Lived experiences of nursing students during their clinical practices

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Abstract

Background

Nursing is a practice-based discipline. The quality of nursing care depends on the quality of clinical education provided to the nursing students. The better the quality of clinical education provided to the student nurse, the more successful and professional students will graduate. The clinical placement is the venue where skills, knowledge and attitudes developed in the theoretical part of the curriculum are applied, developed and integrated. From all perspective, clinical placements are both stressful and rewarding and also viewed as the most important part of nursing education.

Objective

- To explore the lived experiences of nursing students during their clinical practices.
- To identify the strategies for effective clinical learning of nursing students.

Research Design

A qualitative, exploratory, descriptive and contextual design followed phenomenological method.

Participants

B.Sc. Nursing students.

Sampling technique

Purposive sampling technique
Data collection Method
In depth interviews & Focus group discussions.

Data Analysis:
The data was analyzed by content analysis using a thematic framework approach.

Result
The study emerged eight themes after the content analysis of the data, “experienced of clinical learning environment, initial clinical experienced integration of theory into practice, clinical supervision, the most anxious moment, attitudes towards the nursing profession, experienced of interpersonal relationship, and experienced throughout the clinical practice”.

Conclusion
The themes emerged from the present study plays a vital role in identifying the experiences of nursing students in various sector of their learning environment. Nurse educators and hospital authority & staff nurses should understand the loop holes and create strategies to optimize the clinical learning practices for the nursing students so that can prepare them a competent nurse professional in future.

Key words: nursing; nursing students; clinical practice; live experience; clinical learning environment; nurse educators.

Introduction
Clinical practice is an important component of nursing education. Provision of quality nursing care and service depends on the quality of the clinical experiences acquired during the exposure of clinical practices of nursing student.

Background
In nursing, clinical practice is the ability to solve nursing problems effectively and provide high-quality nursing services. It is the combination of physiological and psychological characteristics to enhance the abilities of nursing students in various aspects during their clinical experiences. The experiences of nursing student during their practice may differ as clinical learning environment & organization of clinical education differ from place to place & country to country.

A qualitative study conducted to explore the experience of nursing students (30) during their clinical practice at the baccalaureate nursing program in Jordan. The data was collected using 2 focus groups with purposive sampling technique. The study finding revealed five themes which emerged from the lived experience of nursing students during their clinical practice were: (1) a supportive clinical environment facilitates effective learning; (2) motivation and goal directed practice are cornerstones in fulfilling the intended learning outcomes; (3) instructors and nurses are our role models; (4) incongruence of expectations between students, preceptors, instructors and nursing staff; (5) reality is very different from what is expected.
A study conducted to explore preparedness for clinical training among seventeen nursing students, three nursing educators and one nurse in Iran. The data was collected through semi-structured questionnaire with interview using purposive sampling technique. The data was analyzed by phenomenological method and two main themes were emerged i.e. rejection of the profession, fear and anxiety.

Clinical experience help nursing students become accustomed to high-stress moments. This experience will enable them to hone their preparation skills and reflexes to ensure that they’re ready for anything.

Tiwaken et al (2018) states that the most critical experiences for the nursing students are their exposure to patients in the clinical. It is where they encounter the human side of nursing.

A study done to identify nursing students’ experiences of learning in the clinical practice through electronic data research articles. The data was collected from all type of studies with all types of methods from 58 articles published from 2003-2012. The findings from the studies revealed problems of nursing students’ learning in the clinical practice were: theory-practice gap, task involvement, participation and opportunities for learning, clinical supervision and support, feedback, conducive clinical learning environment.

A qualitative study to explore the nursing students’ opinion and their experiences about their clinical learning conducted among 40 nursing students in Botswana (2011) by using four focus group discussions. The data were analyzed by content analysis using a thematic framework approach and revealed that nursing students did experience initial clinical anxiety, stress, lack of teaching and guiding support, lack of organizational support and resources, inadequate clinical supervision, and role acceptance.

A phenomenological study conducted to explore the lived experiences of student nurses during clinical practice among 9 fourth (final) year student nurses of Benguet State University College of Nursing. One (1) focus group discussion and nine (9) interviews were used to collect the data by using purposive sampling technique. The study revealed that there was conflict between what is taught in the classroom and what happens in the real world, not confident with their skills, and not competent in taking care of patients.

A qualitative study conducted to explore the nursing students’ experiences of their clinical practice among 15 nursing students in Korea, 2011. Data was collected with in-depth interviews and their field notes during the first clinical practice of eight-weeks. The themes emerged from the study based on the experiences during clinical practices were: body locking up, hands trembling, an obstruction-like feeling the patient’s pain, proud to be a future nurse, the first experienced with a serious and awkward time, increasing one’s own time for self-reflection, long days but a quickly-passing week, places with uncomfortable, steadily growing radius of activities, nurses who are not worthy of emulation but still-grateful patients.

Being a nurse educator and a researcher, the investigator often observed and heard nursing students expressing concern that they were not able to perform in the clinical area as expected by the lecturers, and expressed hopelessness and dissatisfaction during their clinical performance. In order to minimize the difficulties of students experience and to perform the efficient clinical practice during clinical
exposure the researcher initiates a curiosity to investigate the clinical experiences of the nursing students during their clinical placement.

Methodology

Research design
A qualitative, exploratory, descriptive and contextual design was followed using the phenomenological method to explore the lived experiences of nursing students during their clinical practices.

Setting
The study was conducted at Manipal College of Medical Sciences (Nursing Programme), Pokhara, Nepal.

Population
Third & fourth year B.Sc. Nursing Students.

Sampling
Purposive sampling technique.

Inclusion criteria
- Nursing students enrolled in third & four year B.Sc. Nursing course
- Willing to participate in the study;
- Having been exposed to the various clinical learning environments in the hospitals & other posting areas exposed.

Sample size: Thirty three (33) nursing students.

Tools: In-depth interview & Focus group discussions

Data Collection
In-depth interviews and focus group discussions method were used to explore the nursing students’ views about the clinical experience. All participants conformed to the sampling criteria. Written consent taken from the participants for the interview and the focus group discussion to be audio-taped and explained the purpose of the study. The investigator built rapport with the participants and obtained their demographic information. Eight students were interviewed and the participants were voluntarily selected by the researcher. The interviews were initiated with open questions about general events and further to questions about their experiences of clinical practice. Interviews lasted with an average of 45 minutes and ranged between 15 minutes and 60 minutes. During the interviews, the investigator carefully observed the facial expression, behavior & tone of the participants. The interviews were audio taped, taken down in notes and verbatim transcriptions were made. Participants were interviewed until data saturation appeared to have been reached by means of repeating themes. A total of four focus groups discussion were conducted, first three groups had 8 students each and the last group had 9 students. A self-structured questionnaire used to conduct the focus group discussion to view
about the clinical experience of nursing students. An assistant hired to note down all the verbatim during the focus group discussions. Each focus group discussion lasted from 45-60 minutes. The interviews & focus group discussions were conducted in conference hall of nursing college where privacy could be ensured. The data were collected during the month of May 2019.

**Data analysis**

The data was analyzed by listening and transcribed the audiotapes, read and reread verbatim transcripts, extracting significant statements, formulating meanings, and categorizing into clusters of themes.

**Ethical Considerations**

Formal written permission obtained from the IRC MCOMS/MTH and administrator of MCOMS (Nursing Programme) Pokhara, Nepal before the data collection. Written consent taken from the participants after explaining the purpose of the study.

**Results**

All the participants (100%) were females between 19–23 years of age. The qualitative analysis of both interview and focus group discussion revealed the emergence of following themes:

1. Clinical learning environment
2. Initial clinical experience
3. Integration of theory into practice
4. Clinical Supervision
5. Experiences of most anxious moment
6. Attitudes towards nursing profession
7. Interpersonal Relationship
8. Experiences throughout the clinical practice

**Results and discussion**

1. **Clinical learning environment**

   One of the most valuable components of a nursing program is the clinical learning environment. In the present study, the nursing students expressed their positive experiences that the learning environment during their clinical practices was overall very good such as hospital setting, atmosphere, ventilation, spaces to provide health education to the patient and patient party, area for conducting case studies, bedside presentation, etc. But they also expressed that sometimes they find difficult to provide patient care due to inadequate resources in the hospital such as bed sheets, blankets, pillow and pillow cover etc. They expressed that they have developed their skills from senior sisters in the ward. But they expressed that most of the staff nurses were not much cooperative and supportive and not taking them as a part of the team. Hospital nursing staffs are always busy due to inadequate staff and patient ratio. This findings contradict with Henderson et al. highlights that an environment that positively influences learning have been reported as where staff are happy, friendly with good morale and attitude, cooperative and willing to teach and guide students.
provide quality patient care. Students feel confident and motivated to learn in an environment where they are respected, recognized, supported and regarded as part of the team.

2. Initial clinical experienced:

In the present study the most common issue in this theme were: being unfamiliar or lacking of experiences and self-confidence in procedures and unacquainted wards specially during first year, anaphylaxis reaction after medication without test dose, wrong medication, wrong route, care with uncooperative patient, psychiatric patient; doing all the activities during night duty without the help of any staff members; unable to manage time for academics due to tiredness from duty, doing procedure in front of teachers, getting scolding from the teachers in front of everyone which creates embarrassment; being supervised by clinical instructors during their procedures and getting nervousness. These findings are similar with finding of Bayoumi et. al. (2012) states lack of clinical experience, unfamiliar areas, difficult patients, fear of making mistakes and being evaluated by faculty members were expressed by the students as anxiety-producing situations in their initial clinical experience.

3. Integration of theory into practice

In the present study, nursing students remarked that there is lack of integration of theory into clinical practice. The issues related to this theme were unavailability of equipments, conflict between how teachers taught and staff are doing, staff practicing in their own way, nurses taking directly the written consent without the presence of doctors instead of witness & not following the proper procedures such as not giving medication on time and leaving the medicines with the patient and asked to take by themselves and recording before taking the medicine, not using bio-safety cabinet for chemotherapy preparation etc. Some of the remarks: We learnt different steps of hand washing techniques but not doing all the steps. We learnt the steps of doing suctioning but confused to practice since the hospital staffs are not following correct way of suctioning. While doing dressing, not maintain proper aseptic technique, only sterile dressing set and sterile glove is used and other things are neglected” so that there is high chance of nosocomial infection among patients. Regarding waste management disposal, we are using different color coded bucket but no correct way of discarding waste materials. Elcigil (2008) in Turkey and Safadi et.al. (2012) in Jordan, students reported disparities between what was learnt in class and simulation laboratory and the actual practice in clinical practice.

4. Clinical Supervision

In the present study 30 (90%) of the nursing students expressed the positive experience about the supervisors. They expressed that faculty supervisors were always there, cooperative, approachable, skillful, knowledgeable, flexible, and supportive and also motivate in boosting their skills. Some of the participant remarks: Our faculty supervisors are cooperative, approachable, skillful and knowledgeable enough to guide us to develop the practical skills. The faculty supervisors are flexible, tactful and helpful in any of the difficulties in the clinical practices, they scold us, love, provided support when required and clear our doubts. Clinical instructors are always there to supervise, evaluate us and give constructive criticism and they guide and treat equally in every step. Some of the issues the participant’s remarks are: Some of the supervisor sometimes showed very bad attitude and bias in giving marks. The faculty supervisors cannot focus supervision on each and every student as students are more in number and teachers are limited, I have to wait for them for long time to show nursing care. Clinical supervision by staff nurse was an issued mentioned by nursing students,
they remarks: The staff nurses are busy with their duties and unable to carry out the educational and service role. Due to inadequate nurse patient ratio they asked us most of their responsibilities to carry out in the ward. Most of the staff nurses lack professional accountability, they don’t have time to supervise and teach the nursing students. The finding coincides with the study conducted by Lakshmi Rajeswaran whereby the heavy workload and attitudes of the nurses compromise the clinical learning of the student nurses. Out of the total, 70% of the students expressed concern about the nurses’ attitudes towards students. Nurse’s think student nurses are burden to them².

5. The most anxious moment

In Joolae et al.’s (2015) study², lack of self-confidence has been referred to as a major cause of fear and anxiety in nursing students. In this study the most anxious moment the participants experienced were: conducting delivery specially during the first delivery of the baby, delivery of retained placenta, delivery in Taxi, delivery on the floor, delivery of twins babies, giving episiotomy & perineum tear; during history taking patient suddenly collapsed and died; caring of dying patient, doing dead body care, first time doing suctioning in ICU, caring of HIV/AIDS, Hepatitis B cases etc., first time giving vein puncture, caring patients of isolation unit. Some of the most remarkable moments which made them anxious related to inducing harm to the patient were: During 1st yr posting in the medical ward, while monitoring vital sign and SPO₂ of patients, one patient’s SPO₂ was below 40%, after 1 hour the patient was dead. At that time I didn’t have knowledge about abnormal level of SPO₂ and its consequence, after the incident I learned it. While conducting delivery the mother had third degree tear and moved her in OT for the repairmen.

6. Attitudes towards nursing profession

In this theme, majority of the nursing students expressed about the discriminatory behavior of patient, patient party & other health team members. In this issue some student’s verbatim that: While providing care one patient treated me as a servant and also by patient party sometimes. Sometimes despite of caring to the patient we get the unnecessary arguments and discussions with the patient party which is very disgusting to us. I don’t know why but their attitude towards nursing is not so good. Doctors also sometimes behave rudely with nursing staffs & also scold us without any mistakes but they don’t say anything to their MBBS students. Discrepancy to nursing for some of the basic procedures such as dressing, N/G tube insertion, catheterization etc. and allowed only to student doctors.

7. Interpersonal Relationship

According to the students verbatim, the communication and IPR between the students & supervisors, supervisors & staffs, staff and doctors are good but not always. The major issues in this theme are: Sometimes patient have to stay longer period in hospital due to communication gap between the doctors and staff. The doctors are not allowed the patient party to attend during the round & not telling anything about the patient to the patient party after the round so not getting any information about the patient’s condition. IPR between nursing students & doctors were not good, even some of the doctors not allowed students to attend during their round. Some of the staff scolds nursing students, especially to first year students as they are posted newly and not knowing things to do properly and they have to do all the work and they become rude. Patient & patient’s party sometimes very rude to nursing staff as they are not able to answer the queries they have asked.

8. Experiences gained throughout the clinical practice
Many of the participants developed many changes throughout their clinical experiences and verbalized that they have gained more clinical skills, confidence and maturity, compare with previous years, maturity gained while doing the work, in tackling or dealing with the patient. Some of their remarks were: *I am able to provide care according to patient need, learned different ward activity, developed practical skill, emotional maturity, communication skills as well. It is making me more competent towards my profession, during initial period, I was not able to communicate properly with patients, not confident in myself, not able to comprehend but as more exposure in clinical practice made me good in those skills. I have become emotionally strong and can face any kind of situation, become more talkative and also know how to talk with patients and reassure them. I am able to recognize the emergency condition requiring the priority treatment and provide nursing care accordingly. I became much more confident and able to provide care by myself, can do medication and can prepare myself patient for operation. I also can handle different type of patient in different way, a sense of confidence to tackle with any form of difficult situation. I feel that communication and interpersonal relationship between patients and nurses is improved, maintained IPR properly, improved abilities to perform task more confidently, qualitatively. I feel my self more skillful and confident, improved abilities to handle situations, improved knowledge on waste management properly compared to previous years.*

**Limitation**

The findings could not be generalized to all nursing students and nursing colleges as this study is conducted only in one nursing college and their clinical facilities. Data was collected from the nursing students who were in the 3rd & 4th year focusing them to reflect on their lived experiences.

**Conclusion**

Adequate clinical learning environment is an integral part in nursing education and nursing practice. In order to maximize and enhance the learning experiences of nursing students during their clinical practices, nursing administrators, nursing educators and nursing services should effort to create a favourable clinical learning environment & facility. The findings of the current study support the need to rethink about the quality of the current clinical practice education.

**Recommendation**

Based on the finding of the study the participants expressed the following recommendation to improve clinical practices:

- Develop quality nursing care standard & hospital manual for patients care, so that there will be no gap between theory and practice & no conflict for providing any care.
- Provision of individual supervision to the students and building the confidence of students before going to ward.
- Develop mutual understanding between the staff and student between the staff and the supervisors.
- Conduct simultaneously the theory class and clinical posting which will help to recall the learned thing easily during practice.
- The parent hospital and the managers should strive to provide necessary equipment and resources for the nursing students.
- Nurse managers to strive & create collaboration with the other health care sectors to meet the need of the student nurses.
- Provision of adequate number of faculty supervisor to supervise individual students.
- Application of pre-conference and post-conference in daily basis not only during management posting.
- Provision of adequate nurse patient ratio, hospital resources and recognition rewards for excellent job of the staff.
Further studies can be conducted in larger scope to generalize the findings.

Strategies can be made to improve quality nursing care after the publication of the study findings and submitting one copy of the journal to the administrators of both nursing college and hospital.

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