Factors influencing quality of clinical teaching in pre-service nursing education at St. Joseph mission hospital Peramiho, Tanzania

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ABSTRACT

Despite efforts employed in clinical teaching, several cases of poor performance have been reported. Quality clinical teaching is important as it reinforces learning. Integrated learning ensures the achievement of quality in health care provision. The study evaluated factors influencing quality of clinical teaching in pre-service nursing education in St. Joseph mission hospital Peramiho Tanzania. This was done through a descriptive cross sectional study design. There is no published research among these factors at St. Joseph mission hospital Peramiho. A quantitative study used self-administered questionnaire to collect data from 97 respondents. Three sub-factors the nurse-tutor; training institution and health facility were measured to identify the influence on quality clinical teaching. The results of the study show that Nurse-tutor factors, training institution factors and health facility did not conform to the standard indicated to hinder positive influence to clinical teaching, are responsible for low quality in clinical teaching. The study concluded that the positively influencing factors to be maintained, while those identified to hinder to be improved. It was recommended that stakeholders to set strategies to ensure quality clinical setting to strengthen clinical teaching.

Key words: Quality clinical teaching, pre-service, nursing.

1. INTRODUCTION

1.1 Background Information

Quality of clinical teaching plays a big role in acquisition of knowledge and skills in nursing. Quality clinical learning reinforces learning, whereby theory and practice are integrated. The integration ensures the achievement of quality in health care provision. Despite the efforts employed in clinical teaching for pre-service education, several cases of poor performance in nursing skills have been reported. This has brought a considerable concern. Hence the purpose of the study is to determine factors influencing quality of clinical teaching at St. Joseph mission hospital Peramiho. Global perspective testified that skilled nursing professionals are a vital link to patient care. Nurses are essential component of any health system that improves the quality of healthcare. Therefore, improving the qualifications of nurses would support in resource-constrained communities around the world (AIHA, 2012). The scarcity of nurses with higher education qualifications also affects professional nursing leadership. This is due to lack of capacity to shape relevant health policies nationally and internationally (Gudo et.al.2011).

Human Resource for Health training is essential to better understanding the state of supply and demand. Human resource can be used to more accurately project the numbers and skill mix. Geographic distribution of nurse tutors is needed so as to meet nursing training colleges. An understanding of these imbalances enables workforce planners to make informed decisions. This will ensure an appropriate number and mix of nurse tutors (HWFK, 2013).

The health sector requires an adequately prepared workforce in sufficient numbers to meet service needs. Health care consumers expect competent care from nurses and so expect that nurses are properly prepared. Hence health care setting serves a dual role for healing and an educational setting (Sedgwick & Harris, 2012b).

Health workforce composition is in terms of both skill categories and training levels. New options for the education and in-service training of health care workers are required. The options will ensure that the workforce is prepared to meet a particular country's present and future needs (WHO, 2013). Nursing students expect a

supportive clinical environment that is innovative, and highly individualized. Learn immensely with mentors who appreciate their individuality and the fact that everyone learns differently. It is from clinical placements that students start to garner the necessary attributes of caring and critical thinking skills (Lawal, Weaver, Bryan, & Lindo, 2015).

1.2 Factors Influencing Quality clinical teaching

This section presents literature information pertaining to nurse tutor, training institution and health facility factors in influencing quality clinical teaching.

1.2.1 Nurse-tutor factors

Quality clinical teaching is determined by various factors, including sufficient emphasis and time allocated for clinical learning. Other factors like effective teaching methodologies and clinical role models strengthen skills acquisition (ICN 2014). Qualified nurse tutors are expected to teach at multiple levels. This is determined by other factors that faculty position often require varying levels of academic preparation such as masters and doctoral degree programs (Penn, Wilson, & Rosseter, 2008). Additional training increase educators' knowledge, skills, attitude and build their capacity to perform the tasks associated with their positions within the system of care. Continuous learning ensures that the latest evidence-based practices are incorporated into all training and development activities (Susan, et al., 2013).

Quality clinical teaching is essential because nursing is a discipline that requires substantial levels of clinical training. Additionally clinical experience is important it provides link between theoretical knowledge and practice, hence its recommended students are to work under supervision of experienced practitioners (HWA, 2014). Ngidi & David, (2012) concluded that more experienced nurse-educators provided higher-quality professional knowledge, skills and attitude to student-nurses hence influence acquisition of quality clinical teaching.

1.2.2 Training institution factors

Training institution fosters quality of clinical teaching through applications of variety of teaching methods this integrates knowledge, skills and attitude to students during clinical placement. Hence faculty members in the training institution are urged to utilize variety of teaching methods (TNMC, 2013). To promote quality clinical teaching innovative teaching methods reported to be essential, that critical thinking and clinical competences of nurses ensure quality nursing care. Among the teaching methods included role play and simulations of patient scenarios proved to improve clinical competences. Other methods included intensive clinical skill workstations, practical workshops; case study group and debate improve skills (Miertrove, & Lepiesova, 2013).

Nursing faculty work with different groups contributing to the workload and leads to role conflict. Faculty members work with administration, other faculty members, students, advisors, university committees, and clinical sites. In one instance nurse tutor may need to be a clinician and in another an educator. To these, nurse educators may experience role conflict and leaving nursing faculty (Suozzo, 2015).

1.2.3 Health facility factors

Quality clinical teaching is facilitated by adequate number of qualified staff. Qualified staff foster quality clinical learning support and are to possess adequate knowledge. It is also important that Qualified staff would connect theory to practice for nursing students in the clinical setting (Jackson, 2015).

Also quality clinical teaching is influenced when basic working and teaching equipment be provided to the clinical nurse educators. This will enable them to effectively teach and demonstrate skills appropriately. Also the researcher emphasized that up-to-date knowledge enable clinical nurse to adequately coach, supervise and assess student nurses on clinical placements, in return will improve the quality of clinical teaching (Eta, et al, 2011).

Briggs, Schoonbeck, & Paterson, (2011) recommended that positive learning environments are created through good leadership practices. Furthermore, effective management strategies provide nurses with readily accessible opportunities to foster the learning of students. In addition, the management team in health facility needs to support successful behaviors and interactions. Additionally, clinicians who deliver direct patient care are to ensure learning is occurring at the bedside. This is achieved through influenceability since nurse educators and nurses can act as role models.

2. Research Methodology

The study utilized a cross-sectional descriptive design that involved the collection of data. Its purpose provided an account and description of individuals and situations as it occurs. The study also adopted quantitative approaches of data collection and analysis. Independent variables in this study included; Nurse tutor factors, training institutional factors, and health facility factors. The dependent variable is the quality clinical teaching. The target Population was the entire group of nursing staff, comprising 194 nurses at St. Joseph Mission Hospital Peramiho. The study Population were the 141 sampled nurses. From this group the researcher had access to for the study. Those included in the study were nurses who were involved in teaching nurse students, and were present during the study. And nurses who consented to participate in the study. The excluded from the study were those nurses not involved in teaching nurse students and were absent during data collection. And nurses who did not consent to participate in the study.

Data collection procedure involved a self-administered questionnaire. The researcher pre-tested the study instrument for reliability and validity. After the pre-test, the instrument was then fit for the actual data collection.

Data Analysis and Presentation

The data was analyzed using Microsoft excel spread sheet and SPSS Volume 23.

Data analysis was done using descriptive and inferential statistics to determine significant association between the independent and dependent variables. Inferential statistics was computed from the quantitative data obtained to derive on the sum P. Values. The significant level was set at 0.05. The results were presented in tables, frequencies, pie charts, percentages, mean and standard deviation.

3. Research Findings

This chapter presents the analysis of the data collected from the respondents. The response rate was 69% (97). The analysis presentation was arranged under the subheadings of Demographic data, nurse-tutor factors, institutional factors, and health facility factors.

3.1 Demographic Findings

The respondents included more female 53% (51) than male 47% (46). Nearly one third of the respondents 29% (28) were aged over 40 years. There were more single 52% (50) respondents, and the majority of the respondents 58% (54) were diploma holders in nursing. The greatest majority of the respondents 73% (71) had no other training apart from basic nursing education. Table1 provides further detail on the respondents.

Variable	Category	Frequency (n)	Percentage (%)
Gender	Male	46	47
	Female	51	53
Age (Years)	20-25	13	13
	26-30	21	22
	31-35	13	13
	36-40	22	23
	>40	28	29
Marital status	Married	37	38
	Single/cohabiting	50	52
	Widowed/separated	10	10
Educational level	Diploma in nursing	54	56
	Certificate in nursing	39	40
	BSC Nursing	3	3
	Maters in nursing	1	1
Other training	Yes	26	27
	No	71	73

Table 1: Socio-Demographic Characteristics of the Respondents

3.2 Factors affecting quality clinical teaching

3.2.1 Nurse-tutor factors

The nurse-tutor factors were rated by participants showed to have positive influence in all the three sub-factors which were investigated. Nurse tutors had adequate academic qualification, had adequate other training and had adequate experience. Hence the respondents considered nurse-tutor factors influence quality of clinical teaching. With overall P. value of 0.009 significant level.

3.2.2 Training facility factors

Training institution factors were rated by participants showed to have positive influence in some of sub-factors which were investigated. The institution had adequate teaching resources, tutors applied variety of teaching methods. Number of nurse-tutors was rated to be inadequate. Hence the respondents considered training institution factors also proved to have a positive influence on quality of clinical teaching. With overall P. value of 0.003 significant level.

3.2.3 Health facility factors

Health facility factors were rated by participants showed to have positive influence in some of sub-factors which were investigated. Number of nurses was adequate, health facility was prepared, clinical teaching curriculum accepted to be relevance, and management supported well. Majority of respondents rated that there was no clinical instructor. Hence, health facility factors also proved to have a positive influence on quality of clinical teaching. With overall P. value of 0.028 significant level. Table 2 provides further detail on the factors influencing quality clinical teaching

Factors affecting quality clinical teaching	Results		
Characteristics	Yes	No	P. Value
Nurse- tutor factors	N (%)	N (%)	0.009
Nurse-tutors academic qualification	78 (80)	19 (20)	
Other relevant training	84 (87)	13 (13)	
Experience in nursing practice	80 (83)	17 (17)	
Training institution factors			0.003
Number of nurse-tutors	34 (35)	63(65)	
Teaching facilities	86 (89)	11 (11)	
Variety of teaching methods	87 (90)	10 (10)	
Health facility factors			0.028
Adequacy of nurses	60 (62)	37 (37)	
Presence of clinical instructor	13 (13)	84 (87)	
Preparedness of the health facility	90 (93)	7 (07)	
Preparedness of the health facility	82 (85)	15 (15)	
Management support	88 (91)	9 (09)	

Table 2: Factors influencing quality clinical teaching

4.0 Brief discussion

4.1 Nurse-tutor factors

Nurse-tutor factors were rated to have positive influence in all the three sub-factors which were investigated. This are reflected in the dimension of quality clinical teaching. Quality clinical teaching occupies a central position in the pre-service nursing education, which emphasize the purpose of this research in investigating nurse tutor factors. The findings are considered with previous studies that nurse tutor factors foster quality clinical teaching (ICN (2014). Faculty position often require varying levels of academic preparation (Penn, Wilson, & Rosseter, 2008)

Also additional training increase educators' knowledge, skills, and attitude and build their capacity to perform the tasks associated with their positions within the system of care (Susan, et al., 2013). And more experienced nurse-educators provided higher-quality professional knowledge, skills and attitude to student-nurses (Ngidi & David, 2012).

4.2 Training institution factors

Measuring training institution factors has also indicated the positive influence on quality of clinical teaching. Based on the findings, the study concur with previous studies that training institution fosters quality of clinical teaching through applications of variety of teaching methods this integrates knowledge, skills and attitude to students during clinical placement (TNMC, 2013). Also to promote quality clinical teaching innovative teaching methods reported to be essential, that critical thinking and clinical competences of nurses ensure quality nursing care (Miertrove, & Lepiesova, 2013).

4.3 Health facility factors

Health facility factors were as well rated to have positive influence on quality of clinical teaching in some of the sub-factors. Considering the quality dimensions, the largest rating of the health facility was in terms of number of nurses, preparedness, and relevance of curriculum including management support. Presence of clinical instructor received negative support. This differs from other previous studies which stated that up-to-date knowledge enable clinical nurse to adequately coach, supervise and assess student nurses on clinical placements, in return will improve the quality of clinical teaching (Eta, et al, 2011). Also the previous findings are supported by the study of Briggs, Schoonbeck, & Paterson, (2011) that positive learning environments are created through good leadership practices.

The study indicated that all the three factors had a positive influence on quality clinical teaching. Some subfactors did not conform to the standard indicated to hinder positive influence to clinical teaching. It was recommended that stakeholders to set strategies to ensure quality academic qualification of nurse-tutors. To ensure availability of clinical instructors and tutors. Collaborate with the health facility management to ensure quality teaching. The study also recommends that further research can be undertaken in other health facility to strengthen clinical teaching.

4.2 Conclusions

The study therefore concluded in accordance with the study findings. The respondents considered nurse-tutor factors influence quality of clinical teaching positively. In relation to training institution and health facility the findings also indicated that most of the factors affect quality teaching positively. Some sub-factors in regard to training institution and health facility did not conform to the standard. These were responsible for low quality in clinical teaching. Overall, the positively influencing factors to be maintained, while those identified to hinder to be improved. The overall conclusion in accordance with the research objectives, findings indicated that the health facility at St. Joseph mission hospital was rated to be good. However, despite the goodness there is need to work on the factors indicated to hinder quality teaching. Quality health facility will foster quality clinical teaching for acquisition of nursing skills.

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ACKNOWLEDGEMENT

First and foremost, I thank God the Almighty for the strength given me during the study time. I thank the Kenya Methodist University for offering me this chance to pursue the course Masters of Science in nursing Education. I thank my supervisors; Dr. James Mwaura, Dr. Catherine Mwenda, for their guidance. In particular way I thank Dr. Agnes Mutinda my Corrections supervisor for her tireless work to this far. I also thank the Editorial team of the International Institute for Science, Technology and Education (IISTE) for their good cooperation in communication. I appreciate my employer, St. Joseph mission hospital Peramiho for sponsoring the entire course of my studies including the research article. I also thank my religious community the Missionary Benedictine Sisters Peramiho Priory. All who participated in one-way or the other to make this work a success, to you all I say, thank you.