

Transition to U.S. Practice among Internationally Educated Nurses: A Concept Analysis

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Abstract

Background: The World Health Organization estimated there is a shortage of 5.9 million nurses around the world. The United States (U.S.) alone predicted a shortage of almost one million nurses by 2030, which is exacerbated by the COVID-19 pandemic. It is not surprising that healthcare institutions recruit nurses from other countries to fill in for their nursing shortage. Recruiting internationally educated nurses (IENs) is not a new strategy since the U.S. has continuously used this strategy to fill since the Second World War. The concept of transition to practice among IENs is important because of the differences in nursing education and practices between the U.S. and other countries. These differences in nursing education and practice across the world make it more imperative to understand the concept of transition to practice among IENs.

Objectives: To conduct a concept analysis on the concept of transition to U.S. practice among IENs.

Methods: Walker and Avant's approach to concept analysis was used. Electronic databases such as NCBI, PubMed, CINAHL, and Google Scholar were searched. A total of 320 articles were initially generated from the search of these databases; of which a total of 30 articles were used in determining the uses, the defining attributes, antecedents, consequences, and empirical referents of the concept.

Results: The defining attributes identified of transition to U.S. practice among IEN were 1) preparation, 2) onboarding, and 3) acculturation. Model, related, and contrary cases were developed. Antecedents and consequences were identified. Empirical referents of the concept were also discussed and presented the need for a tool specific for IENs. Based on the review of the literature and defining attributes that emerged, the new definition of transition to U.S. practice among IENs was developed.

Conclusion: A proposed first definition of the concept of transition to U.S. practice among IENs was developed based on the defining attributes. This concept analysis may be used to develop an instrument to examine the transition to U.S. practice among IENs as well as a guide for developing transition programs.

Impact: Internationally educated nurses play an essential role in the impending nursing shortage in the U.S. All IENs must transition to their new environment and workplace. This concept analysis helps understand the concept of transition to U.S. practice among IENs. Ensuring that IENs successfully transition to U.S. practice is essential to assure safe and quality nursing care. It also adds to the body of limited knowledge on the concept of transition to U.S. practice among IENs.

Keywords: internationally educated nurses, transition to U.S. practice, concept analysis, Walker and Avant's approach, acculturation

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Received: 24 September 2023

Revised: 10 February 2024

Published: 18 February 2024

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Introduction

The World Health Organization (2020) estimated that there is a shortage of 5.9 million nurses around the world. The United States (U.S.) alone predicted a shortage of almost one million nurses by 2030, which is exacerbated by the COVID-19 pandemic (Juraschek et al., 2019; International Council of Nurses [ICN], 2020). Results from a study conducted by the National Council of State Boards of Nursing (NCSBN) (2023) reported that about one-fifth of the total 4.5 million nurses in the U.S. intend to leave the nursing workforce due to workload, unprecedented levels of stress, burnout, and retirement. Of this number, approximately 100,000 nurses had already left the nursing profession during COVID-19, and over 900,000 nurses intend to leave the workforce by 2027 (NCSBN, 2023). It is not surprising that healthcare institutions recruit nurses from other countries to fill in for their nursing shortage needs (Pasche, 2022).

Recruiting internationally educated nurses (IENs) is not a new strategy since the U.S. has continuously used this strategy to fill since the Second World War (Bola et al., 2003; Cortés & Pan, 2014; Ma et al., 2020). A study conducted by the U.S. Department of Health and Human Services (USDHHS) (2019) reported that of the almost 4 million nurses in the U.S., about 5% of the registered nurses completed their training outside the U.S. Data showed that almost 50% of the IENs came from the Philippines, (USDHHS, 2019). Other traditional sources of IENs are from Canada, United Kingdom, and India, whereas China, Jamaica, Mexico, and Nigeria are emerging sources of IENs in the U.S. (Squires, 2017). Nevada and California are the top two locations where IENs are concentrated (USDHHS, 2019).

Determining the Purpose of Analysis

The concept of transition to practice among IENs is important because of the differences in nursing education and practices between the U.S. and other countries, including the Philippines. Educational pathways to nursing differ among countries. In the U.S., there are several education pathways to nursing,

a diploma, associate degree, a traditional Bachelor of Science in Nursing, an accelerated second bachelor's nursing degree, or an entry-level master's degree from a program designed for students with a bachelor's or graduate degree in a non-nursing discipline (USDHHS, 2020). The Philippines and Canada require a four-year baccalaureate degree for educational entry level for nurses; the United Kingdom has a nursing diploma or degree; in China, there are three nursing educational entry levels - technical, secondary school, college, and undergraduate (Deng, 2015). Other European countries such as Denmark, Ireland, and Spain have a single program for qualifying a nurse (Institute of Medicine, 2011).

In the realm of nursing practice, variations have been noted across different countries (Papastavrou et al., 2012; Suhonen et al., 2008). In the Philippines, nurses often contend with higher nurse-to-patient ratios, typically ranging from 1:20 and potentially escalating to 1:50 (Alibudbud, 2023). In China, the calculation of nurse-to-patient ratios follows a distinct system; hospitals frequently witness a surplus of doctors in comparison to nurses, and there is a prevalent practice of privately hiring individuals lacking formal nursing training to provide patient care (Zhu, 2012; Zhu et al., 2015). In contrast to Canada's nursing practice, nurses often perceive nursing positions in the United States as being better equipped, with patient care characterized by greater integration of technological innovations and advancements in medical science and pharmaceuticals (Berg, 2022). These differences in nursing education and practice across the world make it more imperative to understand the concept of transition to practice among IENs. Therefore, the purpose of this paper is to conduct a concept analysis of the transition to U.S. practice among IEN using Walker and Avant's (2019) method.

Methods

A concept analysis involves "examining the structures and function of a concept" (Walker & Avant, 2019, p. 168). It allows one to break down a concept and develop a clear understanding of an overused or ambiguous concept, ultimately providing insight into the topic of interest. The eight steps in Walker

and Avant's (2019) method are: 1) selecting a concept, 2) determining the purpose of analysis, 3) identifying all uses of the concept, 4) determining the defining attributes, 5) developing a model case, 6) constructing additional cases, 7) identifying antecedents and consequences, and 8) defining empirical referents. Table 1 shows a more detailed information about the Walker and Avant's steps.

Search Strategy

Electronic databases such as National Center for Biotechnology Information (NCBI), PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Google Scholar were searched. Keywords included "foreign-educated nurses in the U.S.," "transition to nursing practice", "foreign graduate (educated) nurses", "transition to practice", "foreign nurses' practice in the U. S.," "internationally educated nurses", "internationally educated nurses", "transition to U.S. practice",

and "internationally qualified nurses". Delimiters in database searches included the use of the English language and geography of the U.S. A total of 320 articles were initially generated from the search of these databases; of which a total of 30 articles were used in determining the uses, the defining attributes, antecedents, consequences, empirical referents of the concept. Both authors reviewed all articles included in this paper.

Results

Origin and Definitions of the Concept

The word transition was found earliest in the mid-fifteenth century as the Latin word *transitionem*, meaning "a going across or over" (Online Etymology Dictionary, n.d.). In nursing research, the transition is described as a "passage from one life phase, condition, or status to another," as "periods in between fairly stable states" (Chick & Meleis, 1986, p. 238), and as "processes that occur over time," which can be divided "into stages and phases" (Schumacher & Meleis, 1994, p. 121).

Table 1

Walker and Avant's (2019) Steps to Concept Analysis

Steps	Explanation
1. Selecting the Concept	Reflects the topic or area of interest
2. Determining the purpose of the analysis	Why the analysis is conducted
3. Identifying all uses of the concept	Consider all the uses of the term from various sources, including dictionaries, thesaurus, available literatures, colleagues, ordinary and scientific uses
4. Determining the defining attributes	The heart of concept analysis. Characteristics of the concept that keeps repeating over and over
5. Developing a model case	An example of the use of concept demonstrating all the defining attributes derived from this analysis.
6. Constructing additional cases	Examining cases that are not exactly the same as the concept of interest but are similar or contrary to it.
7. Identifying antecedents and consequences	Antecedents refer to preceding events or incidents necessary for the manifestation of a concept, while consequences pertain to events resulting from the occurrence of said
8. Defining empirical referents	Classes or categories of tangible phenomena that, through their existence or presence, indicate the manifestation of the concept itself.

Transition to practice in the healthcare profession is most often used to describe the newly graduated students or newly licensed registered nurses' (NLRNs) transfer into clinical settings (Brown & Nocella, 2021; Opoku et al., 2020). The practice environments are relatively new, often challenging for the NLRNs, and are marked by changes in both roles and expectations (Opoku et al., 2020). The transition that the NLRNs experienced from the student role to the practice role has been described as reality shock (Kramer, 1974), culture shock (Valdez, 2008), and transitional shock (Duchscher, 2008). Transition to practice among IENs is different and complex compared to NLRNs in the native country. IENs have to undergo lengthy legal processes to obtain a work visa, as well as face challenges with work integration in the host country including prejudices, communication and language, cultural differences, and cultural differences in nursing roles (Ghazal, et al. 2020, Miyata, 2023; Pung & Goh, 2017).

According to Mahathevan et al. (2023, p. 1), IENs' *"transition to practice in a new country is facilitated by education programs, commonly known as 'bridging programs."* Internationally educated nurses refer to nurses *"who graduated from an accredited nursing education program in their country of education"* (The Commission on Graduates of Foreign Nursing Schools [CGFNS], n.d.). The NCSBN (2015) defined IENs as individuals who have completed their education from a location outside their employer's country. An integrative review by Ghazal et al. (2020) identified two components to be considered an IEN: 1) was born in a country outside of the U.S. and b) received their primary education outside the host country. Sherwood and Shaffer (2014) also called IENs - the migrating nurses, which refers to the movement of educated nurses from their source country (the country of origin) to their destination country (a different country where they leave to work and practice).

Related Concepts

Internationally educated nurses are synonymous with foreign-educated nurses (FENs) and foreign-graduate nurses. Other related terms to FENs and IENs include inter-

-nationally qualified registered nurses (Chun Tie et al., 2018), overseas-qualified nurses (Ohr et al., 2014), and migrating nurses (Sherwood & Shaffer, 2014). The words internationally educated nurses, foreign-educated nurses, overseas qualified nurses, and internationally qualified registered nurses will be used interchangeably in this paper.

Identifying the Uses of the Concept

In our concept analysis, the concept of transition to U.S. practice among IENs has been used in the literature from several viewpoints – legal (Ghazal et al., 2020; U.S. Citizenship and Immigration Services [USCIS], 2021), IENs experience in new work environments (Ghazal et al. 2020; Iheduru-Anderson & Wahi, 2018; Jose, 2011; Lin, 2014; Newton et al., 2012, Rosenkoeter et al., 2017; Sochan & Singh, 2007; Viken et al., 2018), and transition to practice model (Adeniran et al. 2008). An IEN transition begins with applying and submitting all the regulatory requirements to work in the host country. Every country that recruits IENs has different immigration requirements to allow someone to work as a nurse. In the U.S., IENs must meet the minimum requirements set by the USCIS (2021) including: (1) education, (2) training, (3) licensure, (4) experience, and (5) proof of English proficiency. This is in addition to passing the National Council Licensure Examination for Registered Nurses (NCLEX-RN); however, this is not required for IENs during application. An article by Xu (2010) posited that transition to practice among IENs should be a regulatory issue. This is because the commercialization of nursing training in some countries to meet the international demands may impact the quality and competence of IENs produced. In the absence of global nursing regulations, this issue may affect IENs' ability and readiness to practice, thus having direct implications in the quality of care and patient safety (Xu, 2010).

Research on IENs' transition experience in their host country was found abundant in the literature. A qualitative study by Sochan and Singh (2007) of IENs who migrated to Canada identified a three-phase journey of IENs – hope, disillusionment, and navigating disillusionment. There were several studies found on barriers and facilitators of IENs' transition to practice.

Common barriers included language (Ghazal et al., 2020; Lin, 2014; Newton et al., 2012), stigma and discrimination (Iheduru-Anderson & Wahi, 2018; Moyce et al., 2016; Newton et al., 2012), acculturation to the new healthcare system (Lin, 2014; Rosenkoeter et al., 2017), culture shock or cultural differences (Jose, 2011; Lin, 2014; Sherman & Eggenberger, 2008), and feeling like an outsider (Newton et al. 2012; Viken et al., 2018). Facilitators included support systems and continuing education (Rosenkoeter et al., 2017). Other studies focused on professional or workforce integration among IENs (Neiterman & Bourgeault, 2015;). An interview of 31 Filipina nurses working in the U.S. identified that the social adaptation process occurs in three stages - pre-arrival, early adaptation, and late adaptation - that formed the basis of Filipino nurses' transition (Lin, 2014).

One of the commonly identified gaps in IENs' transition to practice is having a program specific for IENs. The transition to practice between IENs and newly graduated nurses from the host country is different. Evidence showed that clinical knowledge may not be the biggest difference as most IENs entering another country may have had several years of clinical experience than the newly graduated nurses (Adeniran et al., 2008; Rovito et al., 2022). To date, there is one transition model program, Transitioning Internationally Educated Nurses for Success (TIENS), created by the University of Pennsylvania to help transition IENs into the U.S. health system (Adeniran et al. 2008). The Transitioning Internationally Educated Nurses for Success has four phases: pre-arrival, onboarding, formal classes, and clinical orientation. Phase 1 (pre-arrival) occurs when the IENs receive a job offer, whereas Phase 2 is when IENs are given certain information and resources, including required paperwork, that are necessary for them to survive in the U.S. Phase 3 involves formal education on the U.S. health system and clinical practice and Phase 4 is when IENs are oriented and integrated into the clinical setting (Adeniran et al., 2008). Beriones (2023) wrote an article based on her lived experience and identified five strategies and seven tool kits for nurse leaders on how

to provide support for Filipino IENs to have a meaningful and successful transition (Table 2). Between 2008-2013, a transitional education program (TEP) model was created by the, now defunct, NursesNow International (NNI), a Mexico-based recruiting agency, due to increase in Spanish-speaking nurses to assist nurses from Mexico (Squires, 2017). The NNI TEP model consisted of 6-months full time and intensive educational program designed to assist nurses from Mexico to pass the NCLEX-RN examination (Squirres, 2017).

Defining Attributes

Walker and Avant (2019) described "determining the defining attributes of a concept to be the heart of concept analysis" (p. 162). After a review of the literature, there were three defining attributes which correspond to the stages of transition to U.S. practice among IENs – preparation, onboarding, and acculturation.

Preparation

Among IENs, their transition to U.S. practice begins with preparation, which starts by meeting the minimum requirement to be a nurse in their own country- completing nursing education and obtaining a nursing license in their country. These new nurses are also expected to be working in a clinical setting, whether in their own country or another country. Having the education and experience, opens the opportunity for these nurses to apply for work as a nurse in the U.S. However, there are other preparations that these IENs must complete in order to get hired by a U.S. healthcare institute. These IENs must submit all the federal regulatory requirements to be able to get a visa to work in the U.S. (USCIS, 2021). These requirements vary by state, but all IENs are required to pass an English proficiency examination and complete verification of education and work experience (CGFNS, n.d.). Other states require IENs to pass the CGFNS qualifying examination, which is a predictor for passing the NCLEX-RN examination. Passing the NCLEX-RN examination is not required to be hired as a nurse and start working in the U.S. healthcare system; however, IENs must pass the NCLEX-RN examination as soon as possible. The preparation phase also involves applying to the U.S. healthcare institute and

going for an interview. Part of the preparation phase is pre-onboarding, where the IEN is offered a job or hired to work in a U.S. healthcare institution and starts their immigration process to the U.S. Immigration process involves applying for a work visa or immigration status to the U.S. consulate and scheduling for an interview. In addition, a criminal background check is also done. If everything goes well, the IEN receives their visa and is allowed to travel to the U.S.

Onboarding

The onboarding phase occurs when the IEN arrives in the U.S. and prior to starting the job. The first item for newly arrived IEN is to obtain a social security number. After that, the IEN attends an orientation offered by the healthcare system. Part of the onboarding phase is for IENs to take the NCLEX-RN examination if not yet taken. In addition to work-related onboarding activities, IENs need help with basic amenities - locating telephone carriers for communication

Table 2

Strategies and Tool Kit for Nurse Leaders to Transition Filipino IENs

Strategies	Tool Kit
Observing, listening, and asking question	US health care institutions should provide institutional and unit-specific orientations as well as education regarding US customs, language and effective communication, and developing assertiveness
Team player and positive attitude	Valuable resource materials for commonly used slang words, idiomatic expressions, and jargon would be beneficial for IEFNs
Continuous embrace of lifeline learning	Orientation to equipment should focus on hands-on practice in operating equipment and machines for patient care
Value of building relationships and finding deeper meaning in nursing practice	Unit leadership/managers should provide a welcoming and supportive atmosphere to IEFNs by assigning a Filipino big brother or sister and conducting informal monthly meetings with staff or unit leadership
Self-reflection	Introduce and connect IEFNs to a local chapter of the
	Educators, together with the preceptor, preceptee, and unit manager, should meet weekly to evaluate the preceptee's milestones, progress, and areas of improvement until the orientation period is completed
	Colleagues and other health care disciplines should
	Experienced IEFNs who have adapted to US practice should provide support and mentoring to new IEFNs who are beginning their US practice

Adapted to create the table with permission from the author: Beriones, G. L. (2023). Nurse leaders' strategies and tools for internationally educated Filipino nurses' transition to practice in the United States. *Nurse Leader*, 21(1),42-46.

access, learning the transportation system, locating grocery stores and places of worship, as well as opening a bank account, to name a few.

Acculturation

The third phase in IENs' transition to U.S. practice is acculturation, which may take up to one year or longer. Even though it was identified as one of the barriers, the term acculturation is a multidimensional and bidirectional process of adapting to a new environment (Ea, 2008). Acculturation is defined as a complex and multidimensional process by which a newcomer learns and adopts the cultural behaviors common in the host country while retaining aspects of their own culture (Cassar, 2023).

Acculturation among IENs may occur in four stages: 1) initial cultural contact, 2) cultural shock, 3) acceptance, and 4) integration (Cassar, 2023). Among IENs, acculturation begins with cultural contact, the time that IENs arrive in the U.S. This is the period where IENs are first exposed to a new way of life and learn to navigate through an unfamiliar environment. This time is also when IENs may experience culture shock. Culture shock occurs after the initial excitement of being in the U.S. passes; an acute awareness of the differences between the new culture and the original culture then arises (Cassar, 2023). Among IENs, there is an awareness of differences in nurses' roles and expectations while working in a U.S. institution. It is also during this time when IENs may experience challenges in communication and language. Even though IENs, particularly those coming from the Philippines, speak English well, it is not a conversational language they speak, and most IENs are more comfortable speaking their own dialect. The IENs need to learn about idioms, slang, accents, and non-verbal communication. At the same time, it is during this phase that IENs experience discrimination and stigma, and feeling like an outsider (Moyce et al., 2016; Pung & Goh, 2017). In the cultural contract and cultural shock phase that most IENs experience challenges and may feel psychologically distressed as they adapt to their new life and work environment. Acceptance is the next period in which they come into reality or

awareness of their new environment and role, and begin to learn and adapt to it. The last stage is integration, in which the IENs accept the new environment and blend aspects of both cultures to create a hybrid identity. It is a period when they are able to assimilate into their new nursing role.

Model Case

The model case is described by Walker and Avant (2019) as a case containing all the defining attributes of the concept. Below is a developed exemplar of transition to U.S. practice among IENs with attributes identified.

*Sarah was recruited from the Philippines five years ago to work in the medical-surgical unit at a large hospital in Michigan. She completed her four-year baccalaureate nursing degree in the Philippines and passed her nursing license exam. She also worked as a labor and delivery nurse at a local hospital. Prior to arriving in the U.S., Sarah had to take the CGFNS certification examination, an English proficiency test, and had her education and work credentials verified. Afterward, she started the immigration process to get her visa (**Preparation**). Upon arrival in the U.S., she was taken to the State Department office to get a social security number and was scheduled to attend a two-month orientation at the hospital (**Onboarding**). During this orientation period, she then realized that nurses have a very different role in the U.S. compared to the Philippines. During her first month at the unit, she expressed being scared because she said, "Everyone talks very fast." She was even scared to answer the phone because if it was the doctor calling for an order, she may not be able to hear it well. Sarah mentioned it took her about six months to get used to the routine (**Acculturation**).*

Additional Cases

Related and contrary cases were constructed as additional cases to distinguish the model case.

Related Case

Related cases may contain some defining attributes of the concept. (Walker & Avant, 2019). Below is an example of a related case. *Daniel is a 22-year-old who recently graduated with honors from the accelerated nursing program in Ohio, where he was born and raised. After graduation, he passed his NCLEX-RN exam-*

-ination and applied for a position of registered nurse in a large hospital in Ohio and was accepted. In addition, he was also accepted into their nurse residency program for one year before working in the rehabilitation unit of the hospital.

The above case represents the related case because the newly graduated nurses go through onboarding and acculturation periods but did not need to go through the preparation period.

Contrary Case

Walker and Avant (2019) defined a contrary case as an event that does not contain the defining attributes of the concept.

Ken obtained an engineering degree from California University in 2000. While attending a friend's wedding, he met a company CEO who offered him a position in his company. Being a new graduate, he accepted the position and started right away.

The above case is a contrary case. Ken is not a practicing nurse who did not graduate from another country different from his potential employers.

Antecedents and Consequences

Antecedents are events that occurred before the concept (Walker & Avant, 2019). The critical nursing shortage in the U.S. is the major antecedent to the concept of transition to U.S. practice among IENs. The need for the concept of transition to U.S. practice among IENs stems from healthcare institutions recruiting registered nurses from another country. In addition, the concept of transitioning to practice is to ensure that the quality and safety of nursing care is maintained as well as to assist the IEN's adaptation to their new work environment.

According to Walker and Avant (2019), consequences are events that occur as a result of the concept. The consequence of the concept of transition to U.S. practice among IENs is based on whether or not IENs transition effectively. Positive consequences of supporting IENs' transition to practice include enhanced workforce diversity (Rovito et al., 2022), increased patient and staff satisfaction, and a low nursing turnover rate. Negative consequences of an IEN lack of transition to U.S. practice include IENs encountering racism, discrimination, marginalization, feeling a

lack of respect, and feeling like an outsider (Chun Tie et al., 2018; Ghazal et al., 2020; Pung & Goh, 2017). Ineffective transition can also impact patient care, including lower patient satisfaction with care (Germack et al., 2015) and mortality (Neff et al., 2013).

Empirical Referents

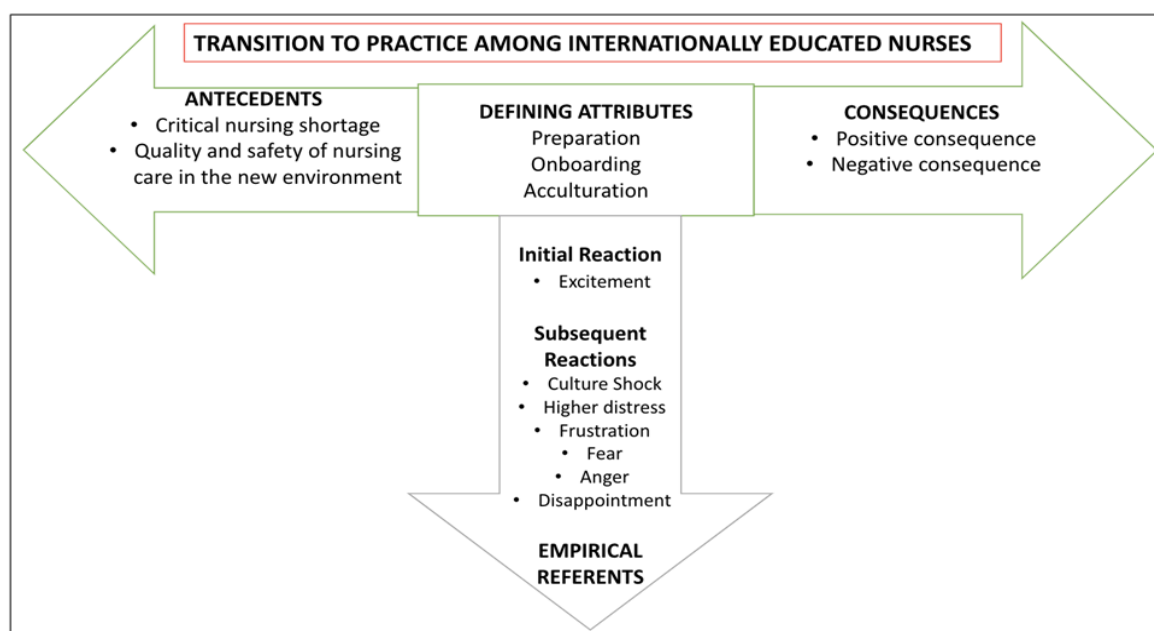
The last step in Walker and Avant's (2019) concept analysis is defining empirical referents, which allows one to recognize and/or measure the defining attributes of a concept. Ghazal et al. (2020) described the conceptualizing transition to encompass adapting, adopting, acculturating, adjusting, integrating, and re-settling. Initial reactions of IENs may include excitement or may present emotions such as feelings of shock, higher distress, frustration, fear, anger, and disappointment as part of their transition process.

To date, there is no tool found in the literature that specifically assesses transition to practice among IENs. However, studies on IENs have utilized several instruments to evaluate IENs' transition to practice. Instruments included the Short Acculturation Scale among Filipino Americans (Ea et al., 2008), the Index of Work Satisfaction (Ea et al., 2008), Demands of Immigration (Ma et al., 2010), and Expectations and Experiences Measures (Geun et al., 2016). In addition, there are other concepts that can be used to assess their transition, such as readiness to practice. The Casey-Fink Readiness for Practice Survey is a valid and reliable tool that has been widely used (Casey & Fink, 2008), and another survey is the Nursing Practice Readiness Scale (Kim & Shin., 2022).

New Derived Definition

Based on the review of the literature and defining attributes that emerged, this article proposes the first definition of transition to U.S. practice among IENs is that *it is a multidimensional process in which IENs go into preparation, onboarding, and acculturation stages. Preparation refers to IENs completing nursing education and experience outside the U.S., and fulfilling federal regulatory requirements to be able to obtain a visa to work in the U.S. Upon arrival in the U.S., IENs go into the onboarding process and start with the healthcare institute orientation. The last stage is the acculturation period, in which IENs undergo another set of phases of*

Figure 1
Pictorial Depiction of Concept Analysis



cultural contact, culture shock, acceptance, and integration. This is the most critical stage in IENs' transition to U.S. practice, as this will determine whether they can practice nursing autonomously and safely in the U.S.

Discussion

Internationally educated nurses play an essential role in the impending nursing shortage in the U.S. as identified in the antecedents. All IENs must transition to their new environment and workplace. This concept analysis helps understand the concept of transition to U.S. practice among IENs. Figure 1 presents the culmination of this concept analysis. Ensuring IENs successfully transition to U.S. practice is essential for safe and quality nursing care as well as benefits the healthcare system as a whole. The results of this concept analysis add to the body of limited knowledge on the concept of transition to U.S. practice among IENs.

This concept analysis has presented significant impacts in nursing practice, research, and education. This concept analysis has identified several gaps in the literature. This analysis presented paucity in transition to practice among IENs models. To date, only one model (TIENS) was found in the litera-

-ture, and this model needs to be utilized and tested in practice. The empirical referents identified the lack of tool measuring transition to practice among IENs. In regards to nursing education, there is no national transitioning program or model that is ready to implement specifically for IENs. This concept analysis would guide nursing educators to understand better what IENs' transitioning process is and further tailor their orientation, program, or preceptorship training to meet IENs' needs. These gaps provide an opportunity for nurse scientists to add to the nursing literature. The next step that the authors are considering pursuing based on this analysis is to create an instrument measuring transition to practice among IENs.

A limitation of this concept analysis is in the methodology. As concept analysis is a philosophical inquiry, it lacks empirical investigation of the concept under study. It is possible that not all evidence was identified in the search. Potential researcher bias may be possible since both authors are IENs; however, we have provided reflexivity early on. Another limitation is that this analysis was only specific to IEN's transition to U.S. practice. Other countries that hire IENs may have different processes or challenges with transitioning.

Conclusion

This paper was conducted to get a better insight and understanding of the concept of transition to practice among IENs. This paper identified three defining attributes for IENs transition to practice. This concept analysis also identified the need for a model and tool to evaluate IEN's transition to practice. Lastly, a proposed first definition of the concept of transition to practice among IENs was developed as a result of this analysis.

Implications

Internationally educated nurses play an essential role in the impending nursing shortage in the U.S. All IENs must transition to their new environment and workplace. Ensuring that IENs successfully transition to the U.S. practice is essential to ensure safe and quality nursing care. This concept analysis provides a unique perspective on IENs transitioning into U.S. practice. It also adds to the body of limited knowledge on the concept of transition to U.S. practice among IENs.

Conflict of Interests

The authors have no conflicts of interest and no funding support to declare.

Funding

This concept analysis does not have funding sources.

Declaration of Authors' Contribution

SzuHsien Chen- conceptualization, methodology, formal analysis, resources, data curation, writing original draft. *Meriam Caboral-Stevens*- conceptualization, methodology, formal analysis, validation, writing- reviewing and editing, supervision.

Data Statement Availability

Data sharing is not applicable to this article as no datasets were generated or analyzed during the current study. All literature supporting the findings of this concept analysis is available within the paper and its reference list.

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