Palestinian Staff Nurses' Attitudes Toward Nursing Students

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Abstract

Clinical practice is a substantial part of the nursing curriculum aimed at actively engaging student nurses with the necessary skills needed for the nursing profession. Clinical nurses play an important role in this teaching learning process. The relationship between nursing student and staff member in the clinical area can either facilitate or hamper students' learning. However, negative attitudes of nurses threaten student progression and retention. The purpose of this study was to deepen understanding of staff nurses' attitudes toward nursing students within the context of clinical education in Palestine. Methods: A descriptive cross-sectional study design was utilized in this study. The entire staff nurses of surgical, medical, emergency (n=350) employed at four hospitals (two private & two government) were selected proportionately. A self-administered questionnaire and a demographic tool designed by the researcher were used to collect data. Attitudes were measured using a five point Likert scale. The results demonstrated that attitude toward nursing students were neutral or slightly positive. Some nurses (50.6%) believed that nursing students are eager to learn and most (92.9%) have thought that nursing students respect staff nurses as practitioners. Findings also suggest student nurses believe staff nurses are a positive influence, essential in the development of professional socialization. Conclusion: Staff-student relationships are essential to the creation of positive clinical experiences. The author recommends that continued research of nurses who work with student nurses, as well as exploration of the nurse educator's perspective, is needed..

Keywords: Attitudes, Staff Nurses, Nursing Students, Palestine

1. Introduction

The relationship between staff and student nurses is an important factor in the education of the future nursing workforce. A negative relationship can significantly influence the quality of the clinical experience, and may alter employment decisions or even drive some students away from the profession altogether. Nurses today have all been in the student nurse role and most have memories of clinical experiences which were both inspiring and discouraging. Clinical experiences are essential to the educational process and development of a professional value system. The clinical experience is a distinctive learning situation that cannot be duplicated in the classroom or by reading assignments. Because of their position in the clinical area, staff nurses are a valuable adjunct to the learning experience of students. Professional, caring interactions between students and staff nurses are essential to enhance not only student education, but the future of nursing.

Dunn & Hansford (1997) stated that warm, supportive interpersonal relationships between staff nurses and student nurses are crucial to a positive learning environment that is conducive to the education of health care professionals, and an important component of the nursing syllabus, which provides chances for nursing students to practically experience their future career, and allows them to take their theoretical knowledge to the real world (Eleigil and Sari, 2008). As part of the academic preparation for the nursing profession, students are needed to take part in clinical rotation work in numerous local health care settings, under the supervision of staff at the facilities and faculty of the department of nursing. The purposes of clinical practice is for the students to learn how to perform physical and psychosocial assessments, interact with clients, families and staff, administer medications and perform other needed skills, develop critical thinking skills, and develop plans of nursing care (Presbyterian University College, 2007).

Additionally, Dunn & Hansford (1997) contend that a positive student-staff nurse relationship is important in early education when impressions and role modeling are formed and also in the following years when students become more dependent on staff instead of their instructors.

However, an important part of the nurse's education is being accepted by the clinical staff (Aghamohammadi-Kaldhoran et al., 2011). Levett-Jones et al. (2009) found that feelings of belongingness and inclusion on the clinical unit can enhance a nursing student's sense of connectedness and self-esteem. They concluded that nursing staff has a responsibility to create an environment conducive to learning by making the students feel included and supported. On the other hand, the authors found that alienation by the staff can cause a student nurse to feel anxious and ineffective, which reduced the learning experience and negatively influenced future employment decisions. In a different paper on belongingness, Levett-Jones, Lathlean, Higgins, and McMillan (2009) found that feelings of alienation diminished students' confidence and decreased their enthusiasm for learning. Students viewed such experiences as wasted learning opportunities.

Koushalie et al. (2012) noted that there has been a rise in the negative attitude displayed by nursing

students as well as nurses toward the nursing profession due to unpleasant hard work in the hospital, working on holidays, lack of respect for work, and low salary. Loss of nurses' interest in what they do, not only negatively affect the quality of work, but also demoralize the profession.

Little research has been published in nursing literature regarding the relationships between student nurses and the staff nurses who serve as role models in the clinical setting. This is a topic, however, that is frequently discussed informally by both groups. The research that has been completed shows results of mostly negative descriptions of attitudes towards each other (Cooke, 1996; Freiburger, 1996; Jackson & Neighbors, 1988). Such negative findings are problematic for the nursing profession. Awareness of the interdependent relationship between staff and students may facilitate collaboration and promotion of the team approach.

In light of what has been discussed so far, this descriptive study was conducted to identify attitudes and perceptions of student nurses and staff nurses working together in the clinical setting. And the results will also be important for nurse administrators who should strive to successfully create an atmosphere that supports the education of student nurses in their facilities, as these students are the future of professional nursing.

2. Methods

2.1. Study Design

A descriptive cross-sectional design was used to investigate the nurse's attitudes about nursing students.

2.2. Sample and Participant Selection

A sample of 370 nurses with at least one year clinical experience in their current institution and having at least 3 times of working with nursing students was recruited from four hospitals (two private hospitals and two government hospitals) in south of West-Bank in Palestine. The nurses who agreed to be included had worked at different units and had served at the same institution for at least a year.

A stratified sampling method was utilized to draw the required sample size from the four targeted hospitals. Then required sample size from each hospital was drawn proportionately based on the size or weight of each hospital, which was determined based on the number of nurses in each hospital. Then the required number of nurses from each hospital was distributed proportionately between the departments (surgical, medical, emergency) depending on the size of each department (number of nurses in each department), then the required number from each department was obtained by simple random sampling without replacement. However, because some nurses did not complete the responses, lost the form, or had insufficient time, complete data for 350 out of 370 nurses were acquired.

2.3. Instruments

The following instruments were used for the survey:

1- Demographic Questionnaire: the demographic data sheet elicited personal data from the registered nurses. The personal data consisted of age, sex, basic professional preparation, highest degree obtained, years of nursing experience, extent of student contact, and capacity in which nurses worked with students.

2- Along with the demographic data sheet, a questionnaire constructed by Stagg (1992) was also utilized. The questionnaire collected information about attitudes that nurses have toward nursing students. The questionnaire consisted of 41 questions to be answered on a five point Likert scale. The responses provided ranged from strongly agree to strongly disagree with undecided as the midpoint. The response choices ranged from strongly agree to strongly disagree with undecided as the midpoint. The items attended to attitudinal factors included time, motivation, knowledge, personal issues, professional issues, instructor/student relationship and the background comparisons.

The questionnaire was translated to Arabic and the translation validity was assessed by doing back translation. To find the questionnaire (content) validity, 5 nursing instructors responsible for the clinical teaching of nursing students at the surveyed Hospitals reviewed it for duplicate or unclear questions and also important areas not probably addressed. The validity of the questionnaire was 85.1% in simplicity, 78.6% in relevancy and 76.4% in clarity. In addition, the reliability of the questionnaire determined 81.2% through the Alpha- Cronbach Coefficient.

2.4. Dependent & Independent Variables

2.4.1. Dependent Variable: The major dependent variable is the nurses' attitudes pertaining to nursing students.

2.4.2. Independent Variable: The following independent variables were also collected: age, professional preparation, years of experience in nursing, years of experience working with associate degree nursing students, and years employed in the institution.

2.5. Data analysis

In order to look at staff nurses' attitudes, completed questionnaires were coded and the data were entered into

SPSS for analysis. Frequency distributions were made on factors related to time, motivation, knowledge, professional issues and instructor/student relationship.

As a result of minimal variance in the frequency distributions, the responses to the questions were collapsed into three categories: agree, disagree and undecided.

3. Results

3.1. Attitude Distributions

Time: Item numbers 4, 6, 13, 31, 32, and 34 on the questionnaire were constructed to look at factors related to time. Approximately eighty-seven percent 303 (86.6%) and seventy-four 260 (74.2%) of the study participant's agreed to the statement "with nursing students who are familiar with the unit, nurses have time to do other things" and the statement "With nursing students who are new on the unit, nurses have time to do other things, respectively. On the other hand, more than one-third of participants 116 (33.1%) disagreed to the statement "nursing students are more of a trouble than they are worth" and 72 (20.6% were undecided in this regard as appears in Table 1.

Moreover, most of the nurses 232 (66.3) agreed and 60 (17.1) were undecided regarding the statement that "nurses would not have to spend extra time with students, if the instructors would supervise the nursing students." For another time oriented question, the majority of the nurses 179 (51.1) agreed that nursing students have time to attend to patients' needs, while 123 (35.1) were undecided. These factors can clearly be seen in Table 1.

Table 1: Time Factors (N=350)

Factors	Frequency and Percentage of Responses			
	Agree	Undecided	Disagree	
4. With nursing students who are new on the unit, nurses have	260 (74.2)	45 (12.9)	45 (12.9)	
time to do other things.				
6. with nursing students who are familiar with the unit, nurses	303 (86.6)	33 (9.4)	14 (4.0)	
have time to do other things				
13. There is too much to do to have to worry about nursing	93 (26.6)	68 (19.4)	189 (54.0)	
students				
31. Nursing students are more trouble than they are worth	162 (46.3)	72 (20.6)	116 (33.1)	
32. I would not have to spend extra time with nursing students,	232 (66.3)	60 (17.1)	58 (16.6)	
if the instructors would supervise the students				
34. Nursing students have time to attend to the patients' needs	179 (51.1)	123 (35.1)	48 (13.7)	

3.2. Motivation:

Nursing student motivation was the area of focus in items 10, 18, 35 and 36. More than half of the participants 183 (52.3%) believed "nursing students do only what they are assigned to do" and disagree with the statement "nursing students willingly help staff nurses to get things done" 162 (46.3%). And, only 177 (50.6%) believed that "students are eager to learn" as it can be seen in Table 2.

Table 2: Motivation Factors (N=350) Image: Comparison of the sector sector

Factors	Percentage of Responses		
	Agree	Undecided	Disagree
10.Nursing students willingly help staff nurses to get things done	106 (30.3)	82 (23.4)	162 (46.3)
18.Nursing students help other students to get things done	203 (58.0)	62 (17.7)	85 (24.3)
35.Nursing students are eager to learn	177 (50.6)	127 (36.3)	46 (13.1)
36.Nursing students do only what they are assigned to do	183 (52.3)	100 (28.6)	67 (19.1)

3.3. Knowledge:

The staff nurses' impression of nursing student knowledge was the emphasis of items 8, 14, 23, 26, 28, 30, 37, and 41. The majority of responses 258 (73.7%) agreed with the statement "Nursing students ask good questions". Also, almost two-third of the participants 212 (60.6%) disagreed with the statement "you cannot tell nursing students anything because they know everything". Moreover, 185 (52.9%) disagreed with the statement "today's nursing schools offer quality education", and most of the participants 252 (72.0%) agreed with the statement "nurses learn new information from nursing students". Also, most of the participants 255 (72.9%) disagree and 61(17.4%) were undecided on the question that students make hasty decisions. Almost more than half of the participants (54.0%) were disagreed and 85(24.3%) undecided with the statement that, "nursing students seem to have no common sense". As you see in Table

Table 3: Knowledge Factors (N=350) 1

Factors	Percentage of Responses		
	Agree	Undecided	Disagree
8. You cannot tell student nurses anything, because they know	70 (20.0)	68 (19.4)	212 (60.6)
everything.			
14. Nursing students ask too many questions	111 (31.7)	96 (27.4)	143 (40.9)
23. Nurses learn new information from nursing students	252 (72.0)	57 (16.3)	41 (11.7)
26.Today's nursing schools provide quality education	83 (23.7)	82 (23.4)	185 (52.9)
28. Decisions are made too hastily by nursing students	34 (9.7)	61 (17.4)	255 (72.9)
30.Nursing students ask good questions	258 (73.7)	45 (12.9)	47 (13.4)
37. Nursing students seem to have no common sense	76 (21.7)	85 (24.3)	189 (54.0)
41. Nursing students do not get enough clinical experience	258 (73.7)	45 (12.9)	47 (13.4)

3.4. Professional Issues:

Questions 1, 2, 11, 17, 25, and 33 on the questionnaire were designed to look at nursing student's professionalism as perceived by staff nurses. The results demonstrated that the vast majority 325 (92.9%) felt the nursing students respected them as practitioners.

It was also found that the majority 307 (87.7%) of the nurses considered the nursing students as part of the nursing team. It also appeared that only 102 (29.1%) of participants disagreed with "nursing students look professional".

Interestingly, more than half 190 (54.3%) of the participants supposed that the staff nurses do not have to teach the nursing students when the clinical instructors are being paid for that. Also, 116 (33.1%) disagreed, and 72 (20.6%) undecided with the statement "student questions stimulated new ways of doing things" (Table 4). **Table 4: Professional Issues Factors (N=350)**

Factors Percentage of Responses Agree Undecided Disagree 1. I believe nursing students respect staff nurses as practitioners 325 (92.9) 14 (4.0) 11 (3.1) 2. I consider the nursing students as part of the nursing team. 307 (87.7) 20 (5.7) 23 (6.6) 11. Staff nurses should not have to do the teaching that clinical 190 (54.3) 69 (19.7) 91 (26.0) instructors are paid to do 17. Nursing students are too chummy with the doctors 115 (32.9) 159 (45.4) 76 (21.7) 25. Nursing students' questions stimulate new ways of doing 162 (46.3) 72 (20.6) 116 (33.1) things 33. Nursing students look professional 201 (57.4) 102 (29.1) 102 (29.1)

3.5. Background Comparisons:

In this section of the survey instrument, staff nurses compared their nursing school experiences with that of the nursing students of today in questions 7, 9, 20, 21, 24, and 29. The results showed that most the majority of the participants 262 (74.9%) agreed with the statement "nurses should be nice to nursing students". It was also made clear that 198 (56.6%) disagreed with "nursing students were prepared for clinical experience" and 49 (14.0%) were undecided about it. Also, 268 (76.7%) said that nursing students were not prepared as were diploma nurses. Approximately, more than two-third 232 (66.3%) of the participants expressed that they would never have called their nursing instructor by their first name (see Table 5).

Table 5: Background Comparison Factors (N=350)

Factors	Percentage of Responses		
	Agree	Undecided	Disagree
7. We were all nursing students once, so nurses should be nice to	262 (74.9)	49 (14.0)	39 (11.1)
nursing students			
9. Baccalaureate nursing students are not as well prepared clinically as	198 (56.6)	70 (20.0)	82 (23.4)
diploma students.			
20.Baccalaureate nursing students are not as well prepared clinically as	268 (76.6)	49 (14.0)	33 (9.4)
Diploma students			
21. When I was in nursing school, we had more clinical experience than	267 (76.3)	35 (10.0)	48 (13.7)
the nursing students do now			
24. I had it tough in nursing school, so nursing students of today should	251 (71.7)	59 (16.9)	40 (11.4)
too.			
29. When I was a nursing student, I would never have dreamed of	232 (66.3)	49 (14.0)	69 (19.7)
calling my instructors by their first names			

4. Discussion

This descriptive cross-sectional study was conducted in order to determine the attitudes of nursing staff of Palestinian hospitals toward nursing students. An investigation of staff nurses' attitudes toward nursing students indicated that many nurses were undecided on numerous questions. Under the factors related to time, motivation, knowledge, personal issues, professional issues, past and present issues, and program comparisons several questions had a high percentage of undecided responses. For the time grouping (Table 1), a large number of staff nurses were undecided whether they had available time to do other things when students were in the unit. This is interesting because Nail and Singleton (1983) indicated that nurses spend more time for certain activities such as giving reports, educating the patients, etc. when nursing students are in the unit.

Moreover, less than half of the nurses agreed with the point that the student nurses were a source of disturbance and interruption. Our results are in consistence with the results of previous research done by Aghamohammadi-Kalkhoran et al. (2011); found that nursing staff feels the students put them in trouble. Also, in the study by Lofmark and Wikblad (2001) student nurses described identical attitudes of nurses toward student nurses and identified them as barriers to learning. One of the differences of our study with the Aghamohammadi-Kalkhoran investigation is its difference in item 32 and 34 with which most of our participants agreed, where their participants were not. The reason could be the unsatisfactory relationship between staff and instructors. These findings elucidate that nurses are reluctant to dedicate their time to students' education and prefer to work independently. Nevertheless, we believe that warm, supportive interpersonal relationships between staff nurses and student nurses are crucial to a positive learning environment, and caring behaviours and actions by nurses are also noted to be vital to student's professional growth and learning.

The final time related statement with a number of indecisive responses considered the nursing students' time to attend to patient needs. Perhaps these staff nurses were remembering what it was like to be a nursing student. The staff nurses may have felt overwhelmed with the responsibility of caring for patients and in acquiring needed skills as nursing students. The motivation category (Table 2) had two questions with a considerable number of undecided responses: "nursing students willingly help staff nurses" and "nursing students willingly help other students" created ambivalence in some staff nurses. This finding is similar with Hathorn et al. (2009) study, where they speculated that the indecisive nurses due to deterrent factors such as staffing shortages, high patient census or acuity, and liability concerns. Lack of motivation to work with students also led to duplicity attitudes among nurses and included a lack of recognition or appreciation for working with students, and lack of monetary or workload compensation. It is worth to note that Stagg's (1992), speculated that the indecisive nurses only saw the students talking with other students or they may have never had a student help them.

Several knowledge factors had a high percentage of undecided responses as in Table 3. A high degree of ambivalence was seen in the two statements that "today's nursing schools provide quality education" and "students do not get enough clinical experience which is congruent with the by Aghamohammadi-Kalkhoran et al. (2011) study." It is worth to note that Stagg's (1992), as cited in by Aghamohammadi-Kalkhoran et al. (2011); he theorized that, staff nurses may have visualized different types of preparation for nurse diploma, associate degree and baccalaureate degree. Nurses were also uncommitted on the two questions that "nursing students make decisions too hastily" and "nursing students seem to have no common sense." For these questions, it is speculated that the nurses, who were uncommitted, actually agreed with the statements, but did not want to indicate their true feelings on the questionnaire. Edgecombe and Bowden (2009) suggest that the culture of the clinical environment determines the success of the clinical experience and that staff should have a commitment to assisting with student's learning needs in order to create a positive learning environment. Therefore, it is highly acknowledged that being supported by clinical staff plays a highly positive role in the process of students' education.

With regard to professional issues, many participants agreed with the respectful behaviour of students toward nursing staff and accepted them as nursing team, which is confirmed by Hathorn et al. (2009) and Kelly (2007) studies. They argued that student nurses' socialization into the profession is dependent upon acceptance and approval by staff nurses, who have the greatest influence on the development of the student nurses' professional role. Therefore, clinical nursing educators should teach nursing students to socialize with nurses by being prepared for the clinical experience, relating their learning objectives to nurses, being competent, and displaying a willingness to learn. Previous Studies of nursing students' profession (Atack et al., 2000; Chan, 2002; Cope, Cuthbertson, & Stoddart, 2000; Drennan, 2002; Li, 1997; Lo, 2002; Lofmark & Wikblad, 2001; Seigel & Lucey, 1998; Suen & Chow, 2001).

The question "nurses should not have to do the teaching that clinical instructors are paid to do" possibly had a high degree of undecided and disagreed responses because nurses felt they should get extra money for working with nursing students. It is postulated that the indecisiveness on the statement dealing with student's questions stimulating new ways of doing things results from the uncommitted participants feeling overwhelmed by students' questions. Lastly, a large degree of participants were undecided on whether students look professional. This could result from an easing of nursing schools' dress codes from when the staff nurses were in school. About the questions under the category of background comparisons, results give an idea that almost all participants remembered that they were student in the past, so they should demonstrate a decent behaviour towards the students. Also, they knew the past experiences of themselves were stricter than now, which is congruent with the Aghamohammadi-Kalkhoran's study.

Under the section instructor/student relationship, all three of the questions had a high degree of agreement, which is confirmed by Aghamohammadi-Kalkhoran's study. Empowering nurses by allowing them to express their opinions and worries regarding student assignments, role expectations, and workload issues while working with students may strengthen relationships and foster positive, professional socialization attitudes among nurses who work with student nurses. Nursing faculty can play a role in building collaborative relationships with nurses by inviting nurses to participate in clinical assignments for students, scheduling students to listen to change of shift reports with the nurses to avoid double reporting by the nurses, and planning a time for socialization with nurses at the beginning of a clinical placement. Nursing faculty should also encourage communication between the nurses and student nurses regarding patient care, so that students become a part of the nursing team rather than guests in the facility.

With regard to personal issues, the results showed that staff nurses had a high degree of agreement about nursing students' lack of self-confidence. Addressing their lack of self-confidence, since the students rotate to several units or facilities during a semester it is not surprising that there is little self-confidence (Jackson and Neighbors, 1988). For students, each clinical day is similar to the first day of employment in a new position or institution. Students are constantly introduced to new people, new environments, and new routines. Under these circumstances, students inherently feel intimidated and less confident. Despite this explanation, Webb and Shakespeare (2008) revealed that mentors wanted students to be confident, and saw this as an aspect of competence.

5. Implications for Nursing

Despite the limitations of the study, this investigator believes that the study suggests multiple implications for staff nurses and faculty instructors. Staff nurses must foster an environment that provides empathy, trust, patience, and respect for nursing students. Staff nurses possess an abundance of information and skills acquired through years of practicing nursing. By willingly sharing their expertise, nurses create a positive learning environment for students which may influence nursing students to return to the unit after graduation. Nursing students prefer to return to a unit where they felt welcome as a student.

In working with nursing students, both staff nurses and students must be aware of what is expected of each participant. Staff nurses must evaluate their attitudes and willingness to work with nursing students; whereas, students should not be assigned to work with nurses who are not willing to share their expertise. Information may be gleaned from the study regarding the selection of preceptors to work with nursing students. When possible, nursing students should be assigned to precept with nurses who are less than 40 years old, have less than 10 years of nursing employment, hold a baccalaureate degree and, who have not worked with many students over the past year.

6. Conclusion

The findings of this study supported the hypothesis that a positive relationship between nursing student and staff member has a positive effect on the nursing student's perception of the clinical experience. Problems in professional socialization are often found to be associated with differences in clinical units and staff where students are assigned along with the opportunities students have for modeling in that clinical area. Therefore, staff nurses need to be aware of the teaching/leaning process in order to facilitate the development of professional socialization.

Students and nurses need to accept each other as legitimate partners in the health care team with the goal of not only safe, effective, holistic patient care, but for the development of the nursing profession.

Last but not least, the author recommends that continued research of nurses who work with student nurses, as well as exploration of the nurse educator's perspective, is needed. Finally, the establishment of evidenced based practice for optimal clinical instruction should be the ultimate direction of future research in nursing education.

7. Suggestions for Further Research

A combined quantitative and qualitative approach to study staff nurses' attitudes toward nursing students is recommended. A description of staff nurses' attitudes could be obtained by the administration of a questionnaire and by interviewing the nurses. The interviews would allow for clarification of questions on the questionnaire while possibly exploring the attitudes that were not mentioned on the survey.

Last, but far from least, this researcher would like to impress upon both staff nurses and faculty instructors the need to feed and nurture nursing students instead of starving and abusing the nursing young. According to Jackson and Meighbors (1988), "the students of today are the future of professional nursing. If this is true, it is imperative that we must shape nursing students so they can, in turn, shape the future of nursing.

Competing Interests: The author declares that they have no competing interests.

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References

- Aghamohammadi-Kalkhoran, M., Mansoureh Karimollahi, M., & Abdi, R. (2011). Iranian staff nurses' attitudes toward nursing students. Nurse Education Today, 31:477–481
- Atack, L., Comacu, R. K., Kenny, R., LaBelle, N., & Miller, D. (2000). Student and staff relationships in a clinical practice model: Impact on learning. Journal of Nursing Education, 39(9): 387-392.
- Chan, D. (2002). Development of the clinical learning environment inventory: Using the theoretical framework of learning environment studies to assess nursing students' perceptions of the hospital as a learning environment. Journal of Nursing Education, 41(2): 69-75.
- Cope, P., Cuthbertson, P., & Stoddart, B. (2000). Situated learning in the practice placement. Journal of Advanced Nursing, 31(4): 850-856.
- Cooke, M. 1996. Nursing students' perceptions of difficult or challenging clinical situations. Journal of Advanced Nursing, 24, 1281-1287.
- Drennan, J. (2002). An evaluation of the role of the clinical placement coordinator in student nurse support in the clinical area. Journal of Advanced Nursing, 40(4): 475-483.
- Dunn, S.V., Burnett, P., (1995). The development of a clinical learning environment scale. Journal of Advanced Nursing, 22: 1166–1173.
- Dunn, S.V., & Hansford, B. (1997). Undergraduate nursing students' perception of their clinical learning environment, Journal of Advanced Nursing, 25 (6): 1299-1309.
- Edgecombe, K., Bowden, M., 2009. The ongoing search for best practice in clinical teaching and learning: a model of nursing students' evolution to proficient novice registered nurses. Nurse Education in Practice, 9: 91–101.
- Elcigil, A., Sari, H.Y. (2008). Students' opinion about and expectations of effective nursing clinical mentors. The Journal of Nursing Education, 47 (3): 118–123.
- Freiburger, 0. A. (1996). A collaborative approach to team building between staff and students in long-term care. Nurse Educator, 21 (6), 7-12.
- Hathorn, D., Machtmes, K., & Tillman, K. (2009). The Lived Experience of Nurses Working with Student Nurses in the Clinical Environment. The Qualitative Report, 14(2): 227-244.
- Jackson, J., Neighbors, M. (1988). A study of nurses' attitudes towards associate degree nursing students. Journal of Advanced Nursing, 13: 405–409.
- Kelly, C., 2007. Student's perceptions of effective clinical teaching revisited. Nurse
- Education Today, 27: 885-892.
- Koushali, A.N., Hajiamini, Z., and Ebadi, A. (2012). Comparison of nursing students' and clinical nurses' attitude toward the nursing profession. Iranian Journal of Nursing and Midwifery Research, 17(5): 375–380.
- Levett-Jones, T., Lathlean, J., Higgins, I., McMillan, M. (2009). Staff-student relationships and their impact on nursing students' belongingness and learning. Journal Of Advanced Nursing, 65 (2): 316–324.
- Li, M. K. (1997). Perceptions of effective clinical teaching behaviors in a hospital-based nurse training program. Journal of Advanced Nursing, 26(6): 1252-1261.
- Lo, R. (2002). Evaluation of a mentor-arranged clinical practice placement for student nurses. Collegian, 9(2): 27-32.
- Lofmark, A., & Wikblad, K. (2001). Issues and innovations in nursing education: Facilitating and obstructing factors for development of learning in clinical practice: A student perspective. Journal of Advanced Nursing, 3(1): 43-50.
- Nail, F.C., Singleton, E.K. (1983). Providing experiences for student nurses: perspectives for cooperating hospitals. The Journal of Nursing Administration, 18 (7): 20–26.
- Seigel, H., & Lucey, A. (1998). Arranging a clinical practicum in a health care facility. The Journal of Continuing Education in Nursing, 29(6): 253-256.
- Suen, L. K., & Chow, F. L. (2001). Issues and innovations in nursing education: Students' perceptions of the

effectiveness of mentors in an undergraduate nursing programme in Hong Kong. Journal of Advanced Nursing, 36(4): 505-511.

Webb, C., Shakespeare, P. (2008). Judgements about mentoring relationships in nurse education. Nurse Education Today, 28: 563–571.