English dictionary, the term novice is a person beginning to learn a job or activity and has little or no experience or skill. A novice nurse is a recently graduated nurse who relies on established protocols and guidelines for patient care and has little clinical experience. Since their skills are still in their infancy, they need assistance and direction to gain competence and confidence in the real world (41).

Purpose of the Study

This study aimed to explore the experiences of novice nurses in renal dialysis unit among tertiary hospitals in Davao city.

Research Questions

What are the experiences of novice renal dialysis nurses in tertiary hospitals in Davao City?

What are the challenges of novice renal dialysis nurses in Davao City?

What are the coping strategies of novice renal dialysis nurses in Davao City?

What are the final thoughts of novice renal dialysis nurses in Davao City?

Method

Design

The study used a qualitative descriptive phenomenological design to explore in-depth first-hand accounts of lived experiences of novice nurses in renal dialysis unit among tertiary hospitals in Davao City to gain insights into their actions and motivations, cutting through long-held assumptions and challenging conventional wisdom. It may contribute to the development of new theories, changes in policies, or changes in responses. Furthermore, it will be viewed in the context of the ontological philosophical assumption as it seeks multiple realities, feelings, thoughts, outlooks, and experiences of novice hemodialysis nurses in Davao City (42).

Study Site

The researcher collected data in the City of Davao to determine the experiences of novice nurses in the renal dialysis unit among tertiary hospitals in Davao City. A total of 12 participants among tertiary hospitals in Davao City. As a step up from secondary healthcare, tertiary care hospitals are highly specialized medical care typically given over an extended period and include sophisticated and advanced diagnostics, procedures, and treatments carried out by medical specialists in cutting-edge settings. Consequently, consultants working at tertiary care facilities have greater access to specialized tools and knowledge. Depending on the size and resources of the nation, tertiary care is present at the regional or national level. Referrals for tertiary care services can originate from primary and secondary care providers, and most of the time, the care is in an inpatient setting. At the same time, certain aspects can also cater as an outpatient (43).

Participants

The participants under study focused on novice renal dialysis nurses from tertiary hospitals in Davao City who are willing to share experiences and performances during their first year of working exposure in the dialysis unit. The inclusion criteria include novice hemodialysis nurses working in Davao City, one month to one year working as a hemodialysis nurse in a dialysis unit, must be 23 years of age and above, male, female, or any gender they prefer. The exclusion criteria for nurses who already have

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work experience in hemodialysis have been dormant for how many years, then suddenly re-applied as hemodialysis nurses, and who refused to participate will not be included.

This study used purposive sampling in determining the participants who were qualified to participate in the study the referral recruitment process. Subsequently, it proceeds based on recommendations from the individuals involved. This process continues until it hits a saturation point or the desired sample. The researcher chose twelve (12) participants, novice nurses in renal hemodialysis units among tertiary hospitals in Davao City; Morse suggested at least six participants for the phenomenological research. This guidance helped the researcher determine the appropriate number of participants required for the study. his method involves deliberately choosing participants based on the characteristics of a population and the objectives of the study. Sensitive subjects or subjects that people might prefer not to discuss in public are also studied using this purposive sampling technique.

Data Measures

This study utilized a researcher-made Semi-Structured In-depth interview guide. Semi-structured In-depth Interviews are a subjective information assortment procedure in which respondents are occupied in a one-on-one setting to get intelligent reactions. Semi-structured in-depth Interviews are generally fitting for circumstances that need to examine inquiries that impel a significant discussion/reaction intended to create the profundity of data from a moderately couple of individuals (rather than studies) directed with larger quantities of respondents. Three experts will validate this researcher-made semi-structured in-depth interview guide. It will comprise questions to elicit the experiences of novice renal hemodialysis nurses in Davao City. An audio or phone recorder is available to document the participants' verbatim accounts. Four questions are interrelated with each other to know the experiences of novice renal hemodialysis nurses in Davao City.

Data Collection Procedure

Data collection is an essential step in completing a research paper of good quality that highlights its goals and objectives and is aligned with the research title and content. With this, the researcher produced the required materials: a research proposal defining the relevant aspects of the chosen topic, informed consent, semi-structured questionnaires to serve as interview guides that are validated by three competent and research expert validators, a phone recorder or audio recorder and letters sent that already checked by the Mentor of the researcher to various offices requesting permission and approval of the study. In the data collection process, the researcher situated the participants in a conducive environment and follow these succeeding steps to acquire and arrive at the needed information from the participants. The role of the researcher in the study is solely limited to investigating, conducting the research, collecting and analyzing data, and interpreting the results with no involvement beyond that scope.

In the first step, the researcher requested permission from the Dean of the College of Nursing to perform the study. The four panelists approved the initial manuscript, the researcher submitted the initial manuscript to the San Pedro College Research Ethics Committee. In the second step, after the approval of the initial manuscript from the San Pedro College Research Ethics Committee with a Certificate of Acceptance, the researcher asked friends at San Pedro Hospital, Inc. and from Davao Doctor's Hospital for referrals as part of a recruitment process for novice dialysis nurses they knew. Before commencing any interview; the researcher holds a meeting with the potential participants to outline the objectives of the research, ensure the confidentiality of their answers, emphasize their right to decline answering the established questions, to discontinue the interview promptly, and to abstain from participating. There was a discussion of the study's advantages and risks and the use of an audio recorder during the interview. Participants were welcomed asking the researcher any questions they may have had.

In the third step, the researcher proceeded to pilot testing; the researcher obtained informed consent from the participants once approved, and the researcher collected the informed consent. A one-on-one interview was held outside the hospital grounds and during non-working hours, requiring only an hour and thirty minutes of the participants' free time. Snacks was given to each participant as a thank you, and the researcher reimbursed any travel expenses had incurred right after the interview. Nonetheless, the researcher will cover the necessary expenses if the participants face mental, emotional, or physical distress due to the study. In the fourth step, the researcher encoded the information from the pilot testing into a Microsoft Word file. Following the encoding of the data from the pilot testing, the researcher had the opportunity to evaluate, test, and enhance research questions prior to the execution phase of the study. This process allows the researcher to guarantee smooth research operations and significantly enhance the study's results. The data gathered from the pilot test is stored on a flash drive that the researcher can access. The flash drive will undergo reformatting after five years to guard against leaks and preserve the privacy of the collected data.

In the fifth step, the researcher gathered the data appropriately after the pilot testing. The researcher obtained informed consent from the participants which was approved. A one-on-one interview was held outside the hospital grounds and during non-working hours, requiring only an hour and thirty minutes of the participants' free time. The researcher used the self-made questionnaire validated by three research experts, re-evaluated after pilot testing by the researcher, mentor, and chairperson of the panels, re-submitted to the Ethics committee, and approved. Each participant received a token of appreciation through snacks and a personalized mug, and the researcher reimbursed them for any travel expenses they had incurred right after the interview. Nonetheless, the researcher will cover the necessary expenses if the participants face mental, emotional, or physical distress due to the study.

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Furthermore, the Researcher transcribed the recording and analyzed and interpreted the gathered data. The researcher transcribed, using Google documents all the recordings collected from the one-on-one interview, to identify the respondents' relevant responses and clearly understand the interview flow. Next, the data were analyzed and categorized into relevant themes. Finally, the Researcher interpreted the collected data and arrived at a conclusion or recommendation based on the experiences gained by the respondents and the skills developed among them in terms of their performance. The researcher kept the transcribed interview on a flash drive that they can access only for future reference.

The team conducted another oral defense to review the finished paper with a fresh set of technical specialists. They share the research implications and suggestions following the presentation. The completed manuscript published in a peer-reviewed journal and presented at a research conference. The researcher reformatted all the data on the flash drive over five years to guarantee anonymity and confidentiality. To access their data, participants can contact the researcher at any time. The researcher addressed the following ethical issues before, during, and following the study.

Trustworthiness

It is crucial to scrutinize the trustworthiness of every phase of the study, from the preparation, collection of data, data organization, data interpretation, and reporting of results. This research study was conducted on the criteria of trustworthiness by Lincoln and Guba in 1985, which includes credibility, transferability, dependability, and confirmability.

Credibility. The researcher used the appropriate research design and methods to ensure the internal validity of the entire study. In addition, the researcher provided multiple data references to guarantee comprehensive and well-developed related literature.

Transferability. The researcher sustained the degree to which the qualitative research findings apply to various respondents' contexts or situations. The researcher assessed the intervention's efficacy in the intended setting. Furthermore, the researcher discussed how the study's findings may apply to various situations, times, and populations.

Dependability. The researcher strictly imposed consistency and reliability within the study's findings for replicability. There will be careful conceptualizations that will draw out implications critiqued by interested researchers in the same field of expertise and use as literature.

Confirmability. The researcher thoroughly examined the data collated from the subjective interviews of the participants to come up with accurate findings and implications for the study. A panel of validators and commentators evaluated the transparent narration of the entire research to ensure that genuine data supports the findings.

Reflexivity. The process of critical self-reflection regarding oneself as a researcher was ensured. With this, the researcher did not impose biases, preferences, and preconceptions during the study and the interview process. Furthermore, the research relationship between the researcher and the study participants has been kept professional. It was maintained professionally by separating any relationship influences between both parties, wherein no researcher had influenced the participants' responses to the questions.

Ethical Considerations

The researcher conducted the study in strict compliance with the code of ethics, keeping the following principles in mind to prevent unnecessary or disproportionate harm to participants.

Voluntary Participation and Consent. Before signing the informed consent, the Researcher conducted a thorough orientation to ensure that participants' understanding of the study was sufficient. The researcher disseminated information about the study in a manner that is understandable and easy to comprehend. It did not include persuasion and deception that could influence the participants. Instead, the researcher emphasized the freedom of choice for participants to decline or participate in the study.

As a result, the researcher obtained signed consent forms from each participant to signify agreement and trustworthiness between them and the participants. Moreover, the researcher provided the participants with an information sheet to further understand the purpose of the study and the data collection process. In correlation, the researchers will allocate time to address concerns throughout the orientation. If the participants feel uncomfortable with specific questions during the data collection interview, they can skip and leave the questions or interview unanswered. With the distribution of the consent forms, each participant is required to sign before data collection to secure their permission to participate in the study.

Privacy and Confidentiality. The method of maintaining an individual's privacy is known as confidentiality. It pertains to the researcher’s ethics and liability to protect the rights of individuals concerned with their personal information. As a graduate school thesis, the researcher can destroy the raw data after the completion of the study. Hence, all confidential data will be deleted or disposed of. Electronic data will be deleted, and hard copy data will be disposed of via confidential waste using shredding. Participants can access their interview transcripts and the recorded video of the interview. Should they have any concerns or discrepancies, researchers will honor their request for revision. The Researcher will preserve the identity of the participants by assigning them a pseudonym and tips from them.

Conflict of Interest. This study does not contain any conflicts of interest. Minimization of Risk. The study may involve gathering experiences and feedback from novice hemodialysis nurses in Davao City, potentially including challenges, stressors, or negative experiences they encountered during work. The researcher should be prepared to address any emotional or psychological distress

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experienced by participants during the `data collection process. Having certifications or training in handling sensitive topics and providing appropriate support or referrals for participants is essential. Therefore, researcher should adhere to ethical guidelines and regulations related to conducting research involving human subjects; obtaining the necessary certifications or approvals from relevant ethical review committees will be essential to ensure compliance with ethical standards.

Validity and Reliability. Both are closely related but mean various things and were applied throughout the research study. Measurement is often reliable without being valid. However, if a measurement is valid, it is usually also reliable. The consistency with which a way measures something is referred to as its reliability. The measurement is considered trustworthy if the same results are regularly achieved using the same procedures under identical conditions.

Meanwhile, the accuracy with which a way measures what it is supposed to determine is the validity. When research features a high level of validity, it delivers results corresponding to natural properties, characteristics, and variances. High reliability is one indicator that the measurement is valid. If a way is unreliable, it is not valid.

Data Analysis

Colaizzi's Method of Data Analysis was applied to the collected data to interpret the experiences of inexperienced hemodialysis nurses in Davao City. It made it possible for fresh information to emerge and offered an understanding of the events. Colaizzi's (1978) method of data analysis is a qualitative approach that guarantees the validity and dependability of its findings because it is thorough and reliable. It enables the identification of emerging themes and the connections between them by researchers. Researchers who employ a descriptive phenomenological approach ought to think about using this technique as a rational and transparent way to investigate the underlying structure of an experience. There are seven steps to follow in Colaizzi's methods:

Step 1: Obtaining a general sense of each Transcript: The researcher personally conducted the interviews for the study on the experiences of novice hemodialysis nurses in Davao City, which helped to obtain a comprehensive understanding of the participants' whole range of experiences. Three or four readings of the audio recordings were made to understand the participants' emotions and mental processes. Colaizzi (1978) proposed that to fully comprehend the topic, the researcher needs to play back the audio recording several times.

Step 2: Extracting significant statements: Next, by Colaizzi (1978), the researcher selects keywords and sentences from the transcript that convey the experience's overall meaning, was careful to read the transcript several times over, and examines each one to pinpoint key points. Each participant's statement was composed independently and coded according to the transcript's page and line numbers.

Step 3: Formulation of meanings: Colaizzi (1978) advises the researcher to come up with more general interpretations or restatements for each important textual assertion at this stage. From the important statements, meanings were developed and then explored. After these meanings were created, they were tagged, categorized, and submitted to a team of knowledgeable researchers to ensure that the methods were accurate and that the meanings were consistent.

Step 4: Organization of formulated meanings into clusters of themes and themes: After getting defined implications from critical articulations, the analyst orchestrated them into clusters of topics. These topic clusters, at that point, contracted into new subjects. All these topics are internally merged and remotely unique, which suggests that each formulated meaning came from one subject cluster. These clusters of subjects and the ultimate subjects were, at that point, given to the master analyst to check their precision.

Step 5. Exhaustively describing the Phenomenon: In the fifth analysis stage, the researcher combines all the ideas that arose into a complete description of the phenomenon. This was achieved by integrating all thematic clusters and emergent themes, and articulated meanings into a description to create an overall structure. It is then submitted to experts to confirm its completeness and relevance to the experiences of novice hemodialysis nurses in Davao City.

Step 6. Describing the fundamental structure of the phenomenon: In this step, discoveries were decreased to maintain a strategic distance from reiterations and to create a clear and brief portrayal of the phenomenon. In my research study, this was delineated as a conceptual system that contained all the experiences of novice hemodialysis nurses in Davao City.

Step 7. Returning to the participants to validate the findings from the study participants: This step pointed to validate study findings utilizing "member checking." This is the final stage of data analysis; in which we return to the participants for follow-up interviews to determine the representativeness of the phenomenon that occurred based on their experiences.

In summary, this study aimed to provide the perspectives and experiences of researchers who examined this phenomenological study using Colaizzi's approach, with the ultimate goal of advancing knowledge of qualitative research methods. The study aims to assist future researchers in using phenomenological analysis and develop methodological methods by sharing these experiences (44).

Although many studies have employed Colaizzi's method as an analytical tool, there have been relatively few procedures to perform the research using graphics. The researcher, therefore, attempted to use this method to clarify the processes involved in the analysis (43).

Findings

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The twelve transcripts produced two hundred twenty-three (223) significant statements, one hundred fifty (150) formulated meanings, forty-eight (48) clustered themes, and four (4) emerging themes when analyzed qualitatively using Colaizzi's technique. These emergent themes are: 1. Flexibility and adaptability while transitioning 2. Skill acquisition to achieve competence 3. Seeking mentorship and utilizing stress management techniques 4. Work flexibility with compassion.

Theme 1: Flexibility and adaptability while transitioning

In renal dialysis units, new nurses possess flexibility and adaptability. A development mindset makes it easier to continue learning and be adaptable in new situations. Being proactive and organized requires anticipating changes and staying up to date on best practices. Effective communication and collaboration among coworkers foster problem-solving and teamwork. When stress and emotions are controlled through mindfulness practices, resilience rises. Self-care practices prioritizing balance and well-being ensure sustainability in a demanding professional environment. When combined, these methods provide nurses with the adaptability and efficiency needed to handle constant change.

When questioned about their first experiences working in renal dialysis, the novice nurses had similar sentiments and experiences. They said that while they were able to pick up new skills and eventually become a part of the team, their first day of work was always difficult and filled with mixed emotions. Just like NNRDU-1 stated that, it's quite tough because I'm new to this area; as a recently graduated nurse, I have no idea what renal dialysis nurses do in this field of work, so it's challenging for me. However, with the support of my senior nurses, I was able to learn a lot of knowledge and hone my skills. Additionally, as stated by NNRDU-1, during the first day of my job, I had mixed feelings as I was excited to be assigned to the renal dialysis unit and was feeling scared at the same time. My first day of work went well because I was able to meet my new co-workers and get an overview of what dialysis is. I did a lot of research at home to know how dialysis works and the functions or renal dialysis nurses.

NNRDU-2 added on their experience that it starts with building rapport with my patient assigned as I would have to win their trust for them to feel comfortable under your care for the next 4-6 hours of treatment. Once treatment was started, you would monitor them for any complications or side effects of the treatment. The most rewarding aspect is when the patient successfully completed the treatment and achieving goal of the treatment and patients got to appreciate the care you gave them. This was NNRDU-2 experienced during their duty in the renal dialysis unit.

In connection to the experiences of the novice nurses, NNRDU-3 felt that I think the only thing I prepared were my confidence and my expectations during my early working days. NNRDU- 3 added, the most enjoyable aspect of RDU is our daily interactions with our patients and colleague. It makes our workload feels a lot lighter. Thus NNRDU-3 emphasized that, I learned the most through my mistakes that I have done. In those mistakes grown and improved in my field of work.

The humility to accept the tendencies of being a novice nurse yet striving to do what is just and right as a novice nurse as NNRDU-4 expressed feelings that, I was really nervous at first, so I can tell I was only 20% ready but I was ready to whatever it is or obstacle I was going to face. Thus, NNRDU-4 added, I was more relaxed later on, knowing how accommodating and nice the people and the staff in the unit, at first, I thought I would be intimidated but the staff made sure we were welcome well. As NNRDU-4 certainly added, I can say that there are times that I am still lacking, but I do my best to learn and listen to my seniors whenever they think I am not being professional.

Similarly, NNRDU-5 narrated their journey, saying that on my first day as a dialysis nurse, it was a blend of excitement and nervousness. I was introduced to the dialysis unit, familiarized myself with the equipment, and observed experienced colleagues as they managed patient treatments. My initial impressions were of the high level of precision and attention to detail required in the role. In the same way NNRDU-5 continued that, when started working in renal dialysis, I felt reasonably prepared due to my comprehensive training and hands-on experience. However, the transition from classroom learning to real-world application presented challenges. I had theoretical knowledge and skills, but the dynamic nature of patient care and the need to respond quickly to complications tested my adaptability and problem-solving abilities.

Furthermore, being adaptable and flexible during the transition journey, as noted by NNRDU-6, it was actually fun and interesting because, during my student days as a student, I didn't have the chance to rotate here. The preceptors are really good at teaching and have great patience. In addition, NNRDU-6 stated that the environment and the patients are very approachable. My workmates are very communicative in a way that you won't feel small. Every day is memorable with patients especially when we talk to them, and they say things that inspire me and make me think that life is worth living.

Additionally, NNRDU-7 said that my first day on the job was nerve-wracking. I really don't have an idea of what are my responsibilities. On my first day, my only task was to observe my workmates on how to do their job. It somehow gave me a chance to be familiar with my responsibility. Moreover, I would describe my training experience as very overwhelming at first since everything is new to me. But as time goes by, it became a routine to me, and I became more and more familiar. Furthermore, I enjoy that it's a routine work. Once I became familiar with the step-by-step procedure, it became easier as time goes by. It also gives me a chance to develop techniques that would make my work efficient to save time. Thus, NNRDU-7 added that I observed that I had grown professionally in terms of becoming more confident with my skills and judgment compared to before. Now, I require minimal supervision. Moreover, I know there is still a lot to learn and I am always open for improvements.

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As emphasized by NNRDU-8, I've been enjoying being a dialysis nurse, but sometimes, I would like to learn other things aside from dialysis such as IV insertion or works that are essential for a nurse. Moreover, NNRDU-8 stated that, in medical field, collaboration is a must. I usually collaborate with my other healthcare team members through verbalization, charting endorsement or through phone, especially when it comes to doctors or other wards because it's our only easier way of communication. Also, NNRDU-8 noted that I learned the importance of commitment and respect. For instance, coming to work on time or before the time so that you can prepare things ahead. Most importantly, the way you interact with your patients is a must to build rapport.

According to NNRDU-9 experienced that, I am eager, and dedicated and focused on learning fundamental patient care and technical skills. My experience involves adapting to a fast-paced movement, developing management and critical thinking skills and gaining confidence through hands-on practice and guidance from more experience colleagues. NNRDU-9 reinforced that it was intensive and hands on, finding a deep understanding of both technical skills and patient care while also emphasizing the importance of teamwork and continuous learning. I wasn't prepared working in dialysis unit but eventually, I was able to adjust from it.

In the opinion of NNRDU-10, my experience as a renal dialysis nurse is challenging. I need to know the patient's condition, and I need to master the machine as well. My typical day as a renal dialysis nurse is to build rapport with the patient, monitor their vital signs, get their weight, and wait until the dialysis is done. The experiences and the routinely care of novice nurses help to become flexible and can adapt easily with the patients under their care.

NNRDU-11 admitted when asked about their experienced that, this is my first job, which I specifically applied for and I would say I wouldn't trade it for anything else as a first job. Currently enjoying my time being a dialysis nurse but its sometime mundane given that you have basically have patients with the same diagnosis and symptoms and managements are already given. But given it's still an amazing opportunity because we haven't really learned about hemodialysis in-depth in nursing school. Moreover, my training as a dialysis nurse is very detailed cause the department have a lecture style course and also paired us up with senior nurses with years of experience as our preceptors. To be honest the best, even to this day as we already flying solo our senior nurses will always lend a helping hand. With lecturing and mentoring from seasoned nurses, this program encourages continued support and guidance even as the nurses gain greater independence, allowing for flexibility and adaptation during transitions.

While NNRDU-12, expressed, my experience as a dialysis nurse at first it was a bit of a learning curve for me especially since I'm a new nurse so I don't have much experience yet. Still, it was exciting for me because hemodialysis is a specialty that not all nurses have the opportunity to do. Meanwhile, ang training namin is around 5 days' lecture and 3 months practical. In our training, each of us new nurses is assigned with one senior nurse who will mentor us. The training is a nice experience kasi napakita talaga ang work routine ng dialysis nurse. Meron din relief sa akin as a junior kasi knowing na meron akong direct guidance from a senior nurse on what to do. Our training is a good way to directly expose us in our duties but not in a way na overwhelming. (Our training is around 5 days lecture and 3 months practical. In our training, each of us new nurses is assigned with one senior nurse who will mentor us. The training was a nice experience because the dialysis nurse's work routine was really shown. There is also relief for me as a junior because knowing that I have direct guidance from a senior nurse on what to do. Our training is a good way to directly expose us in our duties but not in a way that is overwhelming.)

Theme 2: Striving to achieve competence

Achieving competence is essential for professional development, particularly for novice nurses in specialized settings like a renal dialysis unit. Nurses entering this area encounter distinct challenges, such as mastering essential technical abilities and grasping intricate patient requirements. The pursuit of competence involves not just obtaining the requisite clinical expertise but also honing the ability to make prompt decisions, effectively operate dialysis machinery, and deliver empathetic care to individuals with chronic kidney disease. New nurses must consistently improve their skills through training, mentorship, and practical experience. By dedicating themselves to enhancing their proficiency, they can guarantee optimal outcomes for patients, boost their confidence, and make significant contributions to the healthcare team.

NNRDU-1 shared their challenges that, complications, patients experience various complications such as hypotension, infection, or clotting issues during dialysis, and managing these requires prompt interactions. In addition, NNRDU emphasized that it can be challenging to care for a large number of patients with different needs especially during busy periods or if there are emergencies.

NNRDU-2 seconded that challenging aspect is how you will win the trust of your patient especially when they have unpleasant experiences of their previous treatment. Challenges faced were when the assigned patients arrived at same time and they would have to have their treatment started asap. There was one situation in which my patient died; know how to assess your patient and how/ whom to refer to doctors. Talk to more seasoned nurses for advice and input on how to deal with the situations.

Likewise, NNRDU-3 agreed that when one of my patients that was very close to me expired and it was very hard not to get emotionally involved since in RDU, we have regular patients, and we tend to get closer to them, which made it hard for me not to be affected.

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On the other hand, NNRDU-4 narrated about that complications may arise during dialysis, personally, I would say when someone is having an arrest during dialysis. It will challenge your mind and also your prioritizations. I have realized that in times that I am handling a critical patient I should always prepare the things I will administer ahead of time.

Moreover, NNRDU-5 agreed that I think it's managing complex medical needs like comorbidities; many dialysis patients have additional health condition problems such as cardiovascular diseases, complicating treatment, and requiring careful coordination. Addressing emotional distress provides emotional support; active listening allows patient to express their feelings and concerns without interruptions, show empathy and validate their emotions. Increased patient load or more patients, unpredictable situations; kalit ma toxic ang patient (suddenly the patient becomes toxic) and multi-tasking demands.

Indeed, NNRDU-6 stated that, sometimes, it caused me to panic and confused on what to do first. And added, yes, it was an emergency situation. I was too pressured to do all things at once that I broke down after doing well all the things that I needed to do. This was the challenging experience of NNRDU-6 being a novice nurse in a renal dialysis unit.

NNRDU-7 shared sentiments on his/her struggles that, personally, I am still having a hard time providing dialysis care to my patients. Some in-patients are more delicate and need more attention, especially when there are a lot of orders that need to be read and carried out. In addition, there is a lot of paperwork and documentation. So, you really have to multitask and manage your time well when doing paperwork while monitoring your patients. As soon as I arrive, I will start preparing my kit. Then, I will start as soon as my patient arrives. If ever the machine is not ready yet, I will start to clean and dress the site of my patient. If all my patient arrives at the same time, I will start the dialysis first as fast as I can, and I will follow up the dressing as soon as I'm done starting all of my patients. Immediately after the dressing, I will start preparing my post-kit for all my patients. Then, the remaining time will be consumed monitoring the vital signs of my patient and do their charting.

While NNRDU-8 experienced struggles and challenges, narrated that I usually encounter challenging experiences when dealing with critical patients because they are so fragile, and I notice dialysis usually causes them to desaturate. That is why you have to be always alert. As much as possible, I try to be calm so that I can do my work better and avoid errors."

On the other hand, NNRDU-9 shared that managing patient's complex medial needs, addressing frequent complications, coping with the emotional impact of chronic illness, and ensuring consistent adherence to treatment protocols by quickly assessing the issue, implementing appropriate intervention and coordinating with the health care team to ensure timely and effective care while keeping the patient and their family informed.

When asked about how they handle struggles and challenges, NNRDU-10 said that, I handle it calmly; panic is not a good thing here. I give sympathy to them to make them sure that I understand them. Time management is always the key. I prioritize things to have a smooth and peaceful day. Finally, NNRDU-10 added that when there are unexpected unusualities, for example, a patient is having a seizure. I need to make sure that the patient is safe.

According to NNRDU-11 that, the most challenging if the patient already doing treatment for years and apprehensive with novice nurses, especially for avf and avg access patient. And most of the time if there are something wrong with the treatment, they will blame us novice nurses even though it's normally occurring. For me the paper works are the most hectic thing especially there are multiple things to fill up for DOH compliance aside from the chart. Because we used pen and paper it much more time consuming especially when you have a new patient, we need to fill out all this paper work on top of monitoring them.

Likewise, NNRDU-12 stated that, definitely difficult patients especially if you don't know how to handle this patients matatagalan ka sa oras mo and matatagalan ka start ng dialysis to your other patients kasi yung current patient mo either maraming questions or may pinafollow na routine. Other is time management I struggled with these when starting my duty kasi you need to know your priorities and you need to learn to be faster while not compromising your care towards your patient. (Definitely difficult patients. Especially if you don't know how to handle these patients, it will take you a long time and it will take you a long time to start dialysis to your other patients because your current patient either has a lot of questions or has more routines to follow. Another is time management. I struggled with these when starting my duty because you need to know your priorities and you need to learn to be faster while not compromising your care towards your patient.)

Theme 3: Seeking mentorship and utilizing stress management techniques

Novice nurses in a renal dialysis unit must have a mentor for guidance and utilize stress management techniques. Look for knowledgeable mentors to receive practical advice and input, which will enhance skills and boost confidence. Simultaneously, engage in activities such as mindfulness, physical activity, and healthy eating to manage work stress. Utilize peer support and counseling for managing challenges and avoiding burnout. This well-rounded strategy encourages growth in both career and personal life.

Certainly, NNRDU-1 narrated that, by talking to my coworkers about difficult instances and exchanging experiences, this collaborative approach provides emotional relief. I make sure I get enough sleep every night, so I can recharge and handle the challenges of my work better. I engage in hobbies and activities that bring joy and relaxation such as watching movies and playing with my dog. I ask for advice or suggestions on how to address the problem. I appreciate their insight and support to help

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me resolve the issue. I am glad that all of my colleagues are kind to help me when handling difficult situations, they provide practical advice and offer support.

Confirmedly NNRDU-2 stated that, painting and going to the gym. Play with my dogs. Find time for yourself. Set limits to your work, and as much as possible, don't bring your work at home. Consult the seasoned colleagues or friends that works in the same field.

Thus, NNRDU-3 stated that I always remind myself of my line of work and the responsibilities of a nurse. I try not to be emotionally affected a with my patients but still being empathetic. Personally, I cope through eating good food and spending a little on my wants which inspires me to work every day. I make time to spend time with my friends and loved ones time after time and still get rest in my free time. It is emphasized that mentorship and stress management strategies are crucial for sustaining resilience in the nursing profession.

Meanwhile, NNRDU-4 stated that, I chose to have a self-care time management to myself where I enjoy the time being with myself and doing things by myself. I always separate my personal life and problems while I am on duty so that my emotions would come on my way. My friends and I will try to gather together and have a nice conversation while catching up with one another. Placing a high value on time management and self-care enables one to remain emotionally stable while on the job, which improves the ability to interact with mentors and offer friends thoughtful assistance.

In particular NNRDU-5, addressing emotional distress provides emotional support; active listening allows the patient to express their feelings and concerns without interruptions, show empathy, and validate their emotions. Prioritized tasks, assess urgency and importance, create to do list, plan and organize. I have self-care practices such as: do regular exercise, healthy eating, and get adequate sleep. Stress management techniques such as mindful meditation and deep breathing exercises. I communicate with my seniors or colleagues to work together on solutions or strategies to address common challenges and improve teamwork.

Realizing that the tendency to keep struggles to oneself could be helped by mentorship and stress-reduction strategies that promote candid communication and support. NNRDU-6 realized that I eat something that makes me happy. I go rest and enjoy the silence at home after being overestimated at work. When I'm free and there's a chance to hang out with friends or family then I go with them. I watch movies, series, and rot in bed. Well, music helps me get through stuff. As I've said, I don't share much of my problems. That's why I tend to pretend that I'm fine.

In addition to NNRDU-7, I will self-reflect first. I will then try to draw the line on having a healthy nurse-patient relationship, and I will try my best not to get attached to them too much. I mentally prepare myself for the things that might happen, good or bad. Self-care helps me to manage stress and maintain my well-being. Self-care in terms of cleaning my own space, listening to podcasts, watching movies and doing small little tasks to make me feel better and accomplished. I talk and share what I feel with people whom I feel like I can trust and who listen without any judgments. All of my colleagues in the unit help me to become better each day. I go to them whenever I have questions and things I need to clarify.

The same goes for NNRDU-8, I usually lay down on my bed and sleep. This way, I can recharge and forget my stressful experiences. I make sure I have time for myself during my off days. I would watch TV, series or eat. While spending time doing things like watching TV or eating meals on your days off promotes self-care, going to bed helps you unwind and recharge.

NNRDU-9 agreed that by quickly assessing the issue, implementing appropriate intervention, and coordinating with the health care team to ensure timely and effective care while keeping the patient and their family informed. By prioritizing tasks, staying focused and organized with a structured schedule, using time management tools, and delegating responsibilities when appropriate, all while maintaining flexibility to adapt to unexpected needs.

Subsequently, NNRDU-10 expressed that, when it is work, I really work and try not make lacking in my duties. When it's my day off, I spend my time with my family and friends. Yes, all of my seniors here in RDU have a big part of my learnings here. They are all approachable and guide me all the way. During work hours, a strong commitment to duties is prioritized, while days off are dedicated to quality time with family and friends; the approachable seniors in the RDU play a crucial role in providing guidance and mentorship, which supports personal growth and helps manage stress effectively.

Moreover, NNRDU-11 said that, managing work stress, I tend to view it as a form of discipline because it's kind of making me on my toes all the time cause, being on the floor, anything can happen. But outside of work, I try to break it down into smaller chunks just to understand why it is causing stress and also utilize this strategy in work also. As for maintaining my well-being, the vitamin is a must, working out (I should), and, more importantly, I turned my attention work-related.

In addition, NNRDU-12 stated that having me time is really important. Kasi introverted talaga ako na tao, so I recharge by having alone time, like reading books and going to quiet places. Also exercising in my free time makes me feel grounded and mawala ang exhaustion ko. (Having a me time is really important. Because I'm a really introverted person I recharge by having alone time like reading books and going to quiet places. Also, exercising in my free time makes me feel grounded and my exhaustion disappears.) Separate yourself from work. Don't let work be your whole personality. May set time boundaries ka for work and for your family. Like every Sunday I spend time with my family and go to church. (Separate yourself from work. Don't let work be

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your whole personality. You have set time boundaries for work and for your family. Like every Sunday I spend time with my family and go to church). My mentor or trainer is the number one, who has been really helpful to me since day one.

Theme 4: Work flexibility with compassion.

Having compassion and embracing flexibility in renal dialysis unit work is essential for novice nurses. Adjust to different scheduling and patient requirements while upholding a caring attitude towards treatment. Being flexible supports in effectively handling job demands while demonstrating empathy helps patients and their families during tough times. Striking a balance between flexibility and compassion improves patient results and job fulfillment.

NNRDU-1 felt that I am glad that all of my colleagues are kind to help me when handling difficult situations; they provide practical advice and offer support. Handling a variety of patients' needs and emergencies has taught me to be adaptable and resourceful in finding solutions to complex issues. Develop excellent communication skills to explain treatment procedures, answer patients' questions, and provide emotional support.

In the same way NNRDU-2 that is being sensitive to how your patient is behaving and being more conscious and attentive to things that matters. Have an open-minded and welcome criticism and corrections as these would build you a strong foundation in your current role and learn every day.

Enhanced self-assurance in one's abilities and knowledge contributes to the provision of optimal nursing care, emphasizing the significance of adaptability and empathy in accommodating patients' requirements. As mentioned by NNRDU-3, I have grown to be more confident in my knowledge and my skills in handling patients with the ideal nursing care done.

As noted by NNRDU-4, the best advice I can only give is to be keen and precise in every move we make with patients, especially with critically ill. Be open-minded, and open to receiving criticism for you to be a good nurse. Always accept challenges for you to learn and experience a lot of opportunities. Just be brave to face whatever circumstances and ask when in doubt so that you can grow as far as I have done in the past six months.

As asserted by NNRDU-5, to gain a strong foundation to learn the basic life, focus on understanding the fundamental of renal dialysis procedures and patient care." Establishing a solid foundation in the fundamentals of renal dialysis techniques and patient care promotes an adaptable and caring work environment that improves patient outcomes and skill development.

As described by NNRDU-6, take it easy, don't pressure yourself. You'll be fine as doings as you have the eagerness to learn. A caring and adaptable work environment is fostered by taking a laid-back approach to challenges and a willingness to learn, which eventually supports both professional and personal growth.

As revealed by NNRDU-7, I observed that I have grown professionally in terms of I became more confident with my skills and judgment compared to before. Now, I require minimal supervision. Moreover, I know there are still a lot to learn and I am always open for improvements. I realized that I am more careful on what I do; I became more confident in doing my work responsibilities, and little by little, I learned how to manage my time effectively. I would tell them to not be afraid because all things can be learned at your own pace. I would advise them to be confident in what they do and don't hesitate to ask questions to prevent any errors. Being a novice renal dialysis nurse is fulfilling. You get to witness firsthand the improvements of your patients as time goes by. Moreover, having a routine work motivates me every day to do better each day.

I aim for efficiency while upholding a high standard of work and developing a rapport with patients, emphasizing how crucial compassion and adaptability are to providing effective care. In the view of NNRDU-8, be as fast as possible but make sure you don't compromise the quality of your work and build rapport to your patients.

In light of NNRDU-9, I would advise them to prioritize building strong patient relationships and stay organized with treatments. Seek support and mentorship to navigate the emotional and technical challenges of the role. I faced challenges with mastering complex procedures and managing patient emotions, but I grew by seeking guidance from experienced colleagues and gradually gaining confidence in my skills and patient interaction.

While flexibility and quick learning ensure that we can efficiently address changing demands, emotional stability promotes compassion and a supportive environment in patient care. Building resilience enables us to sustain our own well-being and give greater care. Based upon NNRDU-10, my advice to them is to be more emotionally stable because we spend a lot of time with our patients. Try to be a fast learner as well.

Specified by NNRDU-11, "In any situation as a newbie regardless of past clinical experience, see it as a learning opportunity and be open and disregard previous habits that could hinder learning and providing proper nursing care.

As highlighted by NNRDU-12, I think it made me tough and, at the same time, more compassionate because I get to deal with different patients from all walks of life. Working with a diverse patient population promotes compassion and resilience, underscoring the significance of flexible and understanding healthcare in the workplace.

Discussion

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This qualitative study intends to explore the experiences of novice nurses in renal dialysis units among tertiary hospitals in Davao City. The key finding to this study resulted in four emergent themes. The relevance of skill learning for competence, mentorship combined with stress management, compassionate work flexibility to promote resilience and well-being, and adaptation throughout changes are all highlighted by the four themes.

The first theme is flexibility and adaptation while transitioning, it can be challenging for recently graduated nurses to transition from being nursing students to registered nurses (RNs) when they work in a hospital setting. Around this period, a lot of people get reality shock as they discover conflicts between their educational ideals and their career aspirations. This could lead to a difficult, discouraging, and unpleasant transition that increases the likelihood of burnout and higher turnover rates. It is imperative that recently graduated nurses quickly adjust, comprehend their responsibilities, become accustomed to their new roles, adopt the appropriate attitudes, fit in with their work units and organizational culture, and gain acceptance within the organization to ensure a smooth transition (43).

Because of this, a nurse's transition from a new graduate to a professional needs support from her own personality, professional associations, and educational institutions. Successful transition factors include contributions from professional contexts, educational institutions, and the character traits of recently graduated nurses. Despite the numerous attempts to enhance performance and ease this transition, the personalities and soft skills of new nurses are critical to their adjustment. These nurses are more resilient and more equipped to handle demanding work environments because of their traits like proactivity and strong self-confidence (45).

For nurses, switching occupations and specializing is a fulfilling and thrilling aspect of the nursing journey. The ability to adapt to change with ease ensures growth on both a professional and personal level and improves patient care. Flexibility is a vital trait for nurses to adapt to various work contexts and specializations. Because healthcare environments can be dynamic, it's critical to have quick decision-making skills. In order to seamlessly integrate into their new roles, nurses must be open to picking up new procedures, work methods, and technological tools (46).

The second theme, skill acquisition to achieve competence, the inexperienced hemodialysis nurses aimed to gain the necessary skills and proficiency in dialysis techniques. In particular, new nurses find Arteriovenous fistula cannulation to be somewhat challenging and require critical thinking skills because some nurses are turned away from patients because of their lack of experience with Arteriovenous fistula cannulation. Likewise, one of the most important tasks for new nurses is to become comfortable using the dialysis machine thus they need to troubleshoot and operate the machine suitable to the patient’s needs; they also need to gain more knowledge about unexpected situations that patients face during treatment; they also need to learn how to provide appropriate health education based on laboratory results and patient circumstances; they must also learn how to interact with various dialysis patients and, most importantly, how to run the entire dialysis process effectively and efficiently (47).

Moreover, the process of developing a nurse's professional skills for employment in dialysis facilities takes time. For novice nurses who have chosen to pursue a career in this field, dialysis treatment presents a number of obstacles, including the need for specialized knowledge, skills, and competencies, staffing shortage situations, and ongoing underfunding. Despite the high demands, the weight of the pathology, and the frequent patient-nurse interactions, this field is steadily trending toward stability and staff retention. In order to provide dialysis patients with high-quality care, nurses' knowledge must be updated, broadened, and enhanced on a regular basis. As a specialist, novice nurses must learn more about the field of nephrology and dialysis administration than just using their gut feelings. This is evident from the strong desire (48).

Furthermore, in order to effectively engage with patients receiving hemodialysis for chronic kidney disease, nurses must possess specialized training in dialysis techniques and interpersonal skills. Because hemodialysis is so complex, it is imperative that continuing education be provided. This calls for organized training curricula that include frequent updates and assessments. Expertise in dialysis has a major effect on patient survival rates and lowers morbidity. Higher skill levels within the team correlate with better patient outcomes, according to studies by Foley and Hakim, despite the paucity of research on the direct relationship between nurses' abilities and the quality of dialysis. Competence includes all of the necessary abilities, know-how, dispositions, and moral principles for efficient nursing practice. In addition, assessing a nurse's competencies is essential for pinpointing areas in which they need to advance professionally because a nurse's self-perception affects both their performance and image (49).

The third theme, seeking mentorship and utilizing stress management techniques, taking care of your physical, mental, and emotional needs is crucial to preserving equilibrium and averting burnout. Being aware of your stressors gives you the ability to create resilient coping strategies and resilience, both of which are essential for overcoming adversity and adjusting to it. Throughout trying times, having a strong support system that includes understanding mentors and coworkers may be very helpful in providing emotional support and direction. Having conversations with people who are knowledgeable concerning the nursing field promotes friendship and aids in staying focused under pressure. Additionally, you can refuel and strike a healthy work-life balance by including self-care routines like exercise, mindfulness, and hobbies. Prioritizing these components can dramatically boost your general well-being and effectiveness in your nursing profession (50).

The process of experienced people sharing their stories and offering assistance to a mentee—not as a mentor but as a sounding board—is referred to as mentoring. Mentorship can also lower the turnover of nurses. As a result, mentoring is a useful strategy for keeping nurses from burning out. It also has an impact on how well mentors are able to guide others. Mentoring initiatives

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may help nurses feel better mentally, which would enhance the workplace and lower turnover. A mentoring program offers the following benefits: the mentor from a different department gives the mentee a sense of security regarding their privacy; mentors have experienced the suffering of young nurses and can empathize with them; the role of providing mental health support is established (51).

Under mentoring, an experienced nurse and a less experienced colleague form a partnership that involves sharing accountability for goals that have been mutually agreed upon. Instead of developing skills, the goal is professional development. Particularly for recently graduated nurses, the preceptor-student connection usually ends at the same moment as reality shock sets in, depriving the novice nurse of a support system just when they most need it. In the end, mentoring may improve work satisfaction by bridging the knowledge gap between academic study and clinical practice realities. Mentoring can smooth the transition for new nurses from training to clinical practice by providing possibilities for professional and personal growth, learning opportunities, stress reduction, and self-confidence building. Furthermore, having a mentor's support makes the mentee feel welcome, at ease, and self-assured (52).

The fourth theme, is work flexibility with compassion; in particular, for a novice nurse on a dialysis unit who is learning to handle the complexity of patient care with flexibility and compassion, compassionate care can greatly improve patient experiences. It is a vital component of nursing practice. By attentively listening to patients and their families and respecting their thoughts and worries, nurses can demonstrate compassion. Empathy demonstrates rapport and trust, which facilitates a greater level of connection between nurses and patients. While small acts like offering comfort products might ease discomfort, tailoring care to each person's requirements promotes a feeling of worth and understanding. Furthermore, providing information about illnesses and available treatments to patients and their families empowers them and lessens their worries. Using these techniques, nurses may establish a caring atmosphere that encourages recovery and enhances overall patient satisfaction (53).

To provide high-quality patient care in dialysis units, new nurses must possess compassion and adaptability. Flexible nurses can adapt to the changing demands of their patients, who may need particular accommodations during treatment or exhibit different degrees of distress. Nurses may guarantee that every patient receives individualized attention by coordinating with other healthcare providers, revising care plans, and rearranging timetables. In order to build a supportive environment and assist nurses in sympathizing with patients' physical and mental issues, compassion is essential in this process. In addition to improving patient happiness, this dual strategy assists novice nurses in gaining confidence and forging close bonds with their patients. Ultimately, empathy and flexibility combine to provide a comprehensive care experience that fosters recovery and well-being in the dialysis environment (54).

Learning to operate compassionately and flexibly as a new dialysis nurse has several advantages for the patient and the nurse. While compassionate care makes patients feel appreciated and understood, flexibility enables nurses to customize their approach to match the requirements of each particular patient, establishing trust and rapport. Because of their increased ability to adapt, nurses may be able to better manage complications and increase the efficacy of treatment for patients. Furthermore, nurses who exhibit compassion and adaptability report feeling more satisfied with their work because they are aware of the good effects they have on patients' lives. Additionally, by strengthening critical thinking abilities, it fosters professional development and lessens burnout by preparing nurses to manage emotional demands. Ultimately, this strategy creates a helpful workplace, enabling patients to actively participate in their care and improving general (55).

Implications

This study aims to investigate and understand the experiences of novice nurses working in renal dialysis units at tertiary hospitals in Davao City. By identifying the key values and principles that emerge from these experiences, the study offers valuable insights into the work environment of novice nurses. These insights may create a more supportive and effective work environment for nurses and patients.

Nursing Education. To better prepare students for real-world clinical scenarios, nursing programs should emphasize specialized skills for renal care, integrate realistic simulation training, and offer exposure to renal dialysis units. By incorporating renal dialysis treatment into the curriculum and providing hands-on experience, future nurses will be able to handle the stress of the work and develop effective coping mechanisms. This approach can lead to a more capable and confident nursing workforce, ultimately improving the quality of care and patient outcomes in renal dialysis settings.

Nursing Administration. For nursing administration, the experiences of new nurses in renal dialysis units are crucial. Effective onboarding and training programs that foster competence and confidence are developed using these findings as a guide. By addressing new nurses' difficulties, well-informed staffing decisions are made, guaranteeing sufficient assistance during stressful times. Encouraging open communication allows new nurses to express their concerns, and official mentorship programs enhance retention and professional development. Nursing administration fosters a positive work atmosphere that improves patient care by attending to the unique requirements of new nurses.

Nursing Practice. The way new nurses experience working in renal dialysis units has a significant impact on nursing practice. Understanding their challenges highlights the need for a stronger focus on patient safety and improved treatment standards. Ongoing education ensures that nurses acquire the essential skills for renal care while fostering a positive team environment that

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builds self-confidence. Furthermore, promoting open communication provides novice nurses a platform to voice concerns and contribute to best practices. Addressing the needs of new nurses, such as training in AVF cannulation, operation of hemodialysis machines, and BLS/ACLS certification, enhances nursing practice and ultimately benefits both patients and staff.

Nursing Research. The experiences of new nurses in renal dialysis units are important. Examining their challenges reveals knowledge and practice gaps, guiding future research to improve support and training. Investigating the effects of mentorship programs on the self-efficacy of novice nurses and the quality of patient care advances evidence-based practices. Research on the psychological and emotional aspects of their experiences contributes to developing interventions that promote resilience and overall well-being. By focusing on the experiences of new nurses, nursing research enhances practice, education, and the quality of care in specialized settings.

Recommendations

Based on novice nurses' experiences in renal dialysis units, the following suggestions can be made:

Improved Orientation Programs: The Institution will develop a thorough onboarding process with practical instruction and mentorship on renal care, and a concise, step-by-step renal dialysis treatment manual approved by the DOH.

Ongoing Education: The facility will offer nurses the opportunity to attend renal dialysis training and seminars, cover all costs, and provide additional benefits in exchange for a three-year service commitment.

Mentorship Initiatives: Create formal mentorship manuals that match novice nurses with more seasoned employees to provide support and guidance.

Novice Nurses. The study will provide insights into novice renal hemodialysis nurses' experiences, including their perspectives on coping with "reality shock" and adjusting to their first job.

Nursing Education.

The insights from novice renal hemodialysis nurses will help future nurses better understand their roles, cope with field pressures, and prepare for critical hospital situations.

Hospital and Center Administration. The study will provide insights into the experiences of novice renal hemodialysis nurses, helping to identify areas for improvement and support during their first year.

Nursing Practice. The experiences of novice renal hemodialysis nurses will help build a foundation for their competence, enabling them to adapt to situations and provide the best patient care.

Nursing Research. The study can be used as reference material for future studies of the novice renal hemodialysis nursing program, focusing on its perspectives.

Department of Health. The Department of Health may use the study to develop policies ensuring the safety of novice renal dialysis nurses and provide incentives to private dialysis nurses while recognizing their dedication and competence in patient care.

Healthcare organizations can enhance the support provided to novice nurses and improve job satisfaction, retention, and patient care outcomes by addressing these areas.

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