

# Difficulties of Nursing Students During Clinical Training

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## Abstract

**Background:** Nursing practice in the 21st century faces a number of challenges including increased nursing teaching schools and institutes, in adequate nursing staff, increasing healthcare costs, limited facilities, need for preceptor (link teacher), in adequate quality and numbers of hospitals. Clinical practice is crucial in nursing to integrate theory and practice to acquire skills and capability of critical thinking, solve problems and decision making.

**Aim of the Study:** identify the difficulties which encountered the students of nursing college in the hospitals of Kirkuk city during study year 2011-2012, also to assess the extent of benefit from clinical training in the hospitals.

**Methodology:** A descriptive study, using the assessment approach was conducted on students of college of nursing /Kirkuk University from 2/5/2012 to 24/4/2013. A purposive, non-probability sample composed of (200) students (male & female) from the (2nd, 3rd &4th) classes were selected for the study.

A questionnaire was developed for purposive of study & included 3 parts were demographic data, difficulties which encountered student & benefit of student from clinical training. The analysis of data was done by application of descriptive statistical data analysis approach (frequency, percentage, and the mean of scores).

**Results:** The age group (22-24) years was represent (51%) of the sample, the female represent (80%) from the sample, 2nd class were (42%) from the sample, & (68, 5%) were living in urban.

**Conclusions:** Most of the students were young, female, live in urban, and from the 2nd class. The findings were moderate for the teacher related factors, Health staff & patients related factors, student & tasks performance related factors, place and time related factors, And most of the students were moderately benefited from clinical training in the hospitals.

## 1. Introduction

One of the main features of nursing as a science and a profession is that nursing education is characterized by a close relationship between theory and practice, meaning that nursing cannot be learned through either theory or practice only. However, clinical learning takes place in the complex social context of the clinical environment that is defined in several ways and consists of different important elements <sup>(1)</sup>.

Clinical practice is conducted in a variety of settings so that students may comprehensively and actively learn

through nursing practice. University and school-affiliated faculty members, hospital-affiliated practice educators, clinical nursing educators, and staff nurses together teach students at the hospital <sup>(2)</sup>.

The clinical learning environment is also seen as a concept that can be measured although numerous research projects insisted on the qualitative approach of exploring the students' experiences <sup>(3)</sup>.

The medical knowledge base, currently doubling every 5 to 8 years, is reliably predicted to begin doubling every year; medical schools, healthcare institutions, practitioners, and students will all need to develop strategies for coping with the sheer volume of information, concepts, and skills <sup>(4)</sup>.

Terms like "mentor", "preceptor" and "link teacher" are extensively explored to describe a supervisory role and the one-to-one relationship between student and mentor, or individualized supervision was found crucial to the process of professional development <sup>(5)</sup>. Other studies focused on staff-student relationships and the impact this relationship has on students' learning <sup>(6)</sup>.

## 2. Materials and Methods

**Design:** A descriptive study, using the assessment approach was conducted on students of college of nursing from May 14<sup>th</sup>, 2013 to September 8<sup>th</sup>, 2015.

**Sampling:** A purposive (nonprobability) sample of (200) students of nursing were selected from 2<sup>nd</sup> class, 3<sup>rd</sup> class, & 4<sup>th</sup> class, the first class was excluded because they did not had a practical training in their curriculum, also some cases within the involved classes were excluded from the total sample because they did not fill all the questionnaire items.

**Setting:** College of Nursing/University of Kirkuk in Kirkuk City.

**Tools:** A questionnaire was adopted and developed for the purpose of the study, it comprises of (3) parts and consist of (34) items, part (I) included demographic characteristic of student, part (II) difficulties encountered nursing students during practical training involved (6) factors related to teacher, health workers, student and performing tasks, and time and place. part (III) benefit from clinical training from their point of view. Three point type liker scale is used as (always, sometimes, never) for rating the items of the difficulties faced students and the scale (good, moderate, poor) for the benefit of the students from the clinical practice.

**Data analysis:** Data were analyzed through the use of statistical package for social science (SPSS) which applied (frequency, percentage, mean of scores). difficulties encountered nursing students in items of (Table 2,3,4,5) are determined as following:- (mild problems = 1 - 1.66), ( moderate problems = 1.67 - 2.32 ), and (sever problems = 2.33 - 3).

### 3. Results

**Table (1)** Distribution of the sample according to demographic characteristics.

| Age Groups        | Frequency | Percentage |
|-------------------|-----------|------------|
| ( 19 - 21 ) Years | 89        | 44.5 %     |
| ( 22 - 24 ) Years | 102       | 51 %       |
| ( 25 - 27 ) Years | 9         | 4.5 %      |
| Total             | 200       | 100 %      |
| Gender            | Frequency | Percentage |
| Male              | 40        | 20 %       |
| Female            | 160       | 80 %       |
| Total             | 200       | 100 %      |
| Stages            | Frequency | Percentage |
| Stage2            | 85        | 42.5 %     |
| Stage3            | 57        | 28.5 %     |
| Stage4            | 58        | 29 %       |
| Total             | 200       | 100 %      |
| Residential Area  | Frequency | Percentage |
| Urban             | 137       | 68.5 %     |
| Suburban          | 10        | 5 %        |
| Rural             | 53        | 26.5 %     |
| Total             | 200       | 100 %      |

Table (1) revealed that an age group (22\_24) year represents the greater percentage of the sample which constitutes (51%), in addition (44.5%) of them are at age group (19\_21) years While only (4.5%) of student age wear between (25\_27) years .The study finding had depicted that more than two \_third of the students were female which represent (80%) and the remaining were male. Relative to the subject of the class of study it has shown that student in 2<sup>nd</sup> stage were greater number which constitutes (42.5%) and (29%) were in 4<sup>th</sup> class, in addition (28.5%) were in 3rd class. Concerning residential area, (68.5%) of the students was living in urban and (26.5%) were living in rural while only 5% were living in suburban.

**Table 1: Mean of scores of teacher related factors.**

| No | Scales<br>Items   | Always |      | Sometimes |      | Never |      | M.S  |
|----|---|--------|------|-----------|------|-------|------|------|
|    |   | F      | %    | F         | %    | F     | %    |      |
| 1  | Teachers Number inappropriate with students number.                       | 50     | 25.0 | 106       | 53.0 | 44    | 22.0 | 2.03 |
| 2  | Teacher gives attention (care) to the practical training time.            | 18     | 9.0  | 103       | 51.5 | 79    | 39.5 | 1.69 |
| 3  | A teacher does not follow up students during practical training directly. | 59     | 29.5 | 111       | 55.5 | 30    | 15.0 | 2.14 |
| 4  | Teacher follows up students depending on restorative (supervisor).        | 77     | 38.5 | 102       | 51.0 | 21    | 10.5 | 2.28 |
| 5  | Teacher connect theoretic subject with practical application.             | 60     | 30.0 | 105       | 52.5 | 35    | 17.5 | 2.12 |
| 6  | Theoretic Subject not synchronizes with practical subject.                | 49     | 24.5 | 115       | 57.5 | 36    | 18.0 | 2.06 |

Table (2) show that all of items are moderately significant, grand mean for total mean of scores in teacher related factors is accounted for (2.05).

Table 2: Mean of scores of health workers and patient related factors.

| No | Scales<br>Items  | Always |      | Sometimes |      | Never |      | M.S  |
|----|--|--------|------|-----------|------|-------|------|------|
|    |  | F      | %    | F         | %    | F     | %    |      |
| 1  | Collaboration of nursing staff with student was not sufficient.                              | 48     | 24.0 | 124       | 62.0 | 28    | 14.0 | 2.1  |
| 2  | Collaboration of medical staff with student was not sufficient.                              | 58     | 29.0 | 92        | 46.0 | 50    | 25.0 | 2.4  |
| 3  | Language is a barrier in communicating with patient.   | 82     | 41.0 | 103       | 51.5 | 15    | 7.5  | 2.33 |
| 4  | Don't allow entrance some units and words.   | 20     | 10.0 | 159       | 79.5 | 21    | 10.5 | 1.99 |
| 5  | Presence more than one relative with patient cause embarrassment to student during practice. | 69     | 34.5 | 105       | 52.5 | 26    | 13.0 | 2.21 |

Table (3) show that item (3) is highly significant while the items (1, 2, 4, and 5) are moderately significant. Grand mean for total mean of scores in nursing staff and patient related factors was accounted (2.20).

**Table 3: Mean of scores of student and performance tasks related factors.**

| No | Scales<br>Items  | Always |  | Sometimes |      | Never |      | M.S  |
|----|--|--------|--|-----------|------|-------|------|------|
|    |  | F      | %  | F         | %    | F     | %    |      |
|    |  | 1      | Absences of student effect on his/her application to nursing practice. | 89        | 44.5 | 86    | 43.0 |      |
| 2  | Student dislikes nursing practices application.  | 117    | 58.5   | 72        | 36.0 | 11    | 5.5  | 2.53 |
| 3  | Gender differences (for student) effect on communication with patient.                                       | 75     | 37.5   | 105       | 52.5 | 20    | 10.0 | 2.27 |
| 4  | Tools and equipment not available.   | 50     | 25.0   | 135       | 67.5 | 15    | 7.5  | 2.17 |
| 5  | Medical machines (monitors, D.C shock, ECG, etc.) not work effectively.                                      | 34     | 17.0   | 147       | 73.5 | 19    | 9.5  | 2.07 |
| 6  | Presence of high number of student (institution, schools) decrease opportunity of application and practices. | 135    | 67.5   | 56        | 28.0 | 9     | 4.5  | 2.63 |
| 7  | Fear, embarrassment, indecision, decrease practical opportunity.   | 76     | 38.0   | 106       | 53.0 | 18    | 9.0  | 2.29 |
| 8  | Presence of personal problems among students decreases students' performance.                                | 66     | 33.0   | 116       | 58.0 | 18    | 9.0  | 2.24 |

Table (4) shows that the items (2, and6) are highly significant and items (1, 3, 4, 5, 7, and 8) are moderately significant. Grand mean for student and performance task related factors are accounted (2, 31).

**Table 4: Mean of scores of time and place related factors.**

| No | Scales<br>Items   | Always |      | Sometimes |      | Never |      | M.S  |
|----|---|--------|------|-----------|------|-------|------|------|
|    |   | F      | %    | F         | %    | F     | %    |      |
| 1  | Practical day's number in a week is tired.                                    | 46     | 23.0 | 98        | 49.0 | 56    | 28.0 | 1.95 |
| 2  | Practical hour's numbers are tired.   | 77     | 38.5 | 95        | 47.5 | 28    | 14.0 | 2.24 |
| 3  | Standing for long hours in words for data collection from the patient.        | 112    | 56.0 | 74        | 37.0 | 14    | 7.0  | 2.49 |
| 4  | Rest period is insufficient.  | 92     | 46.0 | 71        | 35.5 | 37    | 18.5 | 2.27 |
| 5  | Far of training places and numerous of it.                                    | 82     | 41.0 | 98        | 49.0 | 20    | 10.0 | 2.31 |
| 6  | Hospital capacity not enough for training.                                    | 79     | 39.5 | 98        | 49.0 | 23    | 11.5 | 2.28 |
| 7  | Wards design in Kirkuk city hospital inappropriate with clinical training.    | 86     | 43.0 | 87        | 43.5 | 27    | 13.5 | 2.20 |
| 8  | Impossibility of receiving study halls for lecture viewing, scientific films. | 126    | 36.0 | 64        | 32.0 | 10    | 5.0  | 2.58 |
| 9  | Don't availability of specific place to keep personal things.                 | 157    | 78.5 | 32        | 16.0 | 11    | 5.5  | 2.73 |
| 10 | Ambulate media is not obtainable.   | 104    | 52.0 | 74        | 37.0 | 22    | 11.0 | 2.41 |

Table (5) shows that items (3, 8, 9, and10) are highly significant & items (1, 2, 4, 5, 6, and7) are moderately significant. Grand mean for this table accounted (2.24).

**Table 5: Distribution of the sample regarding the benefit gained from the clinical practice.**

| No | Scales<br>Items  | Good |      | Moderate |      | poor |      |
|----|--|------|------|----------|------|------|------|
|    |  | F    | %    | F        | %    | F    | %    |
| 1  | The benefit from practical training (students point of view) | 40   | 20.0 | 116      | 58.0 | 44   | 22.0 |

Table (6) shows that (58%) of the students are moderately benefited, 22% were poor benefited & only 20% are good benefited from the clinical training in the hospitals.

## 5. Discussion

### 5.1 Demographic Characteristics

Table (1) appear that most of students age group (51%) were between (22-24) year which refer to the normal age of study in Iraq universities. Regarding the gender, (80%) of the student were female related to the acceptance program of student in colleges of nursing in Iraq universities which accept (75%) female & the remaining male.

Students of 2<sup>nd</sup> class represents the highest percentage (42,5%) the study involved the 2<sup>nd</sup>, 3<sup>rd</sup> & 4<sup>th</sup> classes because practical training began at 2<sup>nd</sup> class in hospitals in college of nursing. Regarding the residential area most of the student (68, 5%) were from urban.

### 5.2 Factors affect student in the clinical practice area of study.

#### 5.2.1 Teacher related factors.

The results show that (29, 5%) of participant were unsatisfied from teacher follow up, this finding is similar to the finding of a study which done in Palestine were the most of participant were unsatisfied from their supervisor follow up<sup>(7)</sup>. This result appeared due to inadequate numbers of teachers, lack of appointment and acceptance of others in post graduate study which lead to that student are not receiving good supervision, as a result they feel fear, hesitation and loss of confidence, this effect on their learning and acquiring skills.

The present of clinical educator in the word even for short time will clarify what need of explanation; also the presence of clinical educator makes the nursing staff to do something for student & will give feedback about student progress<sup>(8)</sup>.

The results show that (25%) of participant in our study were unsatisfied from teachers number, this finding is differ from the finding of Cyprus study which stated that most satisfied student were with personal mentor, and student with team supervision<sup>(8)</sup>.

In appropriate teachers number opposite large number of student in the word will reduce the learning opportunity & make supervision difficult, as a result student nurse may graduate with inadequate clinical skills<sup>(9)</sup>

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The results show that (30%) of participants were unsatisfied from connection between theory & practice; several studies have shown that the “theory–practice gap” problem arises when educators from different positions are involved in clinical practice <sup>(10)</sup>. In our study the main gap present due to unavailability of specialized hospitals or centers in the same hospital regarding neurosurgery, cardiac surgery, orthopedic, urinary surgery, psychiatric and gynecologic hospitals.

### **5.2.3 Factor related to health workers & patients.**

The results show that (24%) of participant student were unsatisfied from nursing staff collaboration & (29%) of participant were unsatisfied from medical staff collaboration, work load could be one of the causes especially with critical cases and high patients number in which there are not enough time to answer questions or spend long time to explore a condition.

Nursing student need to be in contact with multi-disciplinary team e.g. doctor, nurse, physiotherapists, dieticians etc., qualified staff should create environment which allow the students to ask, perform alone or with nursing staff, develop critical thinking and decisions, the learning environment should be comfort. E.g. students should be able to ask question without feeling of guilty or disloyal, qualified staff should make nursing students feel a part of the team <sup>(11)</sup>.

The results appear that, (41%) of the sample show that language was a barrier in communication with patient, so the nursing students need to learn the common languages in Kirkuk city for effective communication with patient, good communication with patient is activates conduction clinical learning environment for nursing student, and this problem in Kirkuk city is more clear due to languages variation of the people.

In addition, (34, 5%) of participant were unsatisfied from presence more than one relative with the pt., when nursing students perform a procedure to patient in the presents of patients relative they will effect on his/her performance, the student will be confused, preoccupied with their opinion, the finding indicates the necessary of controlling number of visitor to patient & visiting in the visit time.

Furthermore (10%) of participant unsatisfied from don't allow entrance to some units & wards, this will cause superficial learning style, short clinical rotation left little time for nursing students' reflection, & less time for exploration of new practice behavior <sup>(12)</sup>.

### **5.2.4 Factor related to students and tasks performance.**

The results show that (58,5%) of precipitants dislike the nursing practical application, 38 % of participant indicate the fear, embarrassment, inability to make decision decrease practical opportunity, (33%) of participant indicate that presence of personnel problem among students decrease students' performance, and (37,5%) of participant show that gender differences (among student) effect on communication with patient. The results appeared due to the low experience, in appropriate number of teachers in the practical training sittings, in spite of that supervising of the students during the practical training unsatisfied, these has been shown in the items 1&3 of table 2.

In addition, the results show that (44,5%) of participant indicate that the absence of student effect on application of nursing practice, the cease from training will cause scientifically gap in the absent student mind,

even when his/her peers explain the subject for his/her later, but their explanation will be not effective like the teacher.

Furthermore, the study appears that (25%) of the sample indicate that the tool & equipment was not available, (17%) of participant indicate that the medical machine not work effectively in the hospitals. The shortage and /or absence of equipment to fulfill nursing lutes & meet needs of patient, one of the problems faced student in their clinical placement, the clinical learning environment should provide teaching & learning opportunities, space, equipment & health & safety requirement for appropriate placement of nursing student <sup>(13)</sup>.

#### **5.2.4 Factor related to place & time.**

The results show that (78,5%) of the participants suffered from unavailability of specific spaces to keep personal things, this will cause the students preoccupied with his /her own things & interfere with student's performance, the result indicates the necessary of existing area for keeping own things for every student in hospitals.

Also, (56%) of the students were standing for prolong hours in wards for data collection, prolong standing of student alone in the ward make students to explore the learning environment, and see more nursing procedures in addition to critical cases management.

Addition result, (52%) of participant show their suffering from unavailable of ambulate media, & (41%) of student suffer from far away of training places, the finding show there is a big problem faced most of nursing students, this may cause the absence of student or coming late to training hospitals.

In addition, (38, 5%) of student were unsatisfied from training hours, and (46 %) of student saw that the rest period was insufficient, this problem makes the student mentally & physically tired.

Furthermore, (43%) of the students show that the design of the hospitals is in appropriate for training, this one common of hampering faced clinical learning.

At last, (36 %) of the students indicate unavailable of hall in hospitals for theory learning, or cases discussion, and if the holes were presented, it was small in size and the teacher cannot use clarifying media for student while some students is standing & others sitting in un comfortable seats, as we mention precedes, learning environment should provide teaching & learning opportunity, space, equipment & healthy safety requirements for appropriate placement of students <sup>(14)</sup>.

#### **5.3 The benefit from clinical training:**

Most of the students were moderately benefited from practical training which constitute (58%) of the total sample, this is mean that this part of the questionnaire was effected by part two of the questionnaire which mean that presence of difficulties during practical training effect on the amount of benefit that student gain, because of the effect of nurse teachers, nurse staff, student himself & time & place in the amount of knowledge & skills that student gain in the clinical training area, while (22%) of the students answers rated as poor benefit from the clinical practice in the hospitals of Kirkuk city, this outcomes related to the difficulties they face it in the clinical practice area which appeared in the results of part two of the questionnaire, and this is supported by several studies conducted in Cyprus and japan and other governments <sup>(15)</sup>, and only (20%) of the students rated their benefit as a good.

## Conclusions:

1. Most of the students were young, female, live in urban, and from the 2<sup>nd</sup> class. The findings were moderate for the teacher related factors, nursing staff & patients related factors, student & tasks performance related factors, place and time related factors; except the following:
  - A- Language is a barrier in communicating with patient appears as a very severe problem.
  - B- Students dislike clinical practice performance, presenting of high number of technical and nursing school students decrease opportunity of applications and practices, standing for long hours in the practice area for data collection from patients, impossibility of receiving of study holes for lecture show, and scientific films, and unavailability of specific places to keep personal objects and ambulated media is unobtainable, were sever problems.
2. Most of the students were moderately benefited from clinical training in the hospitals.

## 6.2 Recommendations

1. Building a new teaching hospital with high capacity and multiple specialties is necessity to receive a large number of students from different health institutions. Provide a caravan for lectures and case discussions.
2. Increase the number of supervisory staff by the nursing college of Kirkuk university to be appropriated with the number of students in the clinical practice in the hospitals.
3. Multidisciplinary teaching team may increase the clinical skills of the students; these include the nursing staff in the hospitals with an experience for more than five years in the job to be preceptors on the students in the clinical area. In addition, staff nurses need actively involved in nursing education to reduce the theory–practice gap.
4. Establishing a specific plan to clarify the training of the students in clinical area in a method more detailed to constrict the clear gap between the theory part and the practical part of the basic subjects of the study.

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