Facilitating Factors in Clinical Education in Nursing

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Abstract

Background: Clinical practice is a vital component of the nursing education. Nursing students encounter the problems in clinics. The attitudes and knowledge of mentors influence student learning too. **Objectives:** The aim of this study was to identify the facilitating factors in clinical education for nursing students. **Method :** Data were collected via the focus group interviews. The study included 40 nursing students who completed their third year at school. Transcripts of the interviews were coded. Data obtained were categorized under the headings clinical environment, team work, mentors and patients. **Results:** Analysis showed that students believed having a good relationship with the staff had a positive effect on clinical learning. They were more motivated to attend clinical when they felt that they were a member of the team. The students also believed that their communication with mentors had a great effect on their clinical performance. **Conclusion:** Although limited to one school, this study shows that positive experiences, such as feeling being a member of the health-care team, having good communication with team members and mentors. The information gained from this study can-assist in improving clinical education.
Key Words: Clinical Nursing Education, Focus Groups, Facilitating Factors.

Hemşirelik Öğrencilerinin Klinik Eğitiminde Kolaylaştırıcı Faktörler

Giriş: Klinik öğrenme hemşirelik eğitiminin önemli bir parçasıdır. Klinik eğitim sırasında öğrencilerin çeşitli sorunlarla karşılaşmaktadır. Klinik danışmanların davranışları ve tutumları da öğrencilerin klinik öğrenmesini etkilemektedir. **Amaç:** Bu çalışmanın amacı hemşirelik öğrencilerinin klinik eğitimini kolaylaştırıcı faktörlerin belirlenmesidir. **Yöntem:** Hemşirelik öğrenicilerinin klinik eğitiminde kolaylaştırıcı faktörlerin belirlenmesi için niteliksel araştırma yöntemi kullanılmıştır. Veriler niteliksel araştırma yöntemlerinden biri olan "odak grup görüşme yöntemi" ile toplanmıştır. Araştırmaya 3.sınıf klinik uygulamasını tamamlamış, gönüllü olan öğrenciler katılmıştır. 8 kişilik, 5 grup olmak üzere 40 öğrenci ile görüşmeler yapılmıştır. Bulguların analizinde "içerik analizi" yöntemi kullanılmıştır. Daha sonra ham veriler kodlanarak tema ve alt temalar oluşturulmuştur. Araştırmada elde edilen veriler sonucunda "klinik çevre, ekip çalışması, danışman ve hasta" olmak üzere dört ana tema elde edilmiştir. **Bulgular:** Öğrenciler klinik ortamda ekip üyeleri ile iyi ilişkilerinin olmasının öğrenmelerini olumlu etkilediğini belirtmişlerdir. Kendilerini ekibin üyesi olarak hissettiklerinde daha çok motive olduklarını ve öğrenmeye daha istekli olduklarını vurgulamışlardır. Danışmanları ile iletişimlerinin de klinik performanslarını büyük ölçüde etkilediğini ifade etmişlerdir. **Sonuç:** Araştırmanın sonuçları klinik ortamdaki olumlu deneyimlerin öğrencilerin öğrenmelerine çok büyük olumlu etkisinin olduğunu göstermiştir. Bu çalışmadan elde edilen veriler hemşirelik öğrencilerinin klinik eğitimini kolaylaştırmak amacı ile kullanılabilir.
Anahtar kelimeler: Klinik Hemşirelik Eğitimi, Kolaylaştırıcı Faktörler, Odak Grup.

Clinical practice is a vital component of the nursing curriculum and has been acknowledged as being central to nursing education (Dunn & Hansford, 1997). Based on this general premise, there is agreement that nursing curriculum should be directed towards improvement of clinical competencies of nursing students (Nahas, Nour & Al-Nobani, 1999).

During clinical learning, nursing students frequently feel anxious and even vulnerable in the clinical environment (Oermann and Standfest, 1997). There have been numerous studies (Elcigil and Sari, 2008; Nahas and Yam, 2001) examining the effects of clinical experience on student learning and the problems students encounter at clinics. These studies also shown stressors associated with going out into the clinical field for the first time, the fear of making mistakes, anxiety over possible criticisms from peers, being able to communicate with health personnel and patients, providing care for the seriously ill or terminal patients, having the necessary technical skills for procedures, attitudes towards and expectations of staff of students (Nahas and Yam, 2001).

In addition to abovementioned factors, it has been shown that the attitudes, experiences and knowledge of mentors influence student learning (May and Veitch, 1998; Nahas and Yam, 2001; Sundstrom, 2000). By contrast, an effective mentor who tires to enables students to put their knowledge into practice by creating learning opportunities helps students e the best (Nahas and Yam, 2001; Neary, 2000).

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Research also indicates that mentors should make use of supportive strategies to facilitate learning in the clinical setting (Nolan, 1998; Löfmark and Wikblad, 2001. For example, Löfmark Wikblad (2001) found that students learned better by assuming responsibilities, having opportunities to implement new interventions and receiving feedback about their performance. In another study, May and Veitch (1998) found that students reported that having opportunities to discuss clinical problems and being prepared to give the best nursing care were among the most important factors in effective clinical learning.

Only a few studies in clinical education were directed towards determining problems frequently encountered in clinical practices in Turkey (Bayık, 1993; Çimete, 1998). A study by Temel and Gömleksiz (1993), for example, found that about 56% of the students indicated that mentors did not show much interest in their learning. In another study (Atalay, Tel, Altun., & Tel, 1994), with the first year students showed that students were worried that mentors and staff might have harbored negative attitude towards them.

Research, in general, suggests that further studies are needed to identify the facilitating factors in clinical learning. Therefore, the aim of this study is to investigate the factors which facilitate to nursing students' clinical learning.

Method

A descriptive qualitative research design was used to identify the facilitating factors in clinical education. A qualitative approach was chosen because the richness and depth of the findings from this approach provide a unique appreciation of the reality of the experiences (Morse and Field, 1995). This design was also chosen because the focus was on practices, beliefs and attitudes, which all are part of lived experiences (Cormack, 2006) of students.

Five group interviews were held to collect the date, each with eight students.

Sample

The study included 40 nursing students who completed their third year at the school. Qualitative research designs with focus groups require that groups be homogeneous in terms of age, status, class, occupation and other characteristics, as this would influence whether participants interact with each other. So all the participants in the study were the students who had completed three years of their four-year nursing education in the school. The third years students were included because of by the end of their third year, the students had long and comprehensive clinical experience giving nursing care in the units of internal medicine, surgery, obstetrics and gynecology, pediatrics, psychiatry and public health. Students were recruited on a voluntary basis.

Focus Group Interviews:

Data were collected from focus group interviews. The students were asked the following questions:

- How do you evaluate your clinical practice for your learning?
- What are the facilitating factors for your learning during clinical practices?
- What would you recommend for clinical practice to be more instructive?
- If you were a mentor, what would you do for clinical practice to be more instructive for students?

A quiet classroom was chosen for the focus group interviews. One of the researchers conducted the interview and the other participated by taking notes and as being an observer. In keeping consistent with the aim of the research, an interview form was prepared. Each focus group interviews lasted for about 1–2 hours and a voice recorder was used to record the interviews.

Ethical Considerations

Written consent was obtained from the students participating in the research and approval was obtained from the ethics committee in the nursing school where the study was carried out. All participants were informed about the purpose and design of the study and were told that they were free to withdraw from the study any time. The interviews were held at the end of the academic term after students' grades were announced.

Analyses of the Data

At the end of the data collection part of interviews, the records were documented. Data were analyzed using qualitative inductive content analysis based on Morse and Field (1995). Content analysis, as a research method, is a systematic and objective means of describing and quantifying phenomena (Elo and Kyngas, 2008). Content analysis allows the researcher to test theoretical issues to enhance understanding of the data. Through content analysis, it is possible to combine words into categories (Elo and Kyngas, 2008). Inductive content analysis process included open coding, creating themes of categories and abstraction.

Morse and Field (1995) stated that if there is not adequate knowledge about the phenomenon, or if this knowledge is fragmented, the inductive approach should be used. Since there is limited number of studies about the

facilitating factors for student's learning during clinical practices in Turkey we had to obtain detailed information about facilitating factors in nursing and used inductive content analysis.

As a first step, in a manifest content analysis, we performed a line-by-line examination of the entire focus group interview. Following this step, we made open coding of interview transcriptions. The codes were compared for differences and similarities and then sorted into categories. The underlying meaning of the categories was linked together as a theme. Codes, themes and sub-themes were drawn up and agreed upon by both investigators before a commonly agreed list was compiled. Following coding, main themes and sub-themes were determined. The results of the study were defined on the basis of these principal themes (Table 1). To ensure the reliability of the analytical process, two of the investigators independently read and interpreted the interview transcriptions. There is not definite recommendation as to how many analysts should be there for analytical process for trustworthiness (Elo and Kyngas, 2008).

Results

The findings obtained will be presented under the major themes of clinical environment, team work, mentors and patients.

Table1. Themes and Sub Themes of Facilitating Factors

FACILITATING FACTORS

Theme	Sub Theme
Clinical Environment	*Physical Conditions* *New Educational Environments*
Team Work	*Acceptance* *Communication* *Feedback From Nurses*
Mentor	*Communication and Relationship* *Feedback* *Teaching ability and nursing competence of mentors*
Patient	*Patients With Severe Illnesses* *Patients' Attitude*

Clinical Enviroment

Physical Condition

Students reported that the clinics and the hospitals with good physical conditions had a positive influence on their clinical learning. These included providing students with a room to leave books and materials, having meetings, and also having patient files easily available to them. An example of this theme is as follows:

"Physical conditions affect learning… The number of patients and caregivers per room and a meeting ro-om are important."

"A room for students should be in the clinic for meeting, reading, or leaving our bags, books".

New Educational Environments

Students reported that they were exposed to different practices and had opportunities to perform different interventions when they attended practices in different hospitals and they believed that these different experiences helped them get ready for work after graduation.

"Clinical practice in a different hospital affects learning a lot especially when there are different equipments and drugs which we have not used before; for example, to practice in a hospital where conditions are limited, like government hospitals, makes us more creative".

Team Work
Acceptance
Students reported that their relationship with staff of the units and staffs' attitude towards students were the most two important factors that affected clinical learning. They expressed the view that they were more motivated and eager to attend clinical when they felt that they were a part of the health-care team.

"Attitude of the team towards us affects learning. When we have been accepted into the team easily, we learn more quickly and can be more valuable to patients". "If they use and respect my knowledge, I feel more valued and feel like a member of the team".

Communication
Students reported that communication skills of the team members were important. They stated that when nurses demonstrated effective communication skills, they learned more from them and helped them to become part of the team.

"We are very happy when they listen and consider our suggestions".

"If nurses or doctors have not good communication skill, we can not ask questions to them easily".

Feedback from Nurses
Students reported that positive feedback from nurses generated high motivation for their clinical learning.

"What we have learned in class and what we experience in the clinical area can be different. When we encounter such differences, we ask nurses why they perform things differently. If they admit that what we know is correct and explain why they perform things differently, we feel supported and informed".

"The positive feedback from the nurses at the bedside supports me, but the negative feedback shouldn't be given in the patients' room. When the nurse gives me negative feedback in front of the patient, it affects of the patient's confidence to me negatively".

Mentors
Communication and relationship
Students reported that their communication with mentors had a great effect on their clinical performance. There were a few students who expressed other mentor characteristics that affect clinical learning such as the mentor hinting the student was incompetent or unable to learn.

"When a mentor is in a good mood, shows a positive attitude, and smiles, I say 'yes, this is the right time to discuss about patients with her and that I may have an opportunity to learn".

"While the mentor was giving feedback, if her style is like judging me…..if she says something like to 'you have to know this information, you are in 6th semesters now but you still don't know…' When she gives me a feedback like, my motivation goes down".

"If a mentor postpones discussing the patient with me, she irritates me, if her body language communicates she is avoiding me, I don't feel like discussing anything with her".

Feedback
There was a general agreement that feedback from mentors allowed the students to recognize their deficiencies and helped them improve their knowledge and skills. They reported that positive feedback increased their motivation and that warm/friendly even a neutral attitude during feedback sessions facilitated learning.

"Feedback from the mentors is of great importance. It should be offered because sometimes what we think is right can be wrong".

Teaching ability and nursing competence of mentors
The students wanted to work with knowledgeable and experienced mentors specialized in the given field. They stated that they learned more when the mentors presented knowledge, demonstrated new interventions and helped them to perform these interventions.

"If we feel that there is someone to answer anything we ask and correct our mistakes, we become enthusiastic and learn new things. Above all, mentors should be experienced".

Patients
Patients with severe illnesses
Students reported that although the patients with severe illnesses increased their workload, they have learned a lot from them. They emphasized that nursing care for patients with severe illnesses help them to gain experience and prepare them for professional life.

"I looked after an intensive care patient and I have learned a lot. There were drugs, instruments and devices in the intensive care unit different than those in the units. The more I learned, the more I was motivated".

Patients' attitude
When patients let the students take care of themselves, the students had increased motivation for learning.

"Patients' willingness to receive care from the students facilitates our learning. Otherwise, we have to convince them that we can take care of them properly".

"If the patients have good communication with me, everything will go well in terms of education and care".

"Having open communication with the patients is very important".

Discussion
Clinical Environment
The studies on the effects of the clinical environment on learning have focused on human relations rather than physical conditions. It has been shown that the clinical environment affects learning. Similarly, we found that if students had a room to hold their meetings and to keep their belongings, they felt that they were accepted and respected by the staff team. In turn, a student who is respected by the staff team will show respect for her colleagues and patients. Also, the feeling of being an important member of the team increases motivation to learn.

Team Work
Our findings showed that when students got along well with the staff, they felt that they were members of the team. Other researchers also found that good relationship between the staff and the students had a considerable effect on learning (Dunn and Hansford, 1997; Nolan, 1998).

Papp, Markkanen., & Von Bonsdorff, (2003) reported that the staff members should cooperate with each other and that nursing students should be considered as young colleagues to create a good learning environment.

Nursing students who get along well with nurses feel more self-confident and become more creative while performing nursing care. The results of the present study revealed that being a member of the staff is important in terms of learning. Students feel more satisfied when they are considered as members of the team (Ip and Chan, 2005). In a study by Bradbury-Jones, Sambrook., & Irvine, (2007), the students defined "being a part of the team' as being empowered and having authority" and felt more empowered when they participated in the decision making processes and patient care.

In Turkey, nurses who are acting as mentor is not used. It is the faculty who is responsible for clinic education. When faculty is not available, then students work with staff nurses to give or receive information about patients students are responsible for. Facilitating student learning in the field by staff nurses in the clinical setting has been widely employed in Turkey. Hence, they have significant influence on clinical education. Therefore, clinical staff, serve as mentors, must have the most up-to-date information on the practices in the clinical area. (Chow and Suen, 2001). In addition, when the students see clinical staff in action they perceive them as role models. The one-to-one relationship between clinically skilled nurses and students helps the students to obtain clinical knowledge, skills and judgments (Ferguson, 1996).

Mentors
In the present study, the students noted that mentors' attitude and communication skills played a role in learning. Feedbacks allow students to see their weakness and strengths and improve their clinical competencies. For this reason, it is recommended that feedbacks should be given in a constructive manner avoiding giving negative messages.

Other researchers found that students like to be appreciated and have increased self-confidence when receiving positive feedbacks (Löfmark and Wikblad, 2001). Lee, Cholowski, and Williams, (2002) emphasized that having a good relationship with others and giving feedbacks without hurting feelings are the most important features of a mentor. In our study, students also noted that the most effective mentor is the one who is a good role model. In addition, Viverais-Dresler and Kutschke, (2001) underlined the importance of interpersonal relationship and being available.

Similarly, in the present study, the students wanted mentors to be knowledgeable and competent in their own field. They noted that they could learn more easily if they worked with experienced mentors specializing in their profession field. It may be that they wanted to feel safe during clinical practices. It has been reported that competence/adequacy is an important qualification for mentors (Elcigil and Sarı, 2007; Papp et al., 2003). Nahas and Yam (2001) explained that students preferred mentors who were knowledgeable and competent in their own field, and who gave information directly to them. Similarly, a study by Chow and Suen, (2001), reported that the students found the assisting role of the mentors as the most important factor and that mentors should create learning opportunities to facilitate learning in the clinical environment.

Patients
Our findings showed the provision of nursing care for patients with complicated conditions was a positive factor for clinical learning. Caring for critically-ill patients required that students put all their theoretical knowledge into practice and make use of their decision making skills. When a student realized that she could take care of such patients her self-confidence increased. Conflicting with the finding in ours study was the finding by Kloster, Hoie., & Skar, (2007) that students prefer to work with healthy individuals rather than look after elderly patients with patients with chronic diseases, or with those who had psychiatric problems

Another finding from our study was that the students had increased motivation when patients agreed to their care giving. Research, in general, has shown that patients do not want nursing students to take care of them fearing students do not have sufficient experience in nursing care (Dunn and Hansford, 1997). Hence patient's attitudes towards nursing students appear to be an important facilitator of clinical learning.

Conclusion and Recommendations
The findings of this study help describe the facilitators of learning and concerns of nursing students about the clinical education. The information gained from this study can assist with the improvement and facilitation of clinical education in Turkey. This study also suggests that a positive experience in clinical learning seems to have strong affect on students' professional socialization. The facilitating factors which were determined in this study are summarized on follows:

Mentor -related factors: the members of the unit
- informing staff about the objectives of training and expectations from students
- giving positive feedback
- possessing up-to-date nursing knowledge
- holding meetings at the beginning of clinical to inform unit staff about students
- communicating with nursing students as much as possible
- awareness of students' expectations regarding the staff

Hospital Staff-related factors:
- staff introducing themselves to students
- staff introducing students to other members of the ward staff
- informing students about physical conditions of the unit and patients
- giving positive feedback to students
- Cooperating with the administration to provide students with a room where they can meet and leave their belongings.

Recommendations for research
This study was aimed to determine the facilitating factors in clinical education for nursing students. This study was limited to third year's students in one school in Turkey. Therefore, findings cannot be generalized to students in other schools. Longitudinal studies in randomly selected multiple schools are recommended.

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