Original Article

Satisfaction of Undergraduate Nursing Students Regarding their Clinical Placement: A Focus Group Study

Nazia Noreen[1], Warda Tu Nisa[2], Asif Shah[3] and Amir Sultan[4*]

[1] Department of Nursing, College of Nursing, Lady Reading Hospital, Peshawar, Pakistan
[2] Rashid Latif Nursing College, Lahore, Pakistan
[3] Pak-Swiss College of Nursing, Swat, Pakistan
[4] Tasleem College of Nursing, Swat, Pakistan

ARTICLE INFO

*Corresponding Author:
Amir Sultan
Tasleem College of Nursing, Swat, Pakistan
amirsultan204@gmail.com

ABSTRACT

A crucial component of nursing students' education for providing high-quality and secure patient care is their clinical experience. Regarding this, it is crucial that student nurses are satisfied with their practical experiences. Student nurses' experiences in clinical placements can offer valuable insights for the development of successful nursing education programmed. **Objective:** To determine how satisfied undergraduate nursing students are with their clinical rotation. **Methods:** The study design used for the project was qualitative descriptive exploratory research. The sample size of the study was 30 BSN students of final year that were selected through purposive sampling technique, divided into 6 groups, where each group contain 5 students and attended semi-structure focus group interview using interview guide. The study setting was 2 nursing institutes of Peshawar i.e., post-graduate college of nursing, and institute of nursing sciences. Data were analyzed through content analysis, and the study was approved from ethical review board of institute of nursing sciences Khyber medical university Peshawar. **Results:** The data analysis identified four primary categories: theory to practical environment in the placement, poor clinical supervision, lack of orientation for clinical placement and inappropriate mentor-ship in clinical placement. **Conclusions:** To facilitate students' clinical practice during their clinical hours, they must acquire pertinent knowledge, skills, and competency. The combination of theoretical and practical work is known as nursing practice, and theory without practice is seen as blind knowledge. In clinical settings, one cannot provide quality care if there is not a quiet and sound environment.

INTRODUCTION

Nurses have a special place in the healthcare delivery system all around the world. There must be a competent and clinically skilled nursing workforce to meet the demands of the healthcare system. To accomplish the curricular objectives, the clinical placement of the student and their contentment with its setting is vital. In order to adequately educate nursing students for the responsibilities of their professional employment, nursing education has been reorganized globally, even at the university level [1]. The four-year degree programme in nursing (BSN) has replaced the diploma programme in Pakistan in an effort to generate practitioners who are safe and skilled. To achieve the worldwide standards of patient safety and care, nursing leadership should teach student nurses with special emphasis on quality. A clinical setting that is not conducive to learning has the potential to reduce nursing students' satisfaction levels. They may feel anxious and as though their clinical goals have not been met. Their lack of professional abilities and knowledge might lead to incompetence and affect their learning due to this type of

clinical encounter and unhappiness [2]. Nursing schools play a crucial part in upholding the value of care since they train future nurses who will be highly qualified and deliver high-quality care [3]. Because clinical assignments require students to engage directly with patients, they are seen as an essential component of nursing education. The development of caring competencies—a term used to describe the attitude and behaviour required for professional growth—is essential to establishing the nurse-patient relationship [4]. The knowledge and abilities of the nursing student have a significant impact on the interaction between the student and the patient since a greater understanding will enable the student to develop appropriate compassionate behaviour and patient trust [5]. Learning in the clinical setting is crucial since theory is useless without application. Consequently, the information and skills that nurses acquire in their clinical environment determine their level of competency [6]. Learning in clinical settings, which allows student nurses to build professional abilities in the field, is the most significant component of nursing education [7, 8]. The most crucial component of nursing education is clinical learning, where students' experience to various clinical settings can influence their learning and teaching [9]. The study aimed to reveal the satisfaction level of undergraduate students towards clinical placement in nursing institutes of Peshawar, Pakistan.

METHODS

The design using for the study was a descriptive exploratory quality design. A purposive sampling with focus group approach was used for data collection from two institutes. The study population of nursing students enrolled in BSN program which is a 4-year program that consists of 8 semesters. The participants of this study were those undergraduate nursing students of final year (male and female) who were sent to the hospital for clinical duties in the two registered institutes of district Peshawar, Pakistan. The study setting was two institutes; post-graduated college of nursing, Peshawar, and institute of nursing sciences Khyber medical university, Peshawar. Through a focus group, semi-structure interview with a guide note was used during data collection procedure. With the aid of recorder, the focus group discussion was recorded, data were gathered. The interviews were conducted using a semi-structured interview guide, and they lasted an average of 60 to 80 minutes. Urdu was used to assist the conversation. The researcher translated and transcribed the material into English. Focus groups are very useful for learning different viewpoints on the same topic since they involve structured discussions with chosen participants one-on-one to get information about

their thoughts and experiences. Focus groups are still a widely utilized method of gathering data. Focus groups are used to collect qualitative data from a predetermined and restricted number of participants [1, 2]. The four open-ended questions contain in interview guide were:

1. Could you please provide me with as much information as you can about your clinical experiences?
2. Could you please elaborate on the aspects and surroundings you want from clinics?
3. Could you please describe how clinical faculty facilitated your clinical learning?
4. Please share any ideas you may have for bettering clinical trials.

The data analysis procedure used in the current project was content analysis. That was completed in following steps. Following each group dissection session, there was a debriefing, during which time nonverbal cues and significant discussion points were noted. Playing the tape and writing down what is said on it. For content analysis, the transcribed data were arranged in accordance with each study question. Sentences and phrases were tagged and placed together based on their respective meanings. Qualitative content analysis in nursing research: principles, procedures, and measures to achieve trustworthiness, the techniques used to code and categories focus cluster knowledge were modified from approaches to qualitative content analysis [6]. Nursing education in the modern era and concentrate knowledge analysis via clustering had been essential to go through the transcripts line by line and paragraph by paragraph in order to write the transcript, looking for key phrases and codes that related to the subjects covered [7]. The researcher examined the various codes, noting differences and similarities, and categorized them into classes. Three coding levels were instructed to be used by the researcher [8]. For the purpose of coding the data, three coding levels were chosen. Level 1 coding went over the data line by line and generated codes based on the subjects, language from the focus groups. Level 2 coding involves creating categories and linking coded data to other documents. Categories are simply coded facts that appear to group together and can be the outcome of level 1 code summaries. Writing at the level 3 that explains the basic Social Psychological method—the term used to refer to the main ideas that come out of the classes. Supervisors were checked with the draught to get their approval. This action offers the opportunity to assess the coding uniformity. Permission was taken from both study setting for data collection, while the ethical review board approved current status having ERB# (KMU/EB/UN/000336). We recruited those who were willing to take part. They received information regarding the study's risks and benefits, confidentiality, an ability to withdraw at any time,

and their participation is voluntary. Codes were assigned in order to protect the participants' anonymity. The researcher recorded the conversation on audio, transcribed it, tagged it, and examined it.

RESULTS

The study total participants were 30 students from 2 different nursing institutes that was divided into 6 focus groups, each group contain 5 students. All the students belong to the final year of 4 years BSN program. After evaluating the interview with the participants regarding the level of satisfaction of students towards their clinical placements. Four themes emerged as result of content analysis. Theme 1: Theory to practical environment in the placement. Theme 2: Poor clinical supervision. Theme 3: Lack of orientation for clinical placement. Theme 4: Inappropriate mentor-ship in clinical placement.
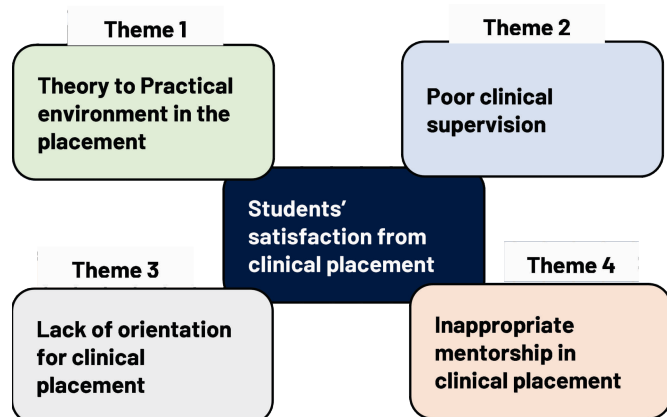

Figure 1: Main themes of the study

Theme 1: From Theory to Practical Environment

The students emphasized the difference between theory and practice when they talked about the theory and practice of clinical placements. They claim that although they were educated about the four-year idea, they were not given access to a setting in which they could apply it.

"I *think the most supportive clinical placements nurture meaningful with learning experiences. Exposure to positive clinical learning experience influences nursing students' knowledge, skills, attitudes, and interest to on-going in the nursing profession. We're studying four years theory but we could not get a chance to implement these in practice."(FG # 2)*

"I felt a clear difference between the theory taught in class and its implementations in clinical placements. Things were not dealt with by the way and technique that we are taught but routine work. Lack of resources can also be one of the reasons for such a big difference."(FG#5)

Theme 2: Poor Clinical Supervision in Clinical Placement.

One participant brought up the issue of inadequate clinical supervision, stating that the increased workload has led to a shortage of faculty members in comparison to workplace demands. This might make them less productive and make it difficult for them to provide nursing students the attention they need. The management has tasked supervisors with a lot of work to complete. The lack of a dedicated human resource has an impact on students' learning even in cases where there are faculty members; in these cases, their numbers are insignificant.

"I felt that fewer faculty members put more work load on them than their strength which affects the efficiency regarding their work and performance."(FG #2)

"I think the clinical placement supervision of students is the best source for the new student to get knowledge about how the theoretical things mentioned in books to see in practical circumstances. The most important thing in this regard is the presence of supervisory supportive staff, the best supportive in-charge doctors and the most important thing is the positive appreciation for the students."(FG # 3)

Theme 3: Lack of Clinical Placement Orientation

One participant talked about how, when she first visited a ward, she felt quite uncomfortable and under pressure. Every new ward she encountered filled her with bewilderment and terror. This anxiety, perplexity, shyness, and pressure are brought on by the specific ward's non-conduction of orientation. Since every ward is unique, participants expect a brief overview of the setting in which they will soon be performing their duties.

"I had fear and confusion when I went to the ward for the first time. This confusion and fear were just due to the lack of orientation that varies from ward to ward."(FG # 4)

"I felt bashfulness when I was asked by my patient about his diagnosis; my answer was I don't know. I was blank. The patient replied if you don't know about my diagnosis then how are you going to treat me? This was due to lack of orientation."(FG #1)

Theme 4: Inappropriate Mentorship in Clinical Placement

Regarding this theme of clinical placements, one interviewee stated that they frequently experienced the envy of their mentor. They may feel uneasy when mentoring a degree programme student because the mentor does not hold a degree. The participant shared his personal experiences, stating that he had experienced professional jealousy from his mentor while he was working during his placement.

"When I was working during placement, I found a professional jealousy there at work. The ward in-charge was not fully cooperative with us. Our maximum time was wasted in other activities instead of knowing how to work in the ward and application of knowledge in the clinical area."(FG #5)

"In my opinion, the progressing innovation in health care settings requires teamwork. Some students said that some of the staff nurses were very cooperative and helping, they

took interest in clinical teaching but due to workload they can't prepare themselves to play the role of a mentor in clinical placement."(FG #1)

DISCUSSION

The study was conducted with the aim to explore the students' satisfaction towards clinical placement. All the four themes emerged reveal the dissatisfaction of students towards clinical placement, in the form of unawareness towards the use of theory in practical environment, poor clinical supervision of nursing authorities, lack of orientation to the clinical placement and inappropriate mentor-ship. The findings are different from a study conducted in 2016 that reveals that the good learning experiences that are identified are associated with the supervisory connection, regularity of individual meetings, presence and support of the nursing teacher, and a sense of "team spirit" within a well-managed nursing care setting [10]. Other studies also show different findings from our study that students satisfaction level was high towards clinical placement [11-13]. This study participant claims that although they were taught about the four-year theory, they were not given access to a clinical setting that would allow them to put it to practice. They also believed that if they had been given the opportunity to put the taught theory into practice, it would have greatly benefited them and enhanced their abilities, performing style, and area of interest. A survey revealed that students' nurses actually experience the theory-practice gap the most. In a real-world clinical setting, they find themselves torn between their tutor's demands and those of the practicing nurses. In actual clinical settings, they deal with distinct issues and are unable to apply what they have learned in theory [14]. A participant expressed concern that there is insufficient number of faculty members serving as clinical instructors to adequately supervise all students. A participant proposed holding workshops just for supervisors. According to some students, instructors play a critical role in helping nursing students achieve professional competence. Clinical nursing supervision is an outward, systematic process that promotes and supports enhanced professional practice, according to the findings. Other studies are not in line with our study that report that Nursing Teachers frequent visits and cooperation with the mentors, helps to partially explain them. Along with supporting the mentor, the nursing teacher arranges the clinical learning experiences for the students, allowing everyone to take part in the learning environment [10]. According to a different study, clinical experiences can have a significant impact on students' self-esteem, independence, and socialization—all of which contribute to clinical competency [13, 15]. A participant related her personal experience with the orientation theme, stating that she initially felt quite uncomfortable and under pressure when visiting any ward. When she encountered a new ward, she experienced worry and terror. According to a study, experiences cannot be replicated in a laboratory setting in a single session, thus appropriate clinical placement and orientation are necessary for efficient learning [16]. According to one student, mentoring may foster a supportive learning atmosphere for students when done appropriately. Their confidence is bolstered and they feel more capable of carrying out their clinical responsibilities. In other studies students also associate mentor-ship with satisfaction in clinical placement [12, 13, 17-19]. Students who received successful supervision from a named mentor expressed greater satisfaction with various aspects of the mentor-ship relationship. This suggests that the relationships students form and the recognition they receive as distinct individuals serve as supportive factors for their learning and heighten their awareness of the needs of patients. The results of the studies demonstrated that the most crucial factor in maximizing the teaching and learning environment for nurses is a supportive and upbeat atmosphere [20, 21].

CONCLUSIONS

The study assesses the behavior of nursing students throughout their clinical rotation, and looked at how satisfied they were with their placement. It takes into account every aspect of nursing students and how their clinical placement affects their development as future nurses. The most important component of giving students around the world a high-quality education is the clinical placement. It was determined that students were dissatisfied with their clinical experience, most likely as a result of the placements from theory to practical atmosphere. Students in their clinical wing highlighted inadequate clinical supervision, a lack of guidance on clinical placement, and unsuitable mentor-ship as the main issues.

Authors Contribution

Conceptualization: NN
Methodology: WTN, NN
Formal analysis: AS[1]
Writing-review and editing: AS[2]

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The authors declare no conflict of interest.

Source of Funding

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