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Views of Nursing Students about Clinical Instructor behaviours That Affect the Development of Self-Confidence, Peshawar, KP, Pakistan

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Abstract:

Self-confidence is not a skill, but helpful in practice. It is an attribute that cannot be transferred from one to another, but it must be acquired by being fostered and modeled. Students build confidence in their ability to function as nurses by experiencing successes in the clinical area (Flagler et al., 1988).

The purpose of this study was to identify the views of the nursing students about clinical instructor behaviours that affect the development of self-confidence, by using self administered closed ended questionnaire.

It was consisting of 73 questions in four categories (communication behaviours, interpersonal relations, nursing competence, and teaching abilities). Two-stage proportions systematic sampling technique was used to collect data from 200 diploma nursing students. This Descriptive cross sectional study was conducted in tertiary care hospitals Peshawar Pakistan. The result indicated that Most Important Behaviours of Clinical Instructor as Perceived by Students were 22 (rated by more than 80% of participants), 41 were Important Behaviours (rated by 70 to 79 % of Students) and 10 were least Important (rated by less than 70 % of Students) Behaviours of Clinical Instructor as Perceived by Students.

Keywords: *Clinical Instructor, self confidence, instructor's behaviour, clinical practice, health care setup, communication behaviour, interpersonal relations, nursing competences, teaching abilities*

1. Introduction

Clinical education plays an essential role in undergraduate nursing program. Not only does it provide opportunities for students to apply the theory learned in the classroom to the real world of clinical nursing, it is also a socialization process through which students are inducted into the practices, expectations and real-life work environment of the nursing profession (Lewin, 2007). The aim of clinical education is to develop in the student the professional skills and knowledge needed in life-long learning and critical thinking, to create self-confidence as a nurse, and to ensure that the nurse is able to make her own decisions and be independent (Tiwari, Rose, and Chan, 2005). The process of professional socialization is introduced and nurtured within the student nurse throughout the education period, and continues on as he/she begins to practice nursing. One essential aspect of the nursing students' professional development is a move toward gaining self-confidence in themselves and their ability to function as nurses. Studies have shown that low self-confidence appears to impede professional role development and diminishes effective performance (Flagler, Loper-Powers, & Spitzer, 1988). Clinical experience is the most important component of nursing education (Gaberson & Oermann, 2007; Walker, 2005).

Nursing students gain theoretical knowledge in the class and apply this knowledge in the clinical area. Therefore the clinical practice based on the knowledge that has been acquired in the classroom. Students can develop their skills through practice, and grow gradually from dependent to independent. Nursing students are learning from their senior staffs and nursing instructors through observation. The students' progress not only in skill, but also in professional socialization in their field. Self confidence is valuable in the health care system, because high confidence inculcates creativity and productivity among students. Knowledge and skill are helpful in the developing of self confidence. Nursing students are learning from their senior staffs, and nursing instructors, through observation. Nursing students can improve their self confident through encouragement by a clinical instructor. Low self-confidence decreases the effective performance of learners. The nursing students' professional development has an essential aspect to move toward gaining self-confidence in themselves and their ability to function as nurses.

Nursing students learn from the behaviours, knowledge, experience and skills of their clinical instructors. Successful development of nursing students into a professional role as caring nurses is increasingly believed to be dependent on the quality of the clinical learning environment (Hofler, 2008; Jenkins, 2006; Laitinen Vaananen, Talvitie, & Luukka, 2007; McBrien, 2006; and Clark, 2006). Learning occurs in a social context that is influenced by factors such as comfort, space and privacy issues, agency policy, personnel and staffing practices, institutional norms, and accessibility of educational experiences” (Raingruber & Bowles, 2000, p. 66). The teachers facilitate learning by working with students to demonstrate, correct, and encourage appropriate nursing care. Students are expected to incorporate knowledge from each clinical experience into subsequent ones in which progression of nursing abilities is expected to be demonstrated. Through a series of these clinical experiences, students learn to become nurses (Gaberson & Oermann, 2007; O’Connor, 2006; Oermann, 1998; Tanner, 2002).

The teaching behaviours of nursing instructors are one set of variables that researchers have isolated for study in the area of clinical teaching. Clinical teaching has been the source of many studies, which have indicated that clinical teachers have an extremely significant influence on students’ clinical experiences. Clinical instructors guide the students in clinical area and teach them many aspect of practice. They assess their students’ performance and correct their mistakes and help them to encourage in the field of clinical practice. If clinical instructors play such an important role in the development of the student's self-confidence, it is important to identify specific behaviours of clinical instructors that affect the student's self-confidence. Effective teaching may be described as encompassing the traits of teaching ability, and all that factors which motivate the nursing students for learning. Measurement of effective teaching has been accomplished through students and faculty evaluation. Evaluation of clinical instructors' behaviour in the clinical settings plays an important role in the effective clinical teaching process for both students who is seeking knowledge and competent, and also for the clinical instructor who is seeking competence and doing good job. So, evaluation and assessment of clinical instructors' behaviours in the clinical area by their students is an important issue in nursing education. The behaviour of senior staff/supervisor and clinical instructor are influencing on the performance of the nursing students in clinical area. The strength of the performance depends on the behaviour of their clinical instructor, therefore competency and confidence of the student is affected by the behaviour of clinical instructor. The encouraging behaviours of instructor increase the level of confidence of the nursing students. And unenthusiastic behaviours produce the destructive effects on learning of nursing students. Theory alone is not enough for professionals whose nature of work is largely based on psychomotor skills, so effective clinical placement is one of the hallmarks for the success of nursing students. Shortly we can say that theory and practice both are valued for nursing students, with special emphasis on their psychomotor skills development.

1.1. Background of the Problem

The educational process is unique in the practice professions because being able to perform the activities of the profession in live situations as opposed to simply being able to express an understanding of principles is a requisite competency of graduation (Shuman, 2005). The clinical experience is very necessary for the development of the nursing practice. This competency cannot be achieved by classroom learning alone (Oermann, 1998). Learning experiences must provide opportunities to apply theoretical principles to real time situations encountered on a daily basis by practicing nurses. (Benner, 1984; Reilly & Oermann, 1992).

The teaching behaviours of nursing instructors are one set of variables that researchers have isolated for study in the area of clinical teaching. Clinical teaching has been the source of many studies, which have indicated that clinical teachers have an extremely significant influence on students’ clinical experiences. Study of clinical teaching in nursing began with Barham’s (1965) and Jacobson’s (1966) critical incident research about clinical teaching behaviours of faculty. The behaviours they identified were deemed actions that equated with effective teaching. Over the next four decades, studies of clinical teaching effectiveness focused primarily on the teaching behaviours of nursing faculty.

Healthy nation depends on their health care system of their country; a good health care system of a country contributes good health of the people. Nursing students play an essential role in the health care setup. The clinical experience of nursing students is an important part of the nursing education program. Nursing students can improve their self confident through encouragement by a clinical instructor. Clinical instructors guide the students in the clinical area and teach them many aspects of practice. They assess their students’ performance and correct their mistakes and help them to encouragement. If clinical instructors play such an important role in the development of the student's self-confidence, it is important to identify specific behaviours of clinical instructors that affect the student's self-confidence.

1.2. Purpose

The purpose of this study is to identify the views of nursing students about clinical instructor behaviours that affect the development of self-confidence in tertiary care hospitals Peshawar. In addition, this study aimed to develop a list of the most important behaviours and the least important behaviours of clinical instructor as perceived by their students. Overall, the data from this study will provide the basis for recommendations to develop self confidence of nursing students in the clinical settings and will help in the development of current faculty, as well prepare them as future clinical nurse faculty, which eventually will improve the quality of their own clinical education with good behaviour.

1.3. Significance of the Study

Most studies have focused on the characteristics of the clinical faculty’s as perceived by students, with few studies examining alumni’s opinion about clinical effectiveness or the extent to which students and educators agree on attributes such as effective

behaviours. This study's result would identify characteristics which are important for clinical faculty, could help the students achieve their desired goals. It is, therefore, important that the clinical faculty identify and incorporate effective teaching characteristics in their clinical teaching and thus potentially enhance student learning in clinical settings.

The goals of clinical education in nursing are to assist students to acquire technical skills, develop professional responsibility, and move from dependent, supervised practice to independent practice (Iwasiw & Goldenberg, 1993). Clinical faculty is more directly and personally involved with students in the clinical setting than is possible in other types of nursing courses. Clinical faculty plays an important role because they provide students with the opportunity to achieve competency, self-confidence, professional identity, professional attitudes, and proficiency in their profession.

Clinical training is considered as essential and very important part of professional nursing education. Since nursing is a discipline based on practice, it needs to be Curriculum of education that offers students the opportunity to develop their clinical skills.(Andrew and Roberts, 2003).

2. Methodology

2.1. Research Design

A Descriptive cross sectional study was conducted at tertiary hospitals located in Peshawar K.P.K Pakistan; the nursing schools of these hospitals offer only one program of four years registered nursing (RN) diploma program for female nurses. These Schools of Nursing faculty provide nursing students with instruction in classroom and clinical settings that teach courses in nursing care practice, education, management, and communication skills. Nursing students are influenced and shaped significantly by the clinical faculty's teaching style and characteristics.

2.1.1. Study Setting

Study settings were Nursing schools of Leady reading hospital Peshawar, Khyber teaching hospital Peshawar and Hayatabad medical complex Peshawar. (All (three) teaching hospitals of Peshawar)

2.1.2. Study Population

The population of this study was four years diploma nursing students of nursing schools of tertiary hospitals at Peshawar K.P.K Pakistan. (Leady reading hospital Peshawar, Khyber teaching hospital Peshawar and Hayatabad medical complex Peshawar, Pakistan).

2.2. Definition of Terms

For the purpose of this study, the following definitions were used:

- Self-confidence as a nurse - "A person's trust or belief in his or her ability to function as a professional nurse" (Flagler et al., 1988, p. 342).
- Clinical nursing instructor (teacher) - An instructor of nursing students in the practice setting.
- Student nurse - A student who is admitted to the nursing program of a school, college or university and engaged in the study of nursing in pursuit of an associates diploma, degree or bachelor's degree in nursing.
- Clinical instruction - The supervision of students as they practice learned skills in a client care setting.
- Perceived as the most important clinical faculty's characteristics / behaviours: "A teacher whose actions and activities facilitate student learning in clinical settings" (O'Shea & Parsons, pp 412, 1979).
- Perceived the least important clinical faculty's characteristics / behaviours: A teacher, whose actions and activities hinder student learning in clinical settings (O'Shea & Parsons, 1979).
- Diploma nursing student: Those students who are currently enrolled in a diploma program in nursing in SON (year 1, year 2, year 3) and are getting their experience from medical /surgical area and are enrolled in the Fundamentals of Nursing course

2.3. Study Sampling and Data Collection

The calculated sample size was 184, but we have obtained the data from 200 subjects because of expected retraction rate of participants. Therefore the actual sample size was 200. The data was collected from the study subjects by using two-stage proportions systematic sampling technique. Participants of the study were picked up from these three hospitals by using Epi-info program version 6.04. In the first stage we have divided actual sample size by these three institutes according to their strength. In this stage we have selected the students from HMC 42 out of 122, from KTH 88 out of 258, and from LRH 70 out of 206. In the second stage of proportion we have selected the participants according to the strength of each class per hospital. So we selected the students from 2nd year 14 out of 40, from 3rd year 16 out of 46, from 4th year 12 out of 36, it was the estimations of HMC. The estimations of KTH was, from 2nd year 31 out of 92, from 3rd year 31 out of 91, from 4th year 26 out of 75. And the estimations for the LRH was from 2nd year 21 out of 63, from 3rd year 21 out of 62, from 4th year 28 out of 81. Then we selected the students systematically in each class. The response rate for the students was 100 %. Therefore total samples of 200 were chosen whose data were analyzed for the study.

2.4. Sample Size

The calculated sample size by Epi-info was 184, and the actual sample size was 200. We have collected the data from 200 student nurses from the schools of LRH, KTH & HMC.

2.5. Inclusion and Exclusion Criteria

2.5.1. Inclusion

All the 586 diploma nursing students who had completed at least their six months consolidated clinical experience participated in the study. Second year, third year and fourth year nursing diploma students were included in our study. Those students have done clinical practice under the supervision of clinical instructors.

2.5.2. Exclusion

First year nursing diploma students were excluded because they were new comers, have no any clinical experience. And those students also excluded whose have little (less than 3 months) or no exposed to clinical practice under the supervision of clinical instructors.

2.6. Recruitment of the Study Participant

After allocating the number of sample, participants have been selected conveniently from diploma second year, third year and fourth year students of nursing schools from LRH, KTH & HMC. All the merits and demerits of this study have been discussed with participants and consent forms have been filled from them. The permission letter for data collection has been taken from the principals of above mentioned nursing schools.

2.7. Questionnaire

The only instrument for data collection was used of self administered Questionnaire sheet; help was taken from previously used questionnaire by the researchers. The questionnaire of this study was consisted of 73 items with closed-ended questions in four categories. Categories: 1. Communication behaviours category was consisted of sixteen items, 2. Category Interpersonal relations had twelve items, 3. Category Nursing competence had nineteen items and 4. Category Teaching abilities was consisted of twenty six items. Pilot study was done by diploma nursing students in HMC. Finally was checked by our study supervisor. The items from each category were computed as follows:

S. no	Category of behaviours	Number of items
01	Communication behaviours	16
02	Interpersonal relations	12
03	Nursing competence	19
04	Teaching abilities	26
	Total	73

Table 1

2.8. Reliability and Validity of the Instrument

The questionnaire was prepared by researcher, with the help of previous researchers questionnaires. It was consist of close ended questions. It has been thoroughly check for depth, clarity and relevancy. The expert opinions have been taken to check the context and language that have been used. Pretest of questionnaire has been performed to test its functional validity and modified on the basis of pretesting results. The pilot study has been done to eliminate weaknesses and sure to obtain correct results with the help of it. Permission to conduct the study and to approach the participants was obtained from the principal of nursing school Hayatabad Medical Complex was obtained via permission letter before the pilot study was conducted. The data collected from 25 diploma nursing students of this institute.

The validity of the questionnaire was obtained through face and content related validity by four experts evaluated the questionnaire for clarity of wording and appropriateness of the questionnaire to the phenomena under study. The experts included three nursing faculty who had masters' degree as well as clinical teaching experience for more than three years in different institutes and one of them had master degree in English and his experience in teaching was more than five years.

2.9. Data Analysis

Data analysis has done concurrently along with data collection. Each questionnaire was given a code number to maintain anonymity. Data were entered into the Statistical Package for Social Sciences (SPSS) version 16.0. Data from questionnaire were analyzed using frequencies and percentages and pie charts also.

2.10. Ethical Consideration

The institutional permission was obtained to carry out the study. The participants were informed of the purpose of the study and written consent was obtained when the questionnaires were distributed to the study samples. Each participant was required to sign the consent form prior to completing the study questionnaire. Participation in the study was voluntary and the opportunity to withdraw from the study at any stage and at any time was also guaranteed if they felt uncomfortable about it. The anonymity of the subjects was maintained. Explanation was given to participants; about the research. The confidentiality of the data was managed as the data of each

subject was not shared with others but the study results were presented in an aggregated form. There was no perceived harm to the participants except that they had to give their time to fill out the questionnaire.

3. Results

Data was analyzed using the Statistical Package for the Social Sciences (SPSS) version 16. The seventy three items were analyzed individually by frequency and percent of response. The responses on the closed ended questions were reviewed and categorized into four categories. All of the two hundreds subjects (100%) who received the questionnaire, completed the all four parts of the questionnaire which contained of 73 items on a closed ended based.

3.1. Demographic Characteristics of the Sample

Our study participants were 100% female nursing students with the ages of 15-20 years were 120 participants, with the ages of 21-25 were 77, with ages 26-30 years were 2 students, and only 1 student was with the age of more than 30 years. Our sample size was consist of 66 students form second year, 68 students from third year and 66 were from fourth year. The academic qualifications of them were: 51 students were matriculated, 135 were intermediated and 14 were graduated. The clinical of them were: 66 participants have 6-12 months of experience, 68 students have 13-24 months of experience, 43 students have 25-36 months of experience, and 23 students had been more than 36 months of experience. These all information has summarized in the following table. (Table: 2)

S. no	Demographic	Frequency	Percentage
01	Age		
	15-20	120	60
	21-25	77	38
	26-30	2	1
	>30	1	.5
02	Gender		
	Female	200	100
	Male	0	0
03	Class		
	Second year	66	33
	Third year	68	34
	Fourth year	66	33
04	Qualification		
	Metric	51	25.5
	Intermediate	135	67.5
	Bachelor	14	7
05	Institutes		
	HMC	42	21
	KTH	88	44
	LRH	70	35
06	Months of Experience (in months)		
	6-12	66	33
	13-24	68	34
	25-36	43	21.5
	≥37	23	11.5

Table 2: Demographic Characteristics of the Sample

3.2. Most Important Behaviours as Perceived by Students

Out of this analysis, there were twenty two (22) items (Makes students understood, Responds confidently, Answers carefully, Demonstrates a genuine concern for patients, Presents student as a professional to others, Respects student as individuals, Is supportive & helpful, Encourages a climate of mutual respect, Demonstrates enthusiasm, Demonstrates self-control & patience, Demonstrates procedures, Guides students development skills, Provides practice opportunity, Promotes student independence, Demonstrates appropriate role of nursing practice as part of total health care, Observes student performance frequently, Employs nursing practice with competence, Makes relationship between academic knowledge and clinical practice, Helps student define specific objectives for the clinical education experience, Manages student's time well, Stimulates interest in subject, Makes suggestions for improvement) marked by eighty or more than eighty percent ($\geq 80\%$) of participants, they were agreed with these behaviours for development of their self confidence. We considered these behaviours as most important. These 22 most important behaviours ranked by the students showed in the following table (3), there were 3 items from the Communication behaviours category, 6 from Interpersonal Relation, 8 from Nursing Competence and 5 from teaching abilities.

S. No	Clinical Instructor behaviours	Yes %	No %
01	Makes students understood (CB)	91.5	8.5
02	Responds confidently (CB)	80.5	19.5
03	Answers carefully (CB)	80.5	19.5
04	Demonstrates a genuine concern for patients (IR)	82.0	18.0
05	Presents student as a professional to others (IR)	87.0	13.0
06	Respects student as individuals (IR)	87.0	13.0
07	Is supportive & helpful (IR)	82.5	17.5
08	Encourages a climate of mutual respect (IR)	83.0	17.0
09	Demonstrates enthusiasm (IR)	81.0	19.0
10	Demonstrates self-control & patience (NC)	81.5	18.5
11	Demonstrates procedures (NC)	81.5	18.5
12	Guides students development skills (NC)	81.5	18.5
13	Provides practice opportunity (NC)	83.5	16.5
14	Promotes student independence (NC)	83.0	17.0
15	Demonstrates appropriate role of nursing practice as part of total health care (NC)	83.0	17.0
16	Observes student performance frequently (NC)	82.5	17.5
17	Employs nursing practice with competence (NC)	88.5	11.5
18	Makes relationship between academic knowledge and clinical practice(TA)	83.0	17.0
19	Helps student define specific objectives for the clinical education experience (TA)	83.0	17.0
20	Manages student's time well (TA)	81.5	19.0
21	Stimulates interest in subject (TA)	84.0	16.0
22	Makes suggestions for improvement (TA)	83.0	17.0

Table 3: 22 Most Important Behaviours of Clinical Instructor as Perceived by Students (rated by more than 80% of participants)

CB = Communication Behaviours IR = Interpersonal Relations
 NC = Nursing Competence TA = Teaching Abilities

3.3. Important Behaviours as Perceived by Students

Forty one (41) behaviours of clinical instructor (Provides useful and timely feedback, Provides positive feedback on performance, Teaches in an interactive way; encourages dialogue, Demonstrates good communication skill, Encourages participation, Identifies student strengths and limitations, Gives students positive reinforcement, Establishes an environment in which the student feels comfortable, Provides appropriate support for student concerns, frustrations, anxieties, Empathic, Has a good sense of humor, Remains accessible, Demonstrates systematic approach to problem-solving, Serves as an appropriate role model, Manages own time well, Demonstrates leadership among peers, Able to relate theory to practice, Exhibits responsibility, Recognizes own limitations, Takes responsibility for own actions, Is a dynamic and energetic person, Shows self-confidence, Demonstrate critical thinking, Allows the student progressive, appropriate independence, Is available to the student, Makes the formal evaluation a constructive process, Plans effective learning experiences, Provides a variety of patients to know disease process, Questions/coaches in a way to facilitate student learning, Provides unique learning experiences, Plans learning experiences before the student arrives, Is timely in documenting the student's evaluation, Is perceived as a consistent extension of the academic program, Evaluate students objectively and fairly, Explains clearly, Emphasizes what is important, Questions students to elicit reasoning, Instructs at student level, Well prepared for teaching, Enjoys teaching, Directs students to literature) were marked by seventy to seventy nine percent (70-79%) of respondents. They were identified that behaviours as responsible for their self development. 7 behaviours of them were from communication behaviours, 5 from interpersonal Relation, 11 from Nursing Competence and 18 from Teaching abilities.

S. No	Clinical Instructor behaviours	Yes%	No%
01	Provides useful and timely feedback (CB)	72.0	28.0
02	Provides positive feedback on performance (CB)	74.5	25.5
03	Teaches in an interactive way; encourages dialogue (CB)	71.5	28.5
04	Demonstrates good communication skill (CB)	78.5	21.5
05	Encourages participation (CB)	70.0	2.0
06	Identifies student strengths and limitations (CB)	78.5	21.5
07	Gives students positive reinforcement (CB)	76.0	24.0
08	Establishes an environment in which the student feels comfortable (IC)	75.0	25.0
09	Provides appropriate support for student concerns, frustrations, anxieties (IC)	73.0	27.0
10	Empathic (IC)	71.0	29.0
11	Has a good sense of humor (IC)	79.0	21.0
12	Remains accessible (IC)	76.5	23.5
13	Demonstrates systematic approach to problem-solving (NC)	76.0	24.0
14	Serves as an appropriate role model (NC)	77.0	23.0
15	Manages own time well (NC)	77.5	22.5
16	Demonstrates leadership among peers (NC)	78.5	21.5
17	Able to relate theory to practice (NC)	77.5	22.5
18	Exhibits responsibility (NC)	76.0	24.0
19	Recognizes own limitations (NC)	70.0	30.0
20	Takes responsibility for own actions (NC)	72.5	27.5
21	Is a dynamic and energetic person (NC)	74.5	26.0
22	Shows self-confidence (NC)	72.0	28.0
23	Demonstrate critical thinking (NC)	73.0	27.0
24	Allows the student progressive, appropriate independence (TA)	74.5	25.5
25	Is available to the student (TA)	78.0	22.0
26	Makes the formal evaluation a constructive process (TA)	77.5	22.5
27	Plans effective learning experiences (TA)	74.5	25.5
28	Provides a variety of patients to know disease process (TA)	75.5	24.5
29	Questions/coaches in a way to facilitate student learning (TA)	75.5	24.5
30	Provides unique learning experiences (TA)	72.0	28.0
31	Plans learning experiences before the student arrives (TA)	70.5	29.5
32	Is timely in documenting the student's evaluation (TA)	74.0	26.0
33	Is perceived as a consistent extension of the academic program (TA)	76.0	24.0
34	Evaluate students objectively and fairly (TA)	79.5	20.5
35	Explains clearly (TA)	75.5	24.5
36	Emphasizes what is important (TA)	75.0	25.0
37	Questions students to elicit reasoning (TA)	72.0	28.0
38	Instructs at student level (TA)	79.5	20.5
39	Well prepared for teaching (TA)	76.0	24.0
40	Enjoys teaching (TA)	73.0	27.0
41	Directs students to literature (TA)	70.5	29.5

Table 4: Important Behaviours as Perceived by Students (70 to 79 % Of Students)

CB = Communication Behaviours IR = Interpersonal Relations
 NC = Nursing Competence TA = Teaching Abilities

3.4. Least Important Characteristics as Perceived by Students

There were ten items (Corrects mistakes without belittling, Does not criticize students in front of others, Communicates in a nonthreatening manner, Is open in discussing issues with the student, Provides feedback separately to each student, Listens attentively to students, Is open-minded and non-judgmental, Makes effective learning experience out of situations as they arise, Observes performance in a discreet manner, Schedules regular meetings with the student) documented by sixty to sixty nine percent (60-69%) students to recognized for self development. These behaviours considered as comparatively least important. And no any item found by participants as less than sixty percent for develop of self confidence. The behaviours that showed in the following table (D) 6 of them were from communication behaviours, only 1 from interpersonal Relation, and 3 from teaching abilities. There was no any item from the Nursing Competence category.

S. No	Clinical Instructor behaviours	Yes %	No %
01	Corrects mistakes without belittling (CB)	60.0	40.0
02	Does not criticize students in front of others (CB)	65.5	33.3
03	Communicates in a nonthreatening manner (CB)	65.0	35.0
04	Is open in discussing issues with the student (CB)	65.0	35.0
05	Provides feedback separately to each student (CB)	62.5	37.5
06	Listens attentively to students (CB)	67.5	32.5
07	Is open-minded and non-judgmental (IR)	69.0	31.0
08	Makes effective learning experience out of situations as they arise (TA)	69.0	31.0
09	Observes performance in a discreet manner (TA)	68.5	31.5
10	Schedules regular meetings with the student (TA)	65.0	35.0

Table 5: 10 least Important Behaviours of Clinical Instructor as Perceived by Students

CB = Communication Behaviours IR = Interpersonal Relations
 NC = Nursing Competence TA = Teaching Abilities

5. Discussion

Questionnaire was consisting of four major categories that were Communication behaviours, Interpersonal relations, Nursing competences, and Teaching abilities. At the analyzing stage these categories further divided into sub categories (most important, important, and less important categories) on the bases of percentage of responding. 80 percent and more than 80% responding were carried on into "Most important" responded sub category, 70% to 79% kept into "Important" responded sub category, and 60 to 69% responding were placed into "less important" responded sub category. No any response has found at the level below of 60%. Therefore we could not mad more categories.

5.1. Communication Behaviours

In this study 80 and more than 80% respondents were strongly recommended the three (3) items for development of self confidence from the first category (Communication behaviours) these were (i) Makes students understood, (ii) Responds confidently, and (iii) Answers carefully. Moreover 70 to 79% respondents were (moderately) suggested seven (7) items from the same category for development of self confidents of the nursing students these were (i) Provides useful and timely feedback (ii) Provides positive feedback on performance (iii) Teaches in an interactive way; encourages dialogue (iv) Encourages participation (v) Identifies student strengths and limitations (vi) Demonstrates good communication skill (vii) Gives students positive reinforcement.

Furthermore 60 to 69% of subjects (mildly) mention six (6) items from this category (Communication behaviours) for self development that were (i) Listens attentively to students (ii) Corrects mistakes without belittling (iii) Provides feedback separately to each student (iv) Is open in discussing issues with the student (v) Communicates in a nonthreatening manner (vi) Does not criticize students in front of others.

On the other hand a behaviour (Provides positive feedback on performance) of this category supported by the study of E. Veltkamp (1997) this study was conducted on undergraduate nursing programs in Western Michigan, this study have recognized that Gives positive feedback is promotes self confidence very much, it was rated by 90% of participants. And another study by Mogan and E. Knox (1987) in the western part of the United States and Canada, also found a item (Corrects mistakes without belittling) of this category as a highest rated characteristic of best clinical teachers as perceived by students. One more study was conducted by Seema Rehan in Karachi, Pakistan (2012), she also recognized as Most Important Characteristics of Clinical Faculty were Listens attentively to students, Provides useful and timely feedback, Gives students positive reinforcement, and does not criticize students in front of others.

A study conducted by Wafaa G. Ali, (2012) in King Khalid University, Saudi Arabia, he place the behaviour "Identifies student strengths and limitations" in top ten demonstrated teaching behaviour of clinical nursing instructors in the clinical area, which is rated by 66.4% of participants. The behaviours (Encourages participation, Answers carefully) is correlated with Influence on Learning as evidence from another study by L. Kube (May 2010) in Midwestern states.

	Respondents%	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	60-69%	6	37.5	37.5	37.5
	70-79%	7	43.8	43.8	81.2
	≥ 80%	3	18.8	18.8	100.0
	Total	16	100.0	100.0	

Table 6: Communication Behaviours

5.2. Interpersonal Relations

In the second major category (Interpersonal Relations) there were more than 80% participants strongly reported six (6) items that built self confidence in nursing student were (i) Respects student as individuals (ii) Demonstrates a genuine concern for patients (iii) Presents student as a professional to others (iv) Is supportive & helpful (v) Encourages a climate of mutual respect (vi) Demonstrates

enthusiasm. In addition five (5) items from this category strongly selected by respondents for the development of self confident of nursing students that were (i) Establishes an environment in which the student feels comfortable (ii) Provides appropriate support for student concerns, frustrations, anxieties(iii) Empathic (iv) Has a good sense of humor (v) Being available in the clinic(Remains accessible). In the same category only one item has been selected for self development by study participants that were (i) Is open-minded and non-judgmental.

And on the other hand, a study by Mogan and E. Knox (1987) in the western part of the United States and Canada, they also found as highest rated characteristics of best clinical teachers was demonstrated enthusiasm. And a behaviour (provides support and encouragements) was found by E. Veltkamp (1997) which was marked by 40 % participants, this has similar means of “Provides appropriate support for student concerns, frustrations, anxieties”. Wafaa G. Ali, (2012) placed two behaviours (Demonstrates a genuine concern for patients, Respects student as individuals) in top ten demonstrated teaching behaviour of clinical nursing instructors, which were marked by 77%, 74.3% of participants respectively and one of them (Demonstrates enthusiasm) placed in top ten effective clinical teaching characteristics as perceived by participant nursing students at 76.1% rated. The point (Remains accessible) is correlated with Influence on Learning as evidence from another study by L. Kube (May 2010) in Midwestern states.

	Respondents %	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	60-69%	1	8.3	8.3	8.3
	70-79%	5	41.7	41.7	50.0
	≥ 80%	6	50.0	50.0	100.0
	Total	12	100.0	100.0	

Table 7: Interpersonal Relations

5.3. Nursing competence

This descriptive non experimental study has found that in the third major category (Nursing competence) there were eight (8) items strongly (≥80%) recognized by the student that effects on the development of self confidence of nursing students were (i) Employs nursing practice with competence(ii) Demonstrates appropriate role of nursing practice as part of total health care (iii) Demonstrates self-control & patience (iv) Demonstrates procedures (v) Guides students development skills (vi) Provides practice opportunity (vii) Promotes student independence (viii) Observes student performance frequently. And other 11 more items of this category have identify by 70 to 79% Subjects of this study for the development self confidence of nursing student in the clinical setup. That were (i) Demonstrates systematic approach to problem-solving (ii) Serves as an appropriate role model (iii) Manages own time well (iv) Demonstrates leadership among peers (v) Able to relate theory to practice (vi) Exhibits responsibility (vii) Recognizes own limitations (viii) Takes responsibility for own actions (ix) Is a dynamic and energetic person (x) Demonstrate critical thinking (xi) Shows self-confidence.

Whereas tow behaviour (Promotes student independence, Serves as an appropriate role model) of this category has found by Mogan and E. Knox (1987) in their study, these behaviours were highest rated characteristics of best clinical teachers. And author E. Veltkamp (1997) also mention a behaviour which has given the same meaning of “Observes student performance frequently” that is “while observing student giving care, instructor is present for support” was mention by 57% participants in his study for promote their development of self-confidence. Seema Rehan (2012) also recognized as most important characteristics of clinical faculty were Serves as an appropriate role model, Demonstrates procedure, Shows self-confidence, Is available to the students. The Nursing Faculty Clinical Teaching Behaviours (Demonstrates procedures, Provides practice opportunity, Promotes student independence) are correlated with Influence on Learning as evidence from another study by L. Kube (May 2010)

	Respondents %	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	70-79%	11	57.9	57.9	57.9
	≥ 80%	8	42.1	42.1	100.0
	Total	19	100.0	100.0	

Table 8: Nursing competence

5.4. Teaching Abilities

The last category was consisting of 26 items, five of them were strongly recommended by study participants at the level of ≥ 80% for the development of self confidence. That items were (i)Makes relationship between academic knowledge and clinical practice(ii) Helps student define specific objectives for the clinical education experience(iii) Manages student's time well (iv) Stimulates interest in subject (v) Makes suggestions for improvement. And 18 items that were moderately recommended at the percentage of 70% to 79% by the nursing students for their self confident development were (i) Allows the student progressive, appropriate independence (ii) Is available to the student (iii) Makes the formal evaluation a constructive process (iv) Enjoys teaching (v) Plans effective learning experiences (vi) Provides a variety of patients to know disease process (vii) Questions/coaches in a way to facilitate student learning from the (viii) Provides unique learning experiences (ix) Plans learning experiences before the student arrives (x) Is timely in documenting the student's evaluation (xi) Is perceived as a consistent extension of the academic program (xii) Evaluate students objectively and fairly (xiii) Explains clearly (xiv) Emphasizes what is important (xv) Questions students to elicit reasoning (xvi) Instructs at student level (xvii) Well prepared for teaching (xviii) Directs students to literature. In the same category only 3 items have

been chosen for their self development in the percentage of less than 70%, in other word mildly recommended by participants. Those items were (i) Observes performance in a discreet manner, (ii) Schedules regular meetings with the student (iii) Makes effective learning experience out of situations as they arise.

And on the other hand, four items of this category (Stimulates interest in subject, Enjoys teaching, Explains clearly, Well prepared for teaching) have supported by study of Mogan and E. Knox (1987). They also mention these items as highest rated characteristics of best clinical teachers. An author Seema Rehan (2012) also mentioned as the most important characteristics of clinical faculty were (clinical instructor is available to the student, He explains clearly). The Nursing Faculty Clinical Teaching Behaviours (Explains clearly, Stimulates interest in subject, Instructs at student level, Questions students to elicit reasoning, Enjoys teaching) is correlated with Influence on Learning as evidence from another study by L. Kube (May 2010)

	Respondents %	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	60-69%	3	11.5	11.5	11.5
	70-80%	18	69.2	69.2	80.8
	≥ 80%	5	19.2	19.2	100.0
	Total	26	100.0	100.0	

Table 9: Teaching Abilities

6. Conclusion

The result indicated that 22 Most Important Behaviours of Clinical Instructor as Perceived by Students (rated by more than 80% of participants) were 3 items from the Communication behaviours category, 6 from Interpersonal Relation, 8 from Nursing Competence and 5 from teaching abilities. 41 Important Behaviours as Perceived by Students (70 to 79 % Of Students) 7 behaviours of them were from communication behaviours, 5 from Interpersonal Relation, 11 from Nursing Competence and 18 from Teaching abilities. 10 Least Important Behaviours of Clinical Instructor as Perceived by Students 6 of them were from communication behaviours, only 1 from interpersonal Relation, and 3 from teaching abilities. There was no any item from the Nursing Competence category.

Clinical instructor Behaviours	Most Important Behaviours	Important Behaviours	Least Important Behaviours
Communication Behaviours	3	7	6
Interpersonal Relation	6	5	1
Nursing Competence	8	11	3
Communication Behaviours	5	18	0
Total	22	41	10

Table 10: Most Important, Important, and Least Important Nursing Instructor Behaviours

6.1. Limitation of Study

There were several initial limitations to this study. One of them is that the study subjects were only female students, gender can be differ in the perception of clinical instructor behaviours. Therefore, the results can be generalized only to the female nursing students of Peshawar tertiary care hospitals

Other limitations were included Transportation facilities, Time constraint, Space, Lack of financial resources, Not good response from some senior people in hospitals, Lack of well educated persons in the field of research for help.

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