

A DESCRIPTION STUDY OF NURSING STUDENTS IN CLINICAL PRACTICE

Theresia Titin Marlina *)
Panti Rapih Nursing Academy

Abstract

Background: Nursing clinical practice is a learning process in order to give nursing services by practicing as nurses in the clinical setting. The students practiced nursing process approach, and performed the attitude, behavior, and skills in a professional manner. Objective: The aim of this study is to describe of medical-surgical the nursing students in clinical practice which includes preparation, guidance, role models, opportunities to apply science and behavioral transformation. Methods : This was survey study that conducted in a private nursing academic in Yogyakarta. A questionnaire was used to describe the preparation, mentoring, role models, opportunities to apply science and behavior transformation in clinical practices. The participants were informed consented and selected using purposive sampling with inclusion criteria for the 3rd semester student who just completed the first nursing clinical practice, 17-20 years old and willing to become respondents. Ninety eight students were taken as samples. Descriptive statistic with the presentage were used. Results: 54.5% students stated that the explanation of nursing clinical practice is quite clear, while 27.3 % stated that it was clear enough, 58.4% students said that their instructor gave a very good guidance, while 54.5% said that the instructor gave them average level of guidance, 88.2% said that there were sufficient number of patients available to achieve the target of competence, and 76.2% said that they achieve the competence level above the target. 98.7% of students said that they had a nurse role model that possess a professional behaviour, attitude, and skills, 57.1% of the stated that they could apply the theory in real setting. Conclusion: Implementation of nursing clinical practice of students in private nursing academy in Yogyakarta has done well, with clear learning objectives delivery, proper guidance, many practice opportunities, enough cases availability and good role model acquired by students during the practice.

Keywords : *clinical practice, learning process, nursing students*

Article info : *sending on August 14, 2017; Revision on September 15, 2017; Accepted on September 23, 2017*

1. Background

Nursing education as professionalism education is expected to yield graduates which master the knowledge and skills in nursing area and may also display a professional attitude. To achieve this capability, a curriculum and teaching-learning strategies has been designed in of the laboratorium for practicing and learning experience. A learning experiences is needed the development and coaching of nursing student for their clinical practice.

Nursing education curriculum that provides a learning experience laboratory practice and clinical practice has been practiced since 1984 at all level of third grade diploma education of nursing in Indonesia. Based on this curriculum, students would undergo nursing clinical practice starting from the first year of their study until year three. This curriculum has been replaced by the educational curriculum of Diploma III in 2005, and then it was upgraded again with

a competency-based curriculum in 2012 that is used today.

The learning process of clinical practice is a core process in the education of health workers, therefore the existence of competency standards to be very absolute and nature (Wellard et al., 2009). Clinical learning are key factors in bolstering up the teaching and learning process in nursing education to produce such quality of graduates who are competent in their field, based in opinions of Papp et al. (2003). Papp also describe that the clinical learning is a way to improve the professional competence of nursing students. Students are expected to have thorough competence based on knowledge, skills and clinical experience that they have acquired during learning process.

Nursing clinical practice is a form of learning that is carried out in a health services system that aimed at fostering student attitudes and professional skills by applying the knowledge and skills acquired previously. In clinical practice, the students are given the opportunity to adapt to his/her role as a nurse in the order of real health care clinics to implement nursing care properly, using the nursing process

*) Corresponding author
E-mail: th77titin@gmail.com

approach, displaying an attitude and professional behavior and apply skills in a professional manner. (Nursalam, 2007)

Considering the importance of the benefits of this clinical practice in preparing students to become a true professional nurse, so that the attention of an educational institution in the preparation, implementation guidance and evaluation. Preparation conducted through learning and learning theory class laboratories. The learning theories using lectures, discussions, assignments and PBL (Problem Based Learning). The methods selected according to the learning objectives to be achieved. All methods are selected solely to make students understand the concepts and theories in nursing care so that hopefully will be able to apply to the real order of service. While learning class laboratories use methods of demonstration and redemonstration. All students are required to take action individually with appropriate skill set. The learning laboratory classes can be attended by students when completed following the theory of learning, as well as clinical learning can be completed by students if the student completed the classroom teaching lab. It is defined to minimize the nursing error and maintain the quality of nursing care in patients. (Harsono, 2008 and Collin dan Harden, 2004).

Based on the experience of researcher for this, nursing error by students has not happened, because supervisor always accompanying students in take action to patients. But according to researchers for guiding the student experience, students are often hesitant, not confident in nursing to take action patients. Even tend to passively just doing routine activities only, not as a patient utilizing the media to learn and achieve competence. Based on this phenomenon, researchers are interested in knowing how the image of medical surgical nursing clinical practice at this 3rd semester, given that practices on the 3rd semester this is their first practice. During the medical-surgical nursing clinical practice is a student must achieve competence respiratory system, integument, digestive, endocrine and urinary. The results could be known how that happens nursing clinical practice so that it can be used as an evaluation for medical surgical nursing clinical practice further.

The aim of this study is to describe of medical-surgical the nursing students in clinical practice which includes preparation, guidance, role models, opportunities to apply science and behavioral transformation.

2. Method

The study design was survey that conducted in a private nursing academic in Yogyakarta. The population include all third semester students which total number is 135 people. The participants were informed consented and selected using purposive sampling with inclusion criteria for the 3rd semester

student who just completed the first nursing clinical practice, 17-20 years old and willing to become respondents. Ninety eight students were taken as samples.

A questionnaire was used to describe the preparation, guidance, role models, opportunities to apply science and behavior transformation in clinical practices. Consists of 20 items questions with a likert scale. Validity was tested with correlations pearson with higher correlation values than r table and reliability with Cronbach's Alpha 0.640. Data analysis using univariate analysis with the presentage.

3. Results and Discussion

a. Characteristics of partisipans

Table 1
Characteristics of partisipans by sex & Age.

Characteristics	N (%)
Sex	
• Male	12 (12.24)
• Female	86 (87.76)
Age (year)	
• <17	0 (0.0)
• 17-20	98 (100.0)
• >20	0 (0.0)

Most of the partisipans were female (87,76%) and 12,24% were male. All partisipans are 17-20 years old.

b. Preparation of Nursing Clinical Practice.

More than half of the students (54,5 %) said that the explanation clarity of nursing clinical practice given by the lecture coordinator was fair, 27,3 % said it was optimal, 1.3% more than satisfactory and 16.9% are poor.

Many factors affect the learning of clinical practice are among the program (objectives and materials), teachers, learners / students, means (time and facilities) and client. Nursalam, (2007) said that the learning environment where the practice should have the essential components in achieving this competency, among others the chance of contact with the client, the purpose of practice (including feedback), the guidance of the competent (center of inquiry), practice of skills, impulse to think critically, the opportunity to transfer knowledge, the opportunity to integrate knowledge. It added that the characteristics of the ideal practice of place is an adequate number of client cases, sufficient facilities for learning, have quite a library, supporting a conducive situation: an efficient workforce system, recording and reporting system, power was selected as a facilitator, a new idea, the quality standards of nursing.

The purpose of learning is a comprehensive formulation of the desired educational outcomes or learning targets which is to achieve optimal results on the cognitive, psychomotor, and affective (Hamalik,

2009). Objective clinical learning is a form of professional competence, namely the ability and competence to take various aspects ranging from communication and history, physical examination, diagnose, plan and carry out the management follow-up of cases handled, as well as a variety of other actions if needed.

Clinical practice is one of the stress factors for nursing students. Based on the results of research Sharif &

Masaumi (2005) it is said that the nursing student is not confident and feeling incompetent and lack of professional nursing skills and knowledge to take care of various patients in the clinical setting. So this preparation time is the right time to equip nursing students.

Learning objective clinical practice 3rd semester student is able to provide nursing care to patients with disorders of the respiratory system, digestive, endocrine, urinary, immune and integument. Prior to initiating the clinical practice of nursing, students are given an explanation of the clinical competencies to be achieved, duties and responsibilities that must be resolved and schedule rotation. Based on the survey showed 54.5% of students say quite clearly, a clear 27.3%, 1.3% is very clear and 16.9% less obvious to the explanation given. Clarity of information received student influence to smooth the process of clinical learning and achievement of competencies. With enough knowledge then the student can act and behave in accordance with the learning objectives to be achieved.

The preparation of clinical practice becomes important for the successful achievement of competence. Lecturers need prepare physical and psychological students and equip the importance of communication. Because based on research Jamshidi, et al.(2016) ask the nursing student ineffective communications, inadequate readiness and emotional reaction in clinical practices.

c. Mentoring.

Clinical practice learning at third semester is led by tutors from the academy and hospital. Each room contained one academic supervisor and two clinical instructor. This practice is followed by all students of the 3rd semester and implemented in seven private hospital in Yogyakarta. More than half of the students (58.4%) said that the clinical instructor (CI) had guided them so much in practicing the skills (to reach competencies) during practice learning as the CIs present there every day. While 54.5% of students say that the guidance given by the instructors was fair enough as the instructors are not always present every day. The availability of patient cases varies greatly in each hospital. 18.8% of students said that the number of cases of patients is inadequate to achieve certain competence in particular, especially the subject of integument and immune system, and 88.2% of students said that sufficient number of patients are

available to achieve the competency mentioned. 76.2% of students achieved more than 86% of the specified targets of competence and 23.8% of students achieved 76-85% competence.

More than half the students (58.4%) said that clinical instructor (CI) room very guided in performing skills (reaching competencies) during practice learning for CI there every day. While the guidance of professors felt quite by 54.5% of the students as a lecturer can not attend every day. Limitations time lecturer in clinical learning guidance is due lecturers also gave a theory of learning on campus. Guidance nursing care is mostly done by the lecturer / academic supervisor, while the more skilled guidance conducted by CI. All the students said that senior nurses, CI and lecturers were very supportive of this clinical learning process.

This is in contrast to the results of the Mabuda, Potgieter and Alberts study (2008), which states that during the practice of student nurses lack of teaching and learning support. As well research Rajeswaran (2016), the experiences of nursing student in clinical practices are lack of teaching and guiding support, lack of organizational support and resource and inadequate clinical supervision and role acceptance.

Clinical supervision has a vital role in postgraduate medical education and, to some extent, undergraduate medical education. Feedback is essential and must be clear (Kilminster & Jolly, 2000). Clinical instructor have been use method as a preceptors for mentoring because is significant for facilitating learning during clinical practice (Elisabeth, Christine and Ewa, 2009).

Guidance and constructive feedback is key clinical learning effectiveness and recommends quality improvement in clinical learning components include students, counselors, environment, as well as learning how to self (Stokroos *et al.* 2003). Importance of feedback that is positive is indispensable student to provide nursing care to patients. Sometimes students are not ready to care ranging from reviewing actions, formulating a diagnosis, planning, action and evaluation. Although it has drawn up a preliminary report in accordance with the patient's case to be taken, but the response time students could not answer the fundamental questions of mentors. This shows that students are less prepared to do nursing. When students do not know the mentor supposed to say, when the student is not clear supervisor should explain and when students are confused counselors who are supposed to provide a way out. So the role of mentor is very important to prepare students to become professional nurses. It is the duty and responsibility of educating their supervisor kognitif, affective and psychomotor.

In addition to acting as mentors, lecturers and CI also serves as a motivator. Students say they feel motivated to complete the clinical practice learning motivated by CI, lecturers, friends, family and senior

nurses. Sumiati and Asra (2007) stated motivation can encourage the person to behave and give directions in learning. Motivation is the desire to be met and the arise if there is a good stimulus for their needs, and interest in something. According Santrock (2009) motivation is power, energy or impulse someone who can create a need to perform an activity, whether originating from inside (internal motivation) and external (external motivation). Because motivation is that almost all students can complete clinical learning with achievement of competencies as expected.

Motivation played an important role in the transformation process behavior. A person can change the behavior of one of them for their motivation / impetus for change both impulse of self and impulse from other people. Encouragement of self usually contribute more powerful than the impulse that comes from others. A student will turn out to be a nurse through a learning process of clinical practice, so the organizer for nursing practice should be able to create a climate, a situation, the atmosphere and the role model appropriate when students clinical practice so that in this process of transformation they actually turn into a professional nurse in accordance with the purpose of education.

d. Role Models.

A nurse role model is someone who can always give a smile to patients, touch, therapeutic communication and a great willingness to help the patients and their family in nursing care. Almost all students (98.7%) say that they get role models of nurses who have professional attitude, behavior and skills. But more than half of students (50.6%) said that only a small number of nurses that behave as such a role model mentioned before, and 27.3% of students stated that more than half of the nurses that could become the role models, 20.8% of the students said that a majority of nurses has become the role models and 1.3% of the students said that all senior nurses has become role models.

Role models obtained from counselors and nurses in the room. Importance of clinical instructor as role models, and improving the quality of clinical learning needs financial support and skills training of teaching (Strak, 2003). Role model of a nurse who can always give a smile to patients, touch, therapeutic communication and a high willingness to assist patients and families in nursing care. Almost all students (98.7%) say that they get role models nurses who have the attitude, behavior and professional skills. But more than half the students (50.6%) said a small portion of nurses who become role models, and 27.3% of students said that more than half of the caregivers who can be a role model, 20.8% of students said most nurses become role models and 1.3% of students said all senior nurses to become role models. Students explained that there are nurses who spoke curtly and being indifferent / ignorant. Surely this is a

learning environment that is less supportive of students. Students will be easier to learn to be, spoken word and act according to what they see than what they hear. If at any time they are confronted, interact and view the behavior of a less senior nurse in accordance with the profile of nurses, then gradually they will imitate.

In order to enhance the role model for nurses, the educational institutions can cooperate with istitusi services to provide workshops/trainings to nurses about soft skills/caring, profile nurse or clinical instructor training/preceptorship so that it can perform guidance with effective methods for students.

e. The Opportunity to apply knowledge

2.6% of the students said very fit between knowledge learned by the application in real services, 57.1% of students said that accordingly, 1.3% of students say is not appropriate, and 39% say less suitable as catheter care has never been done in accordance with what they learned.

At the time of direct assistance to patients (bedside teaching) is an opportunity for students to apply their knowledge. Nursalam (2007) says that more and more opportunities to apply knowledge in the service of patients, students will be more refined to think critically so that they become increasingly preparing professional vocational nurse. There are 42.9% of the students said that many opportunities to apply the knowledge gained during clinical practice and 46.8% say enough chance to apply their knowledge. This means that students are facilitated to learn critical thinking, scientific, according to science that he learned.

It added that there will be a learning process that is optimal if there is a match between the knowledge gained by the practice. 57.1% of students said that accordingly, 2.6% of students say very fit between knowledge learned by the application in real services, 1.3% of students say is not appropriate, and 39% say less suitable as catheter care has never been done in accordance with what they learned. Catheter care for clinical practice is done with water and soap, while the learned and the soup using a povidone iodine 10%.

This is in contrast to the results of the Mabuda, Potgieter and Alberts study (2008), which states that during the practice of student nurses lack of opportunities for learning, poor theory-practice integration.

One of the supporters of achievement of learning goals is the availability cases. The availability of patient cases varies greatly in each hospital. 18.8% of students said that the number of cases of patients inadequate to achieve competence in particular integument and immune system, and 88.2% of students said sufficient number of patients to achieve competency. 76.2% of students achieve competence more than 86% of the specified targets and 23.8% of students achieving competency 76-85%.

While expected at the exit behavior are students able to implement nursing care properly and well, apply the nursing process, display an attitude / professional behavior and apply professional skills: interpersonal, technical and intellectual. The achievement of clinical learning competencies is the result of a learning process for education and growing all the time, it really depends also with the role of supervising clinical, peer group, and the learning environment.

f. Transformation of behavior.

There are 15.6% of students who say that they can be changed by using the boost, 39% of students said that they changed the provision of information only and 44.2% of students who say that they can be changed by discussion and participation. During this clinical practice, there is a behaviour transformation process from being a student into a nurse. The transformation process are:

Input behavior → clinical learning experience → output behaviour

Input behavior is the knowledge, attitude and psychomotor ability possessed by students when they are about to go to clinical practice as preparations to provide nursing care to patients. The behaviour done by most of the students are preparing the syllabus, preparing subject content that has been learned before, and preparing nursing kids. While only a small fraction who borrowed books to the library, arguing that they prefer to use e-book or the Internet to search for material. In skills, students are equipped with the skills they will practice through learning lab. While the output behavior is the student able to provide nursing care to patients in a professional based on the theory they have learned.

Transformation / behavior change is not easy. According Notoatmodjo and Sarwono, (2007) to change the behavior of someone in need of assistance from others, among others:

- 1) Using the strength or impulse. In this case the change of behavior imposed on anyone so willing to do new things to expect. The result is faster but the change longstanding. After impulse weakened then the behavior will return to normal. There are 15.6% of students who say that they can be changed by using impulse. This means that as lecturers and tutors can provide motivation / impulse to them to want to change. Reinforcement and punishment according to the student with these characteristics.
- 2) Provision of information: with information underlying these behavioral changes are expected people aware of itself. Changes that occur takes longer but is enduring, because it changes based on the needs perceived not as imposed from the outside. There are 39% of

students said that they changed with provision of information only. This means that the internal motivation that comes from themselves.

- 3) Discussion and participation is a good way in order to provide information. But also are actively participating. This information can affect the increase of knowledge, attitudes and actions of health and ultimately behavioral changes. There are 44.2% of students who say that they can be changed by discussion and participation.

Transformation behavior can occur well when the process of clinical practice also goes well. At the nursing clinical practice gives students the opportunity to train themselves, applying the knowledge gained previously in the real order of health care. Students have to translate theory into practice, personal and professional skills, attitudes and behaviors of learning and practice in serving patients. Here there is a process of interaction of students to patients under the guidance and supervision performed supervisor / instructor clinics. Clinical learning process is comprehensive and integrated in accordance competencies to be achieved, with student centered learning approach will allow students to achieve competence defined curriculum (Harsono, 2008). The learning process of clinical practice provide clinical experience for students that directly faces to patients during the learning process, students are directly in contact with patients with real clinical cases (Collin dan Harden, 2004).

4. Conclusion

Implementation medical-surgical clinical practice of nursing students in private nursing academy Yogyakarta goes well, the delivery of clear learning objectives, adequate mentoring, many opportunities to apply knowledge, availability of sufficient case and obtained a good role model student during practice. Participant said that they can be changed by discussion and participation. Practice learning these clinics can achieve thanks to the good cooperation between the institutions of service to education institutions. It is our hope that this cooperation can be improved in order to improve the quality of nursing care by creating skilled students, working in a professional based on the knowledge they have learned.

5. References

Collin J.P., and Harden R.M.. (2004).The Use of Real patients, simulated patients and simulators in clinical examinations AMEE medical education guideno. 13. *MedTeach.*, 20(6): 508-515. http://78.158.56.101/archive/MEDEV/static/uploads/resources/amee_summaries/Guide13summaryMay04.pdf

- Elisabeth, Christine and Ewa. (2009). *Teaching during clinical practice : Strategies and techniques used by preceptors in nursing education*. [http://www.nurseeducationtoday.com/article/S0260-6917\(08\)00166-4/pdf](http://www.nurseeducationtoday.com/article/S0260-6917(08)00166-4/pdf)
- Hamalik O. (2009). *Proses Belajar Mengajar*, Cetakan kesembilan, Bumi Aksara, Jakarta
- Harsono. (2008). Student-Centered Learning di Perguruan Tinggi, *Jur. Pend.KPKI*, 3(1): 4-8. <http://luk.staff.ugm.ac.id/mmp/Harsono/SCLdiPT.pdf>
- Jamshidi, et al.(2016). The Challenges of Nursing Students in The clinical Learning Environment : A Qualitative Study. *The Scientific World Journal*. Volume 2016. <https://www.hindawi.com/journals/tswj/2016/1846178/>
- Kilminster and Jolly. (2000). Effective supervision in clinical practice settings ; a literature review. *Journal of General and Family Medicine*. <http://onlinelibrary.wiley.com/doi/10.1046/j.1365-2923.2000.00758.x/full>
- Mabuda, Potgieter and Alberts. (2008). Research Article Student nurses' experiences during clinicalpractice in the Limpopo Province. *Curationis*.<http://www.curationis.org.za/index.php/curationis/article/download/901/838>.
- Notoatmodjo S. (2007). *Promosi Kesehatan dan Ilmu Perilaku*, PT Rineka Cipta, Jakarta
- Nursalam. (2007). *Manajemen Keperawatan: Aplikasi Dalam Praktek Keperawatan Profesional*, Salemba Medika, Jakarta.
- Ormrod J.E. (2009). *Human Learning*, Fifth Edition, Pearson Prentice Hall, New Jersey
- Papp I., Markkanen M., and Bonsdorff M.V. (2003). Clinical environment as a learning environment: student nurses'perceptions concerning clinical learning experiences. *Nurse Educ Today*. 2003 May;23(4):262-8. <http://www.ncbi.nlm.nih.gov/pubmed/12727093>
- Rajeswaran. (2016). Clinical Experiences of Nursing Students at a selected Institute of Health Sciences in Botswana. *Health Science Journal*. <http://www.hsj.gr/medicine/clinical-experiences-of-nursing-students-at-a-selected-institute-of-health-sciences-in-botswana.php?aid=17882>
- Santrock J.W. (2009). *Educational Psychology*, 4th ed., McGraw-Hill, Boston
- Sharif F and Masoumi S. (2005). A qualitative study of nursing student experiences of clinical practice.*BMC Nursing*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1298307/>
- Stark P. (2003). Teaching and learning in the clinical setting: a qualitative study of the perceptions of students and teachers, *Med Educ.*, 37: 975-982. <http://www.ncbi.nlm.nih.gov/pubmed/14629410>
- Stokroos H.H.V., Daelmans H.E.M., Van Der Vleuten C.P.M., Haarman H.J.TH.M., Scherpbier A.J.J.A. (2003). *Med Teach.*,25(2): 120-126.
- SumiatidanAsra, (2007). *Metode Pembelajaran*, Wacana Prima, Bandung.
- Wellard S.J., Solvoll B.A., and Heggen K.M. (2009). Picture of Norwegian clinical learning laboratories for undergraduate nursing students, *Nurse Education in Practice*, 9, p.228-235. <http://www.ncbi.nlm.nih.gov/pubmed/18700184>.