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## Availability of Clinical Nurse Instructor Enhance the Application of Theory into Practice in Tertiary Care Hospitals (LRH, KTH, HMC), KPK, Peshawar, Pakistan

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### **Abstract:**

*Introduction: Learning takes place when students apply what they have learned in classroom environment and practiced in a simulation laboratory into real life scenarios of nursing. Learning in the clinical practice is an important component of nursing education considering that nursing is practice-based profession. The importance of clinical practice cannot be overemphasized as it prepares nurses to become competent practitioners. The aim of this study is to investigate that the availability of nursing instructor enhances student nurse practice.*

*Methodology: The setting of the study was the three tertiary care setting of the province that represents the whole province. The sample of 150 was conveniently chosen from the nursing student in the three tertiary care teaching hospitals of Peshawar. ERC approval has been taken along with the study setting permission from each hospital medical and nursing superintendent.*

*Results: The result indicated that the clinical instructor can improve the clinical practice of student nurse, and prepare competent clinical practitioner. Current study shows the availability of clinical instructor only 50%, while remaining population mentioned that there is no clinical instructor available. Similarly, 50% of the participants mentioned that the clinical instructor needs to change their behaviour towards students learning.*

*Discussion: This study concludes that a significant number of participant recommended to make the availability of clinical instructor possible which help them to develop their skills, update their knowledge and gain confidence.*

**Keywords:** *Lady Reading Hospital, Khyber Teaching Hospital, Hayat Abad Medical Complex. Clinical Practice, Nursing Education, Clinical Instructors (CI-NA) clinical instructor not available*

### **1. Introduction**

Learning takes place when students apply what they have learned in classroom environment and practiced in a simulation laboratory into real life scenarios of nursing. Evidence form literature suggest that there is a gap in integrating theory to practice which has been a concern for a long time in nursing education and has an impact on students' learning clinical skills (Ip and Chan 2005; Sharif and Masoumi 2005, Kelly 2007; Longley et al 2007). Students become anxious and confused if they practice something different from what they had learned in the classroom. (Sharif and Masoumi 2005).

Supervision of nursing students in clinical practice plays a significant role in nursing profession as it has an influence on the students learning of the knowledge and skills (Haggman-Laitila et al 2007). Lack of supervision may lead in adopting incorrect procedures and students may even lose their interest in the nursing profession if they feel frustrated due to in competency for task at hand.

Nursing is a practice-based profession. Therefore, clinical education is an essential part of the undergraduate nursing curriculum. The quality of nursing education depends largely on the quality of the clinical experience. (Elliot 2002; Naphthine 1996). Students need effective clinical placements to allow the application of theory into practice. (Elliot 2002).

The availability of clinical instructor in clinical area helps a student to improve his/her skill in practice and be able to provide quality in care besides improving his/her self-confidence.

Kramer (1974) reported that lack of self-confidence cased fresh graduates to suffer ineffectiveness and had lack of ability to make fundamental improvements in their task.

Thus, effective supervision of students in clinical practice plays a significant role in this esteemed profession, given the fact that it has influence on students' learning and skills. (Haggman – Laitila et al, 2007).

Lack of proper supervision and absence of strong theoretical foundation will result in incompetency in nursing students, which may even lead to losing interest in their profession. Given this extremely important area of study, we were unable to find effective studies on this topic, particularly in Khyber Pakhtoonkhwa Province

### 1.1. Purpose

The purpose of this study is to find out that the availability of clinical instructor in clinical area can improve student nursing practice.

### 1.2. Significance of the Study

The majority of students' nurses have been observed that they are not able to perform well in their clinical practice due to lack of integrated knowledge and skills. According to the rules/regulations developed under the PNC Act 1973 for the nursing training institutes, the institutions should develop clinical skills of the students in the demonstration room and apply it in the clinical area under supervision of in-charge nurse/head nurse and clinical instructor. On the contrary, students are sent to the hospital using term "Duty" and it is assumed as if the students are working as employee, rather than treating the nursing students as trainee.

## 2. Methodology

This research is designed as a quantitative study and based on the data collected from volunteer participants.

### 2.1. Study Population

This study was conducted by collecting data from the student nurses of Lady Reading Hospital (LRH), Khyber Teaching Hospital (KTH) and Hayatabad Medical Complex (HMC).

### 2.2. Study Sampling and Data Collection

The data was collected from the study subjects through convenient sampling method. The sampling technique that is to be used for gathering is "Convenient Sampling"

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### 2.3. Study Setting

Three tertiary care hospitals (LRH, KTH, HMC) was the setting for the data collection.

### 2.4. Sampling

The sampling technique that was used for gathering data was "Convenient Sampling"

### 2.5. Sample Size

Sample size was collected through Epi-Info. Total of 150 participants was selected to collect data.

| Class                | Number of students |
|----------------------|--------------------|
| 2 <sup>nd</sup> year | 50                 |
| 3 <sup>rd</sup> year | 50                 |
| 4 <sup>th</sup> year | 50                 |
| Total                | 150                |

Table 1

### 2.6. Recruitment of Participants

The participants for recording this data were recruited conveniently following approval of the head/principal persons of the corresponding institutes namely LRH, KTH and HMC School of nursing.

### 2.7. Inclusion & Exclusion Criteria

Student nurses were included. Staff nurses and 1<sup>st</sup> year students were not being included because they are in the learning phase and are not regularly exposed to the practice area.

### 2.8. Data Collection Tool

#### 2.8.1. Questionnaire

The questionnaire has 24 closed ended question. This questionnaire was divided in to three parts .The section 'A' gives the opportunities to the participants to select section 'B' or 'C' and composed of the demographic data. The suction B 'is for those participants who have the availability of clinical instructor. The Section 'C' was for those participants who have no facility of clinical

instructor in clinical area. The participants were judged on the two possible answers 'Yes' & 'No'. To answer research question 'the percentage and frequency of each item were calculated to determine the most and least important answer.

### 2.9. Ethical Consideration

The complete proposal was sent to the ethical review committee of the Khyber Medical University. Questionnaire was designed by considering ethical values. The aim and purpose was explained to the participants. They were given the right to take part in the study with their own willingness or to withdraw at any stage of the data collection. The particulars of the participants have been kept undisclosed.

1. Informed consent from each participant
2. Permission from principal
3. Permission from Coordinator of the College

- The limitations of this study include; Transportation, Time constraints, Study setting, Budget.

## 3. Results

### 3.1. Data Analysis

Data from the 150 questionnaires was coded and entered into a Statistical Package for Social Sciences (SPSS) version 16 for analysis purpose. Demographic data were recorded. Descriptive statistics include percentage and frequency distribution, are used to illustrate the responses for the entire questionnaire, including demographic data and other variables.

| Category               | Students% | Total (n=150) |
|------------------------|-----------|---------------|
| <b>Gender :</b>        |           |               |
| Male                   | 0         | 0             |
| Female                 | 150       | 150           |
| <b>Education Level</b> |           |               |
| Metric                 | 35        | 35            |
| FA                     | 45        | 45            |
| FSC                    | 54        | 54            |
| BSC                    | 16        | 16            |
| <b>Total</b>           | 150       | 150           |

Table 1: Demographic Profile of Respondents.

|    | <b>SECTION B</b>   | <u>YES</u> | <u>NO</u> | <u>CINA</u> |
|----|--|------------|-----------|-------------|
| 1  | Does the availability of clinical instructor help to apply theory into practice?   | 50.7%      | 11.3%     | 38.0%       |
| 2  | Does the presence of clinical instructor enhancing student nurse practice in clinical area?                                    | 47.3       | 14.7      | 38.0%       |
| 3  | Is a clinical instructor more helpful while communicating with patients?   | 49%        | 13.3%     | 38.0%       |
| 4  | Does your clinical instructor assist you while performing certain task for the first time?                                     | 46.7%      | 15.3%     | 38.0%       |
| 5  | Does your clinical instructor motivate you to work independently?  | 43.3%      | 19%       | 38.0%       |
| 6  | Do you think without a clinical instructor, you can perform better in clinical area? (If YES, please mention how?              | 12.0%      | 50.0%     | 38.0%       |
| 7  | Does consultation with a clinical instructor result in satisfactory feedback?  | 55%        | 7.3%      | 38.0%       |
| 8  | Does the clinical instructor help you to update your knowledge?  | 50%        | 12.%      | 38.0%       |
| 9  | Is there any coordination between your clinical instructor and ward nurse?   | 44%        | 18.%      | 38.0%       |
| 10 | Does the presence of clinical instructor increase the workload?  | 29%        | 33.3%     | 38.0%       |
| 11 | Do you feel comfortable while performing some procedure in the presence of clinical instructor?                                | 54.0       | 8%        | 38.0%       |
| 12 | Do you feel embarrass before a patient if your clinical instructor instructs you?  | 37.3%      | 24.7%     | 38%         |
| 13 | Are you concerned about the attitude of your clinical instructor in clinical area?   | 53%        | 9.3%      | 38%         |
| 14 | Do you think your clinical instructor need to change his/her teaching strategy? (If YES, please outline any three suggestions) | 9%         | 53.3%     | 38%         |
|    | <b>SECTION C</b>   |            |           |             |
| 15 | Do you think you need a clinical instructor in clinical area?  | 37.3%      | 3%        | 62%         |
| 16 | Can a clinical instructor help in prevention of clinical incidence?  | 37%        | 1.3%      | 62%         |
| 17 | Do you think that clinical teaching can be more effective and useful as compared to class room learning?                       | 36%        | 2%        | 62%         |

|    |   |       |      |     |
|----|---|-------|------|-----|
| 18 | Do you think clinical teaching is the fundamental part of nursing?                              | 37.3% | .7%  | 62% |
| 19 | Can the behaviour of a clinical instructor affect your learning process?                        | 36.0% | 2%   | 62% |
| 20 | Do you recommend introducing clinical instructors in all major hospitals of Khyber Pakhtunkhwa? | 36%   | 2%   | 62% |
| 21 | Do you think the presence of clinical instructor may create anxiety among students?             | 31.3% | 6.7% | 62% |
| 22 | Do you think the support of clinical instructor will help developing confidence in yourself?    | 35.3% | 2.7% | 62% |
| 23 | Do you think a clinical instructor can positive effect on the quality of clinical placement?    | 37.3% | .7%  | 62% |
| 24 | Please comment on the significance of clinical instructor in clinical area.                     | 37%   | 13%  | 62% |

*Table 2: Descriptive Statistics.*

Statistics for whole questionnaire has been derived. 50% of participants mentioned the availability of the clinical instructor, while the remaining that they don't have the availability of the clinical instructor that means the concept of the clinical instructor is not very common in the said province. Some of the students report that the concept of the clinical instructor is not so common in the country. 47% of participant mentioned that the clinical nurse instructor can enhance the student nursing practice while, 14% said that it doesn't help. On the other hand 38% of participants were having no clinical instructor (Refer to Table no: 02)

This is also evident by the study reported by Elcigil & Sari (2007), and Mannix (2007). In their studies, they have mentioned that clinical practice prepare competent practitioners who are able to provide quality health care. Previous studies on the topic also suggest that there is a gap in integrating theory into practice which has been of concern for a long time in nursing education and is having impact on students learning in clinical skills (Ip & Chan 2005; Sharif & Masoumi 2005; Kelly 2007; Longley et al. 2007).

A clinical instructor can play an important role in building up the confidence of nurses. The participants believe that the clinical instructor build up their confidence because the student update their knowledge with the help of clinical instructor. This is in accordance to the previous study which also suggest that Clinical instructors (CIs) play a vital role in nursing students development enabling them to gain self-confidence for future practice (Eta., Atanga., Atashill., & D'Cruz., 2011; Hayajneh, 2010).

Due to these reasons, the participant have supported the idea of introducing clinical instructors in all major hospitals of the province. Similarly, given the practical variations in a class room environment and a clinical environment, teaching can also incorporated into the clinical environment. Literature suggested that the quality of nursing education depends largely on the quality of the clinical experience that student nurses receive in the clinical environment (Henderson et al. 2006). Benner et al. (2009) and Sharif et al. (2005) have reported in their study that "Learning takes place when students apply what they have learned in classroom situation and practiced in a simulation laboratory into the reality of nursing".

While this study suggest that introducing clinical instructor can lead nurses to better learning. This may not be always true, in particular, if the clinical instructor is not able to create proper motivation or if the clinical instructor lacks expertise in knowledge and skills transfer. This is evident by our survey, as quite a considerable ratio of the participants responded that they got enough motivation from the clinical instructor, though participants did acknowledge the presence of a clinical instructor. (Ralph et al. 2009) reported that the "Nurses are the first role models for students in clinical settings. They can have a significant role on students' motivation".

Similarly, it is also important that harmony should be developed between the clinical instructors and the nursing students. For example, Chubike, (2012) has pointed out that a student perception greatly differs from that of an instructor on assessment settings.

#### 4. Discussion

Nurses have a vital role in the clinical care. Indeed health care professionals consider nurses the backbone of health care system. To enhance the nurses' clinical practice, the input from a clinical instructor is highly significant. The clinical instructor is a mandatory element of clinical practices in developed countries. Unfortunately this practice is not common in developing countries primarily due to lack of resources. In Pakistan, the concept of clinical instructor is not very common. Therefore, this study has identified the need of clinical instructors to enhance nursing practice.

Teaching is a complex act that requires the integration of many skills. While educating nursing students, synchronization is needed between the knowledge being delivered in a class room environment and the application of the knowledge in clinical environment.

The clinical training is the heart of the nursing professional program and it remains the single most important resource in the development of competent, capable, caring nurses (Beitz., & Wieland., 2005 & Ousey, 2000). It prepares the concepts that generally accept the arena that synthesize the classroom, laboratory, and other learning.

Nelson, (2011) stated that learning in the clinical setting required knowledgeable and experienced clinical instructors with the ability to teach adult learners effectively.

Students' experiences in a clinical learning environment may have deep impact on their learning (Ip & Chan 2005).

In this study, we have gathered a valuable opinion from the feedback of the nursing community. It is obvious from the responses that several measures can be taken to improve the performance of nurses in the clinical environment. As a matter of fact the significant number of the participants have agreed to the fact that clinical instructor is helpful in the application of theory in to practice that persuade a student nurse to practice in a clinical area. It is also helpful in updating knowledge through constructive feedback. Literature study suggested that application of theory to practice, effective mentoring and constructive feedback positively influence learning (Ralph et al. 2009).

This studies suggested that the introduction of clinical instructors in the Khyber Pakhtoonkhwa major hospital. The participants also recommended the availability of the clinical instructors in major hospitals of the Khyber Pukhtoonkhwa province .On the other hand, different studies suggest that Supervision of nursing students in clinical practice plays a significant role in nursing profession as it has an influence on the students learning of the knowledge and skills (Laitila. H., et al. 2007).”

While we have discussed the effectiveness and usefulness of introducing clinical instructors in clinical education, it is also important to mention the severity of the issue if this is not addressed. Incompetence, loss of interest, lack of professional skills and the ability of applying the skills in practical scenarios are just a few out of so many possible outputs which may result if proper supervision is not provided. This has also been stated by Benner et al. (2009); & Sharif et al. (2005), as they suggested, “Lack of supervision may lead nursing students learning incorrect procedures as they lack guidance become incompetent and lose interest in nursing profession as they feel frustrated in their work due to incompetence.” The following recommendation may be very useful in implementing theory into practice.

## 5. Recommendations

As a final output of our study, some key recommendations are suggested which if given with consideration, will help a better learning and practice environment and result in more efficient nursing practices. The recommendations are listed below;

1. Nursing programs should continue to develop and implement the use of innovative clinical placements.
2. Strategies need to be developed to increase capacity and to facilitate sustainability at these sites.
3. Availability of clinical nurse instructor is to be made compulsory by the nursing training institution as well as the hospital.
4. Clinical nurse instructor must be evaluated for their knowledge competencies and interpersonal relationships.
5. The role of the nurse in non-traditional sites should be articulated. For example, easily accessible resources could be developed that communicate the role of the nurse in multidisciplinary and/or non-traditional settings.
6. Substantive content must be included in curricula regarding concepts such as social determinants of health, health disparities, and access to health services.
7. Hospital staff, whether RNs or other field guides, must be oriented to their role and well supported by the university-based clinical instructor given the realities of heavy workloads and the risk for burnout.
8. Partnerships between academic and host agencies should be established to facilitate the administration and to foster student learning.
9. Further research is needed to evaluate various models of clinical supervision in ICPs.

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