



# Process for Newly Graduated and Novice Home Health Care Nurses to Become Independent Home Health Care

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## Abstract

**Purpose:** This study aims to identify the process by which newly graduated and novice home health care nurses transition to independent home health care practice.

**Methods:** The study included four newly graduated and novice home health care nurses working at a home health care nursing station in Prefecture A. A qualitative descriptive analysis was conducted based on semi-structured interviews.

**Results:** The process for newly graduated home health care nurses to achieve independent home health care practice comprised seven categories: [Struggles as a Newly Graduated Home Health Care Nurse], [A System That Nurtures the Entire Workplace], [Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program], [Providing Care Based on User's Needs], [Supporting Users' Decision-Making], [Collaboration], and [Independent Home Health Care]. Similarly, the process for novice home health care nurses to reach independence included seven categories: [Struggles as a Novice Home Health Care Nurse], [Support Through Accompanied Visits], [Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program], [Providing Care Based on Users' Needs], [Supporting Users' Decision-Making], [Collaboration], and [Independent Home Health Care].

**Conclusion:** Despite facing challenges, newly graduated and novice home health care nurses developed their professional practice with educational support from their workplaces and external training programs, ultimately achieving independence in home health care nursing. The findings suggest that expanding the recruitment and training of newly graduated and novice home health care nurses, as well as hospital nurses who retired early and wish to transition to home health care nursing, may enhance the retention of young home health care nurses and ensure the continuity of home health care services.

## Introduction

In Japan, the number of elderly individuals requiring complex medical and nursing care remains high, while the country is experiencing a rapid decline in its working-age population. In response to this demographic shift, the government has introduced several strategic initiatives, including the establishment of a regionally integrated medical and long-term care delivery system, securing human resources, reforming work styles, and ensuring the efficient and effective use of limited resources [1].

The number of workers in home healthcare nursing, a key component of the community-based healthcare delivery system, reached 68,000 in 2020 and continues to grow. However, this remains significantly lower than the projected demand of 113,000 by FY2025. With a job offer ratio of times [2], securing sufficient, it is difficult to secure human resources in home health care nursing remains a critical challenge. Notably, 70% of home health care nurses are over 40 years old [3], making it imperative to secure and train younger nurses, including newly graduated individuals, to ensure the succession of home health care nursing as the veteran workforce approaches retirement. A previous study on nursing students' employment preferences found that 50% expressed interest in becoming home health care nurses [4]. However, many indicated that they preferred to gain diverse clinical experience in hospitals and receive adequate education before considering employment in home health care nursing [5]. The percentage of newly hired home healthcare nurses was only 0.1% in 2021, 2022, and 2023 [6-8], and 3.4% of 56 surveyed home healthcare agencies had experience hiring new graduate home healthcare nurses [9]. Agencies that had never hired newly graduated home health care nurses cited several barriers, including the lack

of an adequate education system for new graduates, a preference for hiring nurses with clinical experience, and insufficient external collaboration in training [9-10]. Conversely, approximately 90% [9] of nurses who entered the workforce as newly graduated home health care nurses remain employed, with 63% still actively working in the field and 26% having transferred within their facilities. These findings suggest that new graduate home health care nurses are capable of long-term retention. However, home healthcare nursing stations continue to struggle with providing adequate educational support for newly graduated nurses and are more inclined to seek experienced professionals who can contribute immediately to the workforce.

Under these circumstances, the Japan Nurses Association has launched a plan to double the number of home health care nurses [11], aiming to secure sufficient human resources to meet the growing demand for home care. As part of this initiative, efforts are underway to recruit and train newly graduated home health care nurses. This measure seeks to alleviate the burden of human resource development at individual home healthcare nursing stations by establishing a centralized education center responsible for training new nursing graduates. Additionally, as a public financial resource, the Fund for

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Comprehensive Securing of Regional Medical and Nursing Care has been established at the prefectural level to support projects focused on securing medical and nursing care personnel [1]. In recent years, leveraging these funds and initiatives, many prefectures have been working to centralize education through specialized programs aimed at training newly graduated and novice home health care nurses. Human resource development efforts have been integrated with On-the-Job Training (OJT) in visiting nursing facilities [12-21]. Despite these initiatives, the number of newly graduated home health care nurses has not shown a significant increase, making this an area of concern. It is essential to expand efforts to secure and train motivated nurses who initially worked in hospitals after graduation and transitioned into home-visit nursing at an early stage in their careers.

The authors had the opportunity to interview newly graduated home health care nurses who entered the field immediately after graduation, as well as novice home health care nurses who transitioned into home health care nursing after less than two years of hospital experience. During the interviews, newly graduated and novice home health care nurses who had been working in home health care for less than two years, shared positive reflections on their initial challenges, the educational support systems available to them, and the process that led to their first solo home visits. The purpose of this study is to identify the process by which newly graduated and novice home health care nurses transition to independent home health care practice. This research aims to clarify their experiences after entering the profession, explore their perceptions of and responses to educational support, and provide recommendations for improving future in-service education.

## Definition of Terms

In this study, individuals who entered home health care nursing immediately after graduating from educational institutions such as nursing colleges or technical schools are defined as newly graduated home health care nurses. Those who transitioned into home health care nursing within two years of graduation after working as hospital nurses are defined as novice home health care nurses.

## Methods

### Extraction of subjects

The participants included newly graduated and novice home health care nurses who either entered home health care nursing immediately after graduating from a nursing college or vocational school in Prefecture A or transitioned within 2 years of graduation. The details of the survey request were explained to the managers of home-visit nursing facilities who attended an organizational meeting. Managers from facilities willing to participate provided written consent for the survey. The researcher verbally explained the study's main purpose and objectives to the managers of these facilities, emphasizing the intention to invite newly graduated and novice home health care nurses to participate. On the day of the survey, newly graduated and novice home health care nurses received a written and verbal explanation of the study's purpose, and their informed consent was obtained in writing before participation.

### Survey period

January - March 2024

## Data collection

Data were collected from four sites and four newly graduated home health care nurses through semi-structured interview surveys. The survey included the following questions based on the interview guide: "What influenced your decision to become a home health care nurse?", "What has your experience in home health care nursing been like?" and "How do you feel about working as a home health care nurse?" The questions considered participants' ages and years of experience in home health care nursing. With the participants' permission, interviews were recorded using an IC recorder, and verbatim transcripts were prepared. Each interview lasted approximately 60 minutes.

## Analysis Method

(1) The verbatim transcripts were carefully reviewed, and statements describing the process of becoming independent home health care nurses were extracted, translated, and coded while ensuring the original meaning was preserved.

(2) Codes were grouped into subcategories by commonality and similarity.

(3) Subcategories related to nursing practice were further categorized according to the three clinical practice competencies outlined in the clinical ladder for home health care nurses in each prefecture: (i) ability to understand and address users' needs, (ii) ability to support users' decision-making, and (iii) ability to collaborate. Other subcategories were grouped by commonality and similarity to form broader categories.

The obtained results were supervised by experts in the field of community and home nursing to ensure their reliability.

## Ethical Considerations

The administrators of the participating home health care agencies, as well as the newly graduated and novice home health care nurses, were informed both in writing and orally about the study's purpose, objectives, and scope. They were assured that neither the home health care agencies nor individual participants would be identifiable in the published survey results and that participation in the study was entirely voluntary. Interviews were recorded with participants' consent, and all data were securely stored in a locked storage room. The collected data were used solely for the purposes of this study, and analysis was conducted in a manner that ensured no facility or individual could be identified. To maintain confidentiality, computers without Internet access were used to prevent unauthorized data leaks. Additionally, all data will be securely stored for five years following the study's completion, after which they will be permanently deleted. Participation in this study was entirely voluntary, and individuals who chose not to participate faced no disadvantages or consequences.

This study was conducted following approval from the Ethical Review Committee of the researcher's affiliated institution. (Approval No. 0523)

## Results

### Outline of the subject

Following a survey request from the A Prefecture Nursing Professional Association to managers of home health care nursing offices, consent was obtained from four facilities. Among them, two newly graduated home health care nurses, and three novice home health care nurses. For this study, four participants were selected for

for analysis: two newly graduated home health care nurses and two novice home health care nurses who transitioned into home health care nursing with the motivation to engage in the field. All participants were in their 20s. Newly graduated nurses were accompanied for approximately nine months before conducting home-visit nursing independently, while novice nurses received about three months of accompaniment before practicing autonomously. All participants had completed the training program for newly graduated and novice home health care nurses in Prefecture A.

**Process for newly graduated and new home care nurses to become sole**

The analysis of the process by which newly graduated and novice home health care nurses transition to independent home health care practice identified 102 codes and 32 subcategories (Table 1).

The process for newly graduated home health care nurses leading up to independent home health care nursing was categorized into 7 themes: [Struggles as a Newly Graduated Home Health Care Nurse], [A System That Nurtures the Entire Workplace], [Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program], [Providing Care Based on Users' Needs], [Supporting Users' Decision-Making], [Collaboration], and [Independent Home Health Care]. Similarly, the process for novice home health care nurses leading up to independence included seven categories: [Struggles as a Novice Home Health Care Nurse], [Support Through Accompanied Visits], [Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program], [Providing Care Based on Users' Needs], [Supporting Users' Decision-Making], [Collaboration], and [Independent Home Health Care]. Hereafter, categories are indicated by [], subcategories by < >, and codes by " ".

The process by which newly graduated and novice home health care nurses reach independence is illustrated (Figure 1).

Newly graduated and novice home health care nurses initially faced challenges in their transition to the field. However, with support from their workplaces and external training programs, they developed essential competencies in home health care nursing. This process involves understanding and addressing users' needs, supporting their decision-making, and fostering collaboration. Through this progression, they successfully achieved independent home healthcare practice.

**Struggles as a Home Care Nurse**

Newly graduated home health care nurses faced challenges in their transition to the field. One nurse reflected, "In the beginning, I felt like a student" and admitted feeling "depressed about not being able to do things." She also experienced <the complex of being a newly graduated home health care nurse>. At her workplace, she struggled to grasp conversations, noting that "the words I heard were completely unfamiliar to me." She expressed frustration, stating, "If it had not been me, I could have done more," and described feeling <helpless to do anything>. Additionally, one nurse recalled a difficult experience: "There was a case in which a patient had died when I visited," which led to a fear of sudden changes and death.

Novice home health care nurses also expressed their struggles and anxieties, describing "the burden unique to home health care nursing." One nurse explained, "Even though I have experience as a hospital nurse, I have to do everything from scratch." Another emphasized logistical challenges, stating, "I have to take notes and learn the way so that I can get to the home." A key concern among novice nurses was the responsibility of working independently early in their careers: "I am afraid that I have to work by my own judgment in my first year of home health care nursing." Additionally, some nurses faced <dilemmas about cleanliness and hygiene items> in home care settings. One nurse questioned, "I am worried about how much cleanliness is acceptable in my daily life." Another highlighted the contrast between hospital and home settings: "In the hospital, there is no limit to the use of gloves, but at home, it is not possible to use gloves without restrictions."

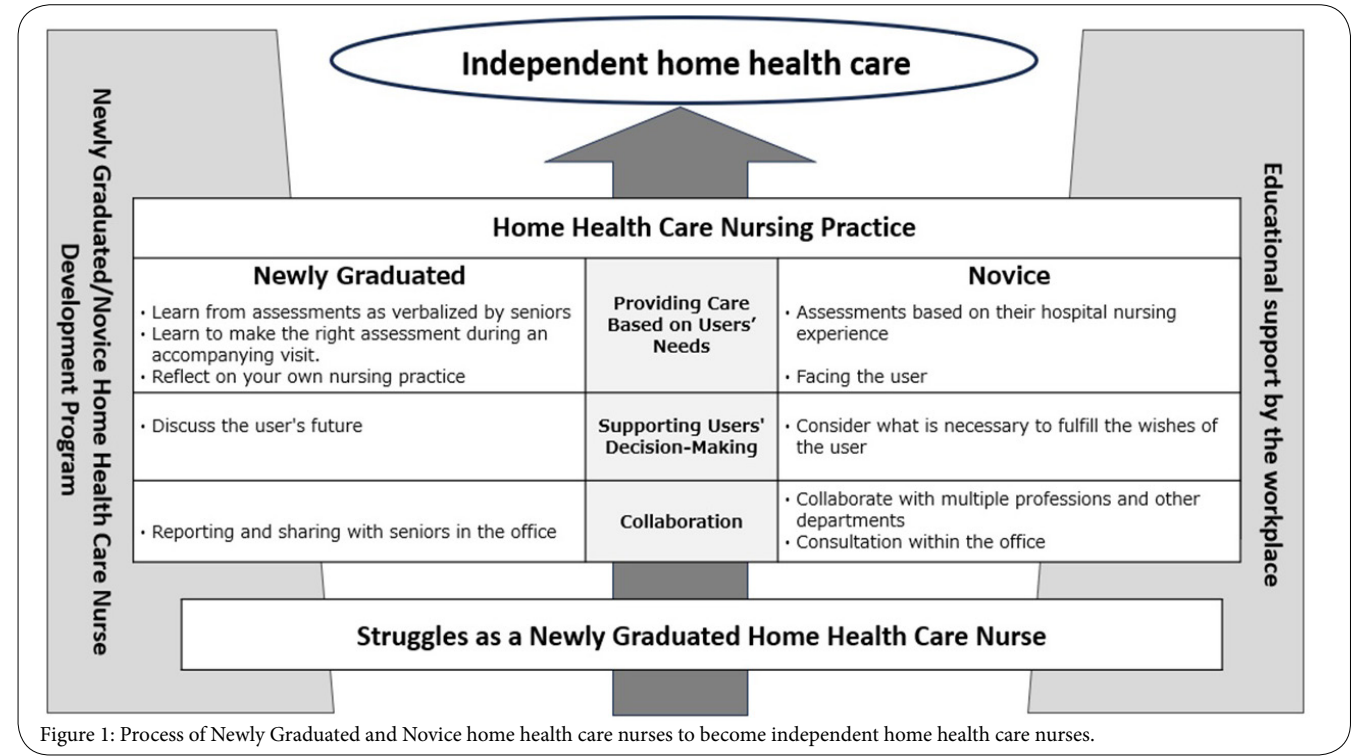


Table 1: Process of Newly Graduated and Novice home health care nurses to become independent home health care nurses.

	category	subcategory	code
Newly Graduated Home Health Care Nurses	Struggles as a Newly Graduated Home Health Care Nurse	The complex of being a newly graduated home health care nurse	In the beginning, I felt like a student
			Being a newly graduated home care nurse is a complex in itself.
			I felt depressed about not being able to do things.
			The words I heard were completely unfamiliar to me
		I have no idea what is being talked about	At first, listening to the meeting, I didn't even know what or who they were talking about.
			The only words I hear are the ones I don't know at all.
		Helplessness to do anything	If it had not been me, I could have done more,
			The senior staff who are accompanying me are very experienced, and I feel like I can't do it very well.
		Afraid of sudden change and death	there was a case in which a patient had died when I visited
			I was also afraid that there was no guarantee that the user had not changed since my last visit.
			I'm terrified when I think about the sudden change I'm going to encounter.
	A System That Nurtures the Entire Workplace	Support from preceptors and senior staff	I felt safe to consult with my preceptor.
			The personalities of seniors who are easy to talk to are a big part of the company.
			Even the veteran nurses encouraged me that it's hard to make decisions alone.
		The presence of great senior staff	Great because seniors have experience that is different from the knowledge and perspective I have.
			I thought, "I can't compete with the seniors who have a sense of what it's like to be a housewife.
			Senior staff have a lot of experience as nurses and are amazing
		An atmosphere in the workplace to nurture newly graduated nurses	I was accompanied by many other people besides my preceptor.
			I joined in April and was accompanied on visits all the way until December.
			They created an atmosphere in which we were all trying to nurture one another.
		a support system to ensure that newly graduated nurses can visit with peace of mind	I'm the only one at the place I'm visiting, but I can call them for advice, and I'm not alone.
			There is an environment where you can report and consult immediately.
			There is an environment where you can talk right then and there.
	"Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program"	"Support by someone who had been a newly graduated home health care nurse"	It was nice to have a senior new graduate visiting nurse close by.
			Newly graduated visiting nurses encouraged by senior nurses
	Providing Care Based on Users' Needs	Learn from assessments as verbalized by seniors	I learned this way of looking at and thinking about things from the practice of my seniors
			No matter how many times I accompanied the same person on a visit, I always found something new for myself.
			I was taught that sometimes you can tell by looking in the trash cans.
			Senior staff put the assessment into words.
			He told me to look at him as a person named Mr. A, not as a person with cancer.
		Learn to make the right assessment during an accompanying visit	I learned when my seniors saw things in a different way from me
			I am gradually becoming able to make correct judgments through the accumulation of accompanying visits
			I found it interesting when I was able to predict that the disease would change in this way
			Interesting to assess a single person living alone with dementia, looking for clues about his/her life.
			Ask your seniors what they have seen, what they have determined, and whether this is the right thing to do, and then match the answers there
		Reflect on your own nursing practice	Became able to do assessments that she had not been able to do before
			I'll reflect on my practice and try to do my best on my next visit
			I will think back to the fact that this point of view was not enough
			I often wonder if I could have done that if I had moved more efficiently
			At the end of life, there is no next time, so regrets can linger for a long time
	Supporting Users' Decision-Making	Discuss the user's future	I was able to think about and discuss the user's future
			I became interested in the user's background and thoughts and discussed the user's future
			It was important to think about the user's future with my senior staff
	Collaboration	Reporting and sharing with seniors in the office	I thought I was happy that the users were getting to know each other a little bit better and were able to report that to their seniors
			I tried to send out my own messages, like taking pictures and having people look at them right away
			I'm contacting them right then and there to discuss it
Independent home health care	Enjoying alone despite my anxiety		I was anxious for a while after I started visiting alone
			Visiting alone can be a problem, but lately, I've been having more and more moments where I finally feel like I'm having fun!
	"Now that I am visiting alone, I am convinced that I made the right choice in my career"		It took me a while, but now that I can visit by myself, I feel like I'm part of the station
	I am convinced that I made the right choice		I'm glad I didn't quit now that I'm visiting on my own
			I have absolutely no regrets about choosing home health care nursing, and I have never wished I had worked in a hospital ward!
	Visiting alone supports the relationship with the user		I enjoy the time I spend with the users
			We have several people who have been involved with us for a long, long time, so that's huge
			I am very happy when a patient remembers my name and says, "I feel relieved that you came to see me"

Continue...

	category	subcategory	code
Novice Home Health Care Nurses	Struggles as a Novice home healthcare nurse	The burden unique to home health care nursing	Even though I have experience as a hospital nurse, I have to do everything from scratch
			Since you will be visiting the patient's home, be careful about users who say harsh things
			I have to take notes and learn the way so that I can get to the home
		Concerns about the user's judgment of the situation	I wonder if what I did was the right thing to do
			I am afraid that I have to work by my own judgment in my first year of home health care nursing
			Nighttime response is difficult because it can be a one-person decision
		Dilemmas about cleanliness and hygiene items	The most difficult part of the care was the cleanliness and filth
			In the hospital, there is no limit to the use of gloves, but at home, it is not possible to use gloves without restrictions
			I am worried about how much cleanliness is acceptable in my daily life
	Support Through Accompanied Visits	being able to visit with a senior nurse until our anxiety disappears	Educational system of accompanying visits for a couple of months
			I didn't start out alone but visited with a senior colleague for about three months
			The first visit is followed by a senior staff member, the second visit is watched by a senior staff member, and I take the lead in care. On the third visit, I made the visit by myself
			When you are uncertain, a senior staff member accompanies you and supports you
		Learning from the practice of senior nurses	Even for a patient on a ventilator, the senior veteran wasn't upset
	"Support Through the Newly Graduated/Novice Home Health Care Nurse Development Program"	Support tailored to me	I learned a lot from seeing how to communicate without making others nervous
			He listened to me beforehand to find out what I wanted and what I was worried about
			Training is about once a month from the beginning
			They follow up with an annual plan dedicated to you
		Support to help me face my current situation	Evaluate what you could do with the person in charge as you go along
			I liked the judgment training
			They are too busy in the field to ask you what you want to hear
			Whenever I go to a training session, they always ask me about the status of my normal visits and how I'm usually feeling
		Ongoing Support	He said, "Please feel free to let me know if you want me to follow up with you after you graduate from the training program."
			The biggest thing is that the newcomer development training is for two years
		Interact with other newly graduated /novice home health nurses	There is interaction between first-year home health care nurses
			We can share information about how to handle the nighttime and how the second year will work
	Providing Care Based on Users' Needs	Assessments based on their hospital nursing experience	When I visited him, I judged his condition to be poor and considered him to be an emergency transport and was able to respond
			When a patient's condition changes, it helps to have worked in acute care for a year
			Experience is helpful in the event of a sudden change in a patient's condition
			I've been able to assess the situation and connect them to emergency medical services
		Facing the user	It would have been difficult if I had not had any experience on the ward and had to deal with it at night
			I felt amazingly rewarded by the care I could give to that person with my time
	Supporting Users' Decision-Making	Consider what is necessary to fulfill the wishes of the user	Unlike hospitals, I didn't have to stop the work I was doing on the nurse's call
			How to make this person's wishes come true, and the different concerns from the hospital are interesting
			They understand by listening to stories such as, "I went to a hot spring the other day to relieve myself."
	Collaboration	Collaborate with multiple professions and other departments	understand the person by listening to stories like enjoyment outside of the illness
			We are able to work with house doctors and hospital nurses
		Consultation within the office	Doctors and other professionals can send information in a timely manner and cooperate with me easily
			If you are unsure about a decision, you can consult with senior nurses at the station
			I feel safe because I do not have to make decisions alone
			We can rest assured that you are nursing as a team
	Independent home health care	Visit by themselves without anxiety	I'm getting more experienced and less anxious
			Visiting alone after about 3 or 4 months
			I understand the home nursing process and have fewer questions
			Even if it is not perfect, I feel that I can learn gradually in the field

## Educational support through workplace and external training

Newly graduated home health care nurses felt supported by < support from preceptors and senior staff >, learning from < the presence of great senior staff>, as expressed in statements such as

"Senior staff have a lot of experience as nurses and are amazing." They also benefited from <an atmosphere in the workplace to nurture newly graduated nurses>, exemplified by the experience of one nurse who stated, "I joined in April and was accompanied on visits all the way until December." Additionally, they acknowledged [a support system to ensure that newly graduated nurses can visit with peace of mind].

The entire workplace was dedicated to nurturing and supporting newly graduated nurses. Regarding [support through the newly graduated/novice home health care nurse development program], respondents appreciated having a senior visiting nurse who had previously been a newly graduated visiting nurse. They recognized that <support by someone who had been a newly graduated home health care nurse> was particularly effective.

Novice home health care nurses perceived "support provided by accompanying visits," such as <being able to visit with a senior nurse until our anxiety disappears> and <learning from the practice of senior nurses>. In addition, they recognized that [support through newly graduated and novice home health nurse training programs] provided < support tailored to me >< support to help me face my current situation > and < ongoing support > as well as an opportunity to < interact with other newly graduated /novice home health nurses >

### Care for Users Based on Their Needs

Newly graduated home health care nurses stated that they were able to <learn from assessments as verbalized by seniors> by observing nursing practices during accompanying visits with senior home health care nurses. One nurse shared, "I learned this way of looking at and thinking about things from the practice of my seniors." Another noted, "I learned when my seniors saw things in a different way from me," and felt that she "became able to do assessments that she had not been able to do before." Additionally, by reflecting on their own nursing practice, such as "I'll reflect on my practice and try to do my best on my next visit" and "I will think back that this point of view was not enough," they were able to [Providing Care Based on Users' Needs].

The novice home health care nurses were conducting <assessments based on their hospital nursing experience >, realizing that their experience would be useful in the event of a sudden change in a patient. In addition, by < facing the user > through conversations with the patient, they were able to [Providing Care Based on Users' Needs].

### Supporting the User's Decision-making

Newly graduated home health care nurses described their experiences with [Supporting the user's Decision-Making], stating, "I was able to think about and discuss the user's future," "I became interested in the user's background and thoughts and discussed the user's future," and "It was important to think about the user's future with my senior staff." They emphasized that thinking about the user's future together with senior staff was a valuable part of their learning.

A novice home health care nurse expressed, "How to make this person's wishes come true, and the different concerns from the hospital are interesting," highlighting a shift in perspective from hospital-based care. She described considerations such as "understand the person by listening to stories like enjoyment outside of the illness." She remained conscious of <considering what is necessary to fulfill the wishes of the user>.

### Collaboration

A newly graduated home health care nurse shared, " I thought I was happy that the users were getting to know each other a little bit better and were able to report that to their seniors." To receive

confirmation of her observations and assessments, she explained, "I'm contacting them right then and there to discuss it," and described actively <Reporting and sharing with seniors in the office> Novice home health care nurses stated, " We are able to work with house doctors and hospital nurses," and "Doctors and other professionals can send information in a timely manner and cooperate with me easily." These experiences led them to <Collaborate with multiple professions and other departments> and they expressed feeling more secure, stating, "I feel safe because I do not have to make decisions alone" and "<consultation within the office>

### Independent Home Healthcare

Newly graduated home health care nurses felt that <despite my anxiety, I enjoy visiting alone> and became convinced that they had made the right career choice once they began visiting patients independently. One nurse shared, "I am very happy when a patient remembers my name and says, 'I feel relieved that you came to see me'".

Novice home health care nurses reported being able to <visit by themselves without anxiety> after " visiting alone after about 3 or 4 months," explaining, "I understand the home nursing process and have fewer questions." They also expressed feeling comfortable with learning through experience, stating, "Even if it is not perfect, I feel that I can learn gradually in the field. "

### Discussion

#### Characteristics of the subject

The participants in this study included newly graduated home health care nurses who were employed at home health care nursing stations immediately after graduation, as well as novice home health care nurses who transitioned to home health care nursing after working in hospitals for less than two years following graduation. According to a survey by the Japan Association of Nursing Programs in Universities, among graduates of nursing colleges employed in hospitals and clinics, the number who entered home healthcare nursing stations was 16 (0.1%) in 2021, 27 (0.1%) in 2022, and 23 (0.1%) in 2023 [6-8]. Data for graduates of three-year programs and those employed in home healthcare nursing stations in the second year after graduation are not publicly available. Given these figures, it can be said that the four newly graduated and novice home health care nurses who participated in this study represent a rare group.

#### The process of newly graduated/novice home care nurses practicing home care nursing independently

Regarding the challenges faced by newly graduated and novice home health care nurses, it can be inferred that newly graduated nurses experienced anxiety due to their limited understanding of the terminology used around them. Additionally, they felt helpless when observing the information sharing and nursing practices of experienced visiting nurses upon entering the workplace. The results of preceding researches suggest that newly graduated home health care nurses experienced a sense of powerlessness in their initial stages of practice. Previous studies on the employment challenges of newly graduated home healthcare nurses have reported similar findings. These include difficulties in building relationships with senior nurses, who are often significantly older, anxiety about progressing in a demanding career with limited precedents, and impatience due to differences between their experiences and those of newly graduated nurses who started their careers in hospitals [23]. While the presence of veteran home health care nurses is valuable for

newly graduated nurses with no prior work experience, it may also contribute to feelings of helplessness. Newly graduated nurses may compare their own abilities to those of hospital-employed peers, leading them to develop a complex as a newly graduated home health care nurse. Based on these observations, it is important to provide targeted support to newly graduated home health care nurses, particularly in the initial stages of their employment, to help them feel comfortable in their roles. On the other hand, novice home health care nurses faced challenges in performing tasks and assessing patient conditions that could not be addressed solely through their previous hospital experience. Previous studies on the employment challenges of newly graduated home health care nurses have highlighted difficulties unique to home health care nursing, such as practicing nursing within family care settings during solo visits and responding to physical changes in patients [23]. Although the novice home health care nurses in this study applied their short hospital experience of less than two years to their duties, they encountered difficulties with tasks not typically performed in hospital settings. These included independently carrying out multiple care and assessment tasks within limited timeframes and managing transportation logistics such as traveling by car. In addition, a survey on infection prevention in home health care nursing indicated that infection-conscious preparation, hand hygiene, item management, and infection prevention measures were often not fully implemented due to home environments, station policies, and the independent judgment of home health care nurses. This highlights the importance of attending training sessions, using standardized manuals, and improving environmental conditions to support infection prevention [24]. The novice home health care nurses in this study also expressed dilemmas regarding the cleanliness procedures they performed and the hygiene items available for patient care. Since young home health care nurses receive thorough education and training on infection prevention in their basic nursing curriculum, they are expected to collaborate with primary care physicians to improve home environments. This includes ensuring cleanliness and securing hygiene items at patient locations to prevent confusion about infection prevention measures while considering the availability of resources and the circumstances of the patient's family.

The struggles experienced by newly graduated and novice home health care nurses were mitigated through workplace support and external assistance, particularly the training program for newly graduated and novice home health care nurses.

Newly graduated home health care nurses recognized the presence of a system in which the entire workplace contributed to their development. They described the sense of security they felt from being able to consult with preceptors and senior staff for guidance and encouragement, the supportive workplace atmosphere for newly graduated nurses, and a structured support system that allowed them to conduct visits with confidence. These findings suggest that personalized and reassuring support increased their overall job satisfaction. Additionally, both newly graduated and novice home health care nurses recognized the benefits of Support by the Newly Graduated/Novice Visiting Nurse Development Program. They described it as a continuous support system tailored to their current needs, providing a platform for interaction and knowledge-sharing with other newly graduated and novice home health care nurses. This was particularly valuable for novice home health care nurses with hospital experience, as it allowed them to reflect on their

nursing practice and learn from challenges encountered in home health care settings. In the field of home health care nursing, more than 60% of nurses work at medium- to small-scale facilities with 3 to 6 employees [25, 26], making it difficult to establish independent education and training programs. In addition, several challenges have been identified in recruiting newly graduated nurses, including education and training in collaboration with other organizations, training of educational personnel, development of education systems, individual technical training, opportunities for interaction among newly graduated home health care nurses, support for educational personnel, and managerial issues in recruiting newly graduated nurses [27]. However, the difficulties associated with inadequate educational systems and the need for additional training structures were not discussed by the newly graduated and novice home health care nurses in this study. Instead, their narratives reflected a positive perspective. These findings suggest that the centralized human resource development model, which included workplace support and collaboration with external training programs, was highly satisfactory for the participants in this study.

In the development of human resources for visiting nurses, many local governments implement a clinical ladder [28-30] based on nursing practice skills [22]. Newly graduated and novice home health care nurses with limited nursing experience, such as the participants in this study, correspond to Level 1. At this stage, the goal is for nurses to independently provide home health care by following basic nursing procedures while receiving guidance and practical experience [31]. In this study, the competencies described in the narratives of home health care nurses were categorized as follows: "The ability to understand and care for the needs of the patient, which involves gathering information, making assessments, determining the priority of nursing problems, and delivering appropriate nursing care." The ability to build trust and interact with care recipients and other stakeholders to foster effective communication and engagement. The ability to support users' decision-making, which includes helping individuals live according to their preferences through trust, dialogue, and the provision of accurate and consistent information with care recipients and related parties the "ability to support the decision-making of users" to support the sharing of information, consultation, and proposals through mutual understanding and collaboration with care recipients, health care, welfare, and other occupations and organizations related to daily life. The "ability to collaborate" with the recipients of care, health, medical care, and welfare, as well as with the occupations and organizations involved in daily life [22].

Regarding the ability to understand and care for the needs of users, the target of home health care nursing serves individuals across all generations, from children to the very elderly. It includes users and their families with diverse health conditions and backgrounds, encompassing a wide range of illnesses and disabilities such as neurological incurable diseases, mental illnesses, cancer, and dementia [32]. Home healthcare nursing requires an understanding of the lives of users and their families, as well as the ability to identify individual needs. For newly graduated nurses with limited social experience, this aspect is considered a significant challenge [33]. However, how newly graduated and novice home health care nurses develop the skills to understand, assess, and provide nursing care for patients and their families has not been fully explored in previous studies, making this an important area for further investigation. In this study, it was observed that novice home health care nurses were able to recognize users' needs and provide care by conducting assessments during accompanying visits. Their ability to implement appropriate care was likely influenced by their prior hospital nursing experience, which served as a foundation for their decision-making in home healthcare settings.

Regarding the ability to support users' decision-making, newly graduated home health care nurses reported that they considered users' futures, took an interest in their backgrounds, and discussed their future care plans with senior nurses. Novice home health care nurses found decision-making support engaging, as they encountered different types of challenges compared to hospital settings when striving to fulfill users' wishes. They viewed decision-making support in a positive light, describing it as an interesting and meaningful aspect of their role. The Guidelines on the Decision-Making Process for medical and nursing care at the last stage of life recommend Advance Care Planning (ACP), a process in which individuals engage in ongoing discussions with family members, caregivers, and the healthcare team to plan for future care [34]. Additionally, ACP is included in the National Nursing Examination Criteria as a fundamental component of basic nursing education [35]. For newly graduated and novice home health care nurses, discussing a patient's future and continuously reflecting on ways to fulfill their wishes-including ACP practices-is considered an integral part of their role. The findings of this study suggest that decision-making support, including ACP, was a strength among the participants.

Regarding the ability to collaborate, newly graduated home health care nurses expressed satisfaction in reporting to their senior colleagues as their understanding of patients improved. They also shared information and consulted within their facilities to receive confirmation that their home healthcare nursing practices were appropriate. Novice home health care nurses engaged in information-sharing and consultation within their facilities as a way to integrate their hospital nursing experience into home health care practice. They also sought consultation when uncertain about their decisions and used discussions to validate the appropriateness of their nursing practices. Additionally, novice home health care nurses collaborated with doctors, hospital nurses, and other professionals across departments. It can be inferred that newly graduated home health care nurses also engaged in interdisciplinary collaboration with support, although they did not explicitly describe these experiences in their narratives. A previous study reported that newly graduated home health care nurses experienced challenges in collaborating with multiple departments. These difficulties included providing clear reports to various departments, determining the appropriate timing and content of reports to physicians, and handling phone communication with the office [22]. Similarly, among the participants in this study, it can be inferred that they faced challenges in accurately reporting and coordinating verbally and by telephone with multiple professionals and other departments, particularly in situations requiring assistance with patient understanding and assessment. However, as the healthcare professionals closest to the patient and their family within a multidisciplinary team, home healthcare nurses play a crucial role in observing daily conditions, consulting with the physician in charge, implementing necessary interventions, and facilitating coordinated care to improve the patient's quality of life [35]. Therefore, it is essential [36] for newly graduated and novice home health care nurses to develop the ability to collaborate by reporting and sharing their nursing practice within the office, discussing the appropriateness of their care, and being observed in their interactions with physicians and other professionals. Structured support is necessary to help them cultivate these collaborative skills effectively.

Thus, although newly graduated and novice home health care nurses faced challenges, they successfully developed their home

health care nursing practice. This included understanding users' needs, providing care, supporting users' decision-making, and collaborating with patients and other professionals. Their growth was facilitated by workplace educational support, such as accompanying visits and external training programs, including the New Graduate/New Visiting Nurse Development Program. Newly graduated home health care nurses began practicing independently after approximately 9 months, while novice home health care nurses reached this stage after about 3 months of accompanying experienced home health care nurses. Previous studies on the growth and support of newly graduated home health care nurses, as observed by home nursing station staff, reported that these nurses were able to perform basic home health care nursing practices independently after 1 year of employment [37]. The findings of this study indicate a similar trend, with newly graduated home health care nurses achieving independent practice within a comparable timeframe. Additionally, the subjects in this study demonstrated rapid development, reaching the level of basic home healthcare practice as early as 3 months. In addition, the subjects in this study recognized that by implementing solo home-visit nursing, the new graduate home nurses enjoyed visiting patients alone. They became convinced that they had made the right career choice and were able to conduct visits independently without anxiety, believing that they would gradually learn on-site, even if they were not perfect. Behind this progress was the strong support provided by home health care nursing offices, which have few precedents for training newly graduated and novice home health care nurses. Additionally, the extensive planning and continuous management of external training programs played a crucial role in their development. Looking ahead, several key issues must be addressed. These include increasing support for educators and further expanding training programs for newly graduated and novice home health care nurses through the Comprehensive Fund for Ensuring Regional Medical Care<sup>1</sup>). This expansion should include not only newly graduated nurses but also those who retired early from hospital nursing and wish to transition into home health care. Furthermore, substantial and continuous support is needed to address the managerial challenges associated with recruiting newly graduated home health care nurses. Addressing these challenges will be essential for the future development of the field.

### Limitations of the Study and Future Challenges

This study is limited to the findings from a survey conducted with only four newly graduated and newly employed home health care nurses in Prefecture A. As a result, the generalizability of these findings is restricted. To gain a more comprehensive understanding, future research should expand the scope of the study to include participants from across the country.

### Conclusions

Newly graduated and novice home health care nurses initially faced challenges in developing their home-visit nursing practice. However, with educational support from their workplaces and external training programs, they were able to transition into independent home-visit nursing.

Looking ahead, strengthening the recruitment and training of newly graduated home health care nurses, as well as nurses who retired early from hospital nursing and are interested in home health care, may contribute to the retention of young home health care nurses and ensure the continuity of home health care services.

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## Author Contribution

All authors contributed to the conception and design of the study, data collection and analysis, and interpretation, were involved in the preparation of the paper, and reviewed the final manuscript.

## Conflict of Interest

There are no conflicts of interest in this study.

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