

# Chapter 1

## Orientation to the study

### 1.1 INTRODUCTION

The art and science of nursing is learnt through guidance, assistance, role modelling and active participation in clinical practice. The aim of nursing education is to produce a skilled nurse practitioner. The professional nurse is educated to function in a variety of settings within the health care services. The nurse has to be prepared to function effectively in health care practice, and this can only be achieved if the student nurses receive the necessary support, guidance, supervision and mentoring during their placement in clinical practice.

Clinical teaching is the means by which student nurses learn to apply the theory of nursing, so that an integration of theoretical knowledge and practical skills in the clinical situation becomes the art and science of nursing. This correlation of theory and practice, and the building of meaningful experience, must take place in the field of clinical practice, which are the health care services. It is only in the clinical situation that nursing care becomes a reality, and the student nurse can observe the responses of patients. It is in the clinical situation that nurses encounter the human side of nursing (Mellish, Brink & Paton 1998:207).

According to Reilly and Oermann (1992:133), it is through experience in the clinical setting, in which learners acquire the knowledge, skills and values necessary for professional practice and become socialised into the profession. In clinical practice, student nurses apply theories of action to real problems, develop skills in problem-solving and decision-making, learn how to learn, and develop a commitment to being responsible for their own actions. Learning is enhanced in this environment, which supports student nurses' independence and freedom to learn, and provides opportunities for experimentation.

A conducive and supportive learning environment for student nurses depends on the availability of placement support systems, such as supervision, mentorship,

preceptorship and relationships between the faculty, student nurses and clinical staff. Learning in practice placement requires an environment which is conducive to learning, and provides the appropriate support from skilled practitioners and educationalists. A clinical setting rich in learning experiences, but lacking a supportive environment, discourages the learners in seeking experience and results in the loss of learning and growth opportunities. On the other hand, a setting with limited experience, but rich in a supportive environment, may provide opportunities for student nurses to examine new health needs and ways of addressing them. Thus, regardless of where clinical practice is taking place, the learning climate influences student nurses achievement and satisfaction with the learning experience (Reilly & Oermann 1992:117; Quinn 2000:425).

The South African Nursing Council's (SANC 1992:9) minimum requirements and guidelines relating to clinical learning, states that "the overall objective of clinical practice is to provide student nurses with meaningful learning opportunities in every area of placement according to the level of training, to ensure that on completion of the program the student nurses is able to nurse efficiently". This implies that student nurses should be able to demonstrate the ability to solve problems effectively, in order to apply a scientific approach to nursing from the initial assessment to the rehabilitation of the patient or group.

According to Mellish et al (1998:208), clinical teaching aims at producing a competent registered nurse capable of giving expert nursing care, which is based on sound knowledge and practical skills. The care given involves the interaction between two or more human beings, the receipt of care and the patient's family on the one side, and the nurse or nurses on the other side. This is achieved when clinical teaching is based on theory and applied in practice. It involves teaching skills such as leadership and administration; teaching, organising and controlling staff; the determination of work methods and procedures; the economic use of equipment and materials; supervision and control of the unit as a whole. Clinical teaching must also prepare the student nurses for their future role as a registered nurse, and for teaching student nurses and pupils in their unit. The clinical practice experience is integral to the development of nursing practice. According to Quinn (2000:417), the qualified staff is a key factor in influencing the learning environment of student nurses during clinical practice, the role of ward manager being particularly important.

The South African Nursing Council's philosophy and policy also expresses similar views with regard to professional nursing education, in that a variety of learning opportunities covering the full spectrum of the curriculum must be provided. Teaching for practice in clinical nursing laboratory situations, and proper introduction and orientation of the student nurses with regard to learning objectives, is essential. A learning experience occurs in a learning environment created by the person presenting the learning material, and is utilised by the student nurses in order to achieve the objectives. These objectives may include, for example, clinical practical, clinical teaching, lectures and projects with accompaniments (SANC 1992:5).

In view of the importance of clinical learning experiences for student nurses, this qualitative study was undertaken to explore the experiences of student nurses registered for a four-year integrated diploma programme, during clinical practice in one of the districts of the Limpopo Province, South Africa. This study's aim was to look at the possible improvement of learning during clinical practice.

## **1.2 BACKGROUND AND PROBLEM STATEMENT**

Student nurses from one of the nursing campuses of the Limpopo College of Nursing are placed in four hospitals for their clinical learning experience, as well as a number of clinics within one of the districts of the Limpopo Province. During this placement, student nurses are expected to learn and become professionally mature and competent practitioners of nursing. According to Massarweh (1999:44), clinical learning is regarded as an integral part of nursing education. It provides opportunities to apply the theory to practice, and fosters problem-solving and decision-making skills, collaboration with others and development of legal and ethical morals. In this study, the clinical learning environment covers the hospital setting, community, and clinics.

According to Lipinge and Venter (2003:10), negative experiences have also been reported by student nurses in a clinical setting, for example, (a) expectations of the student nurses not being met, as the staff are sometimes not aware of student nurses' learning objectives, (b) frustrations experienced during daily practice due to poor integration of theory and practice, and (c) lack of tutorial support and guidance by lecturers.

Lita, Alberts, Van Dyk and Small (2002:30) found that workload and shortage of personnel limited the opportunities for properly teaching and guiding student nurses allocated to the wards. These findings are supported by Quinn (1995:187), who cites Fish and Purr (1991), who found that supervisors had heavy workloads and that their roles were not properly defined. In a study of perceptions of the clinical competencies of newly registered nurses in the North West Province done by Moeti, Van Niekerk and Van Velden (2004:72), it was also found that a shortage of staff, equipment and supplies negatively affects the competency of newly registered nurses.

In the same vein, the findings by Mhlongo (1996:30) and Netshandama (1997:105) have also revealed that a shortage of staff and equipment affects the conduciveness of clinical learning environments. Moeti et al (2004:82) share similar views, in that financial constraints on healthcare, high bed occupancy, and shortage of staff and equipment, exacerbate the situation, as staff become frustrated and depressed by the lack of resources, leaving them with little energy and time to effectively attend to the needs of the student nurses. It therefore appears that there are a variety of factors which have a negative influence on student nurses learning in clinical practice.

The researcher, in his capacity as a nurse educator, has observed and often heard the student nurses expressing concern and dissatisfaction with their clinical learning experiences. This concern has generated interest in the researcher to formally explore and describe the experiences of student nurses during their placement in clinical learning environments (hospitals, community and clinics) within a particular district of the Limpopo Province. These experiences could only be obtained through the people who lived them, i.e. the student nurses. Against this background, the researcher finds it necessary to explore the experiences of student nurses, in order to come to a better understanding, so that student nurses can be assisted in achieving their educational goals of placement in clinical settings. No similar study has been done at the particular nursing campus under study, which are in the Limpopo Province, on the clinical practice experiences of the four-year diploma course student nurses who are registered in terms of SANC Regulation, R425 (22 February 1985, as amended), a programme leading to registration as a nurse (general, psychiatry, community, and midwifery).

This study will therefore seek to address the following issue:

- How do student nurses experience clinical practice during their training?

### **1.3 STATEMENT OF PURPOSE AND RESEARCH QUESTIONS**

The purpose of this study is to explore student nurses' experiences during clinical practice in the health services, in order to generate guidelines for facilitating optimal learning.

The following research question will be asked:

- What are the experiences of student nurses during clinical practice?

#### **1.3.1 Objectives of the study**

- To explore the experiences of student nurses during clinical practice.
- To recommend guidelines for improvement or enhancement of learning during clinical practice.

### **1.4 SIGNIFICANCE OF THE STUDY**

The research findings and recommendations could assist nurse educators and unit managers in planning effective clinical learning environments for student nurses and would enable them to know the attributes of the clinical learning environment that either positively or negatively influence clinical learning from the perspective of student nurses. This knowledge could improve nursing education and may produce more efficient nurses. The research would also cast some light on the problems encountered by student nurses today. Nurse educators and unit managers will be able to assist and offer necessary support to the student nurses while in practice placement. Quinn (2000:417) states that qualified nurses are the key factor in influencing the learning environment of student nurses. Therefore, the findings of this study might enable nurse educators and managers to understand the experiences of student nurses, as lived by the student nurses themselves, and might generate positive intervention strategies.

## **1.5 RESEARCH METHODOLOGY**

Research methodology is defined as the total strategy, from the identification of the problem to the final plans for data gathering and analysis (Burns & Grove 2001:223)

### **1.5.1 Research design**

Research design refers to clearly defined structures within which the study is implemented (Burns & Grove 2001:223). A qualitative, exploratory, descriptive and contextual research design, using the phenomenological method, was chosen. The researcher explored the lived experiences of student nurses during placement in the clinical setting, by using unstructured interviews (Streubert & Carpenter 1999:18). These will be explained in detail in chapter 2.

### **1.5.2 Research population**

Student nurses who were in their fourth-year of study of the four-year integrated programme (SANC Regulation, R425 (22 February 1985, as amended) on one of the nursing campuses of the Limpopo College of Nursing, South Africa, were targeted for participation.

### **1.5.3 Sampling**

A purposive sampling method was used. Individuals participating in the study were selected, based on their particular knowledge of the phenomenon, for the purpose of sharing knowledge (Streubert & Carpenter 1999:58) Participants were personally recruited by the researcher. Out of 47 student nurses who registered for the four-year integrated programme, and who were in their fourth-year (final year) of study on one of the nursing campuses in the Limpopo Province, 11 student nurses were interviewed until data saturation was reached. Both sexes were allowed to participate. Those who participated were requested to give a written consent for the interviews to be audio-taped

#### **1.5.4 Data collection method and instrument**

The researcher used unstructured interviews as a tool for data collection. One comprehensive, open-ended question was asked of participants, in order for them to describe their clinical learning experiences. Participants were allowed to use any language they preferred, including their mother tongue, and this was then translated verbatim. All interviews were audio-taped.

#### **1.5.5 Trustworthiness**

The researcher used strategies adopted by Lincoln and Guba (1985:290) to establish the trustworthiness of the research data. These strategies include credibility, dependability, confirmability and transferability, which will be discussed in detail in chapter 2 (Lincoln & Guba 1985:290; Mouton 2001:277).

#### **1.5.6 Data analysis and interpretation of results**

Data analysis was conducted using Tesch's method of analysis for qualitative data, which encompasses reading and re-reading verbatim transcriptions of all interviews done, listing all topics, and coding, categorising or classifying themes. Commonalities, differences, patterns and meanings were identified. Data was analysed and systematically explored to generate meanings, and existing data was recorded. Participants were asked to validate analysed data and recoding was done where necessary (Coffey & Atkinson 1996:46; Creswell 2003:192; Tesch 1992:141). A detailed discussion of Tesch's method of data analysis will be given in chapter 2.

#### **1.5.7 Ethical considerations**

The participants were asked to give their consent, and they were assured that participation or information provided would not be used against them. The respondents' right to confidentiality would be respected, including their right to ask for clarification about the purpose of the study. Participants were informed of their rights to withdraw from the study at any stage. Anonymity and confidentiality were assured to the respondents (see annexure A). No form of coercion was exercised on the informants (student nurses).

Institutions concerned were also asked to give their permission (see annexure B). Finally, permission to conduct the study was also obtained from the Department of Health and Social Development, Limpopo Province (see annexure C). A full discussion on ethical considerations will be done in chapter 2.

## **1.6 TERMINOLOGY**

### **➤ Clinical learning environment**

Clinical learning environment refers to a variety of practice settings which provide student nurses with learning experiences and opportunities to apply theories of action to real clinical problems, whether in the hospital ward, special department, casualty department, outpatient department, day hospital, clinic, old age home or the home of the patient or client (Mellish, Brink & Paton 1998:207; Reilly & Oermann 1992:110).

### **➤ Clinical learning experience**

A learning experience is a learning opportunity, which is used by the student nurses (SANC 1985: 4).

In this study, clinical learning experience refers to any learning opportunity taken by student nurses in clinical practice, which provides for the development of their knowledge, skills and values inherent in the profession.

### **➤ Clinical practice**

*Clinical* refers to medical teaching given at the hospital bedside (*Oxford Advanced Learners Dictionary of Current English* 1986:155). The concept relates to direct observation of the client (Gaberson & Oermann 1999:2).

*Practice* refers to actually doing something; action not theory (*South African School Oxford Dictionary* 2005:348). It refers to repeated exercise in an activity requiring the development of skill. An essential aspect of learning is that if a task or technique is to be performed skillfully, it must be repeated until it is mastered. Clinical learning involves the acquisition of technical skills (Mellish & Brink 1996:89).



For the purpose of this study, *clinical practice* refers to any practical situation where the student nurse comes into contact with clients, patients or patients' relatives and friends, and other members of multidisciplinary teams, providing the student with the opportunity to correlate theory and practice, develop skill in problem-solving and decision-making, learn how to learn, and develop commitment in taking responsibilities for one's own actions (Brink et al 2000:207; Reilly & Oermann 1992:115).

➤ **Clinical preceptor**

A *clinical preceptor* is a registered professional nurse who is appointed to teach and accompany students in the clinical practice and may or may not be a formally trained nurse educator.

➤ **College tutor**

A *college tutor* is a registered professional nurse with a formal qualification in nursing education appointed at the nursing college to teach students in the class and accompany them during clinical practice.

➤ **Experience**

*Experience* refers to what you learn from doing or seeing things (*South African School Oxford Dictionary* 2005:162).

➤ **Four-year integrated programme**

A *four-year diploma programme* for education and training as a nurse in general, psychiatric or community nursing and midwifery, which leads to registration with the South African Nursing Council (SANC) Regulation R425 (22 February 1985, as amended).

➤ **Learning opportunity**

A *learning opportunity* is the possibility for learning, which is created by a registered nurse or midwife in the classroom and clinical teaching situation, and which may be used by a student nurse to achieve learning objectives (SANC 1985:6).

➤ **Staff nurse**

A *staff nurse* has completed a two-year nursing programme and is registered as an enrolled nurse with the South African Nursing Council, Regulation R2175, as amended (South Africa 1993).(Regulation R2175,1993,Par 5).

➤ **Student nurses**

A *student nurse* is undergoing a four-year integrated diploma programme leading to registration as a nurse (general, psychiatry, community) and midwife, according to SANC Regulation R425 of 22 February 1985, as amended. A student nurse refers to a nurse in basic training doing four years of study, who acquires theoretical and practical knowledge and skills at a nursing college, a hospital, in the community and in health clinics.

➤ **Unit manager**

A *unit manager* refers to a registered professional nurse in charge of a hospital ward/unit or clinic.

➤ **Ward sister**

A *ward sister* in this study refers to any registered professional nurse in a hospital ward/unit or clinic.

## 1.7 CONCLUSION

It is in the clinical learning environment that student nurses learn the actual practice of nursing and are socialised into the nursing profession. This requires an environment

conducive to learning, and appropriate support from skilled practitioners and educationalists.

The outline of this dissertation is as follows:

Chapter 1	Orientation to the study
Chapter 2	Research design
Chapter 3	Literature review
Chapter 4	Data analysis, categories and literature control
Chapter 5	Findings, recommendations, limitations and conclusion