

Znaczenie dzienniczka praktyk studenta pielęgniarstwa w edukacji klinicznej

The importance of booklet nursing student in clinical practice

Barbara Kegl, Metka Harih, Majda Pajnikihar, Jadranka Stričević, Mateja Lorber, Klavdija Čučec Trifković, Barbara Donik

University of Maribor, Faculty of Health Sciences, Institut of Nursing Care, Slovenia

AUTOR DO KORESPONDENCJI:

Barbara Kegl

Faculty of Health Sciences

Institut of Nursing Care

University of Maribor, Slovenia

E-mail: barbara.kegl@um.si

STRESZCZENIE

Znaczenie dzienniczka praktyk studenta pielęgniarstwa w edukacji klinicznej

Wstęp. Dzienniczek praktyk pozwala koordynatorowi praktyk na śledzenie postępów studenta w zakresie nabywania kompetencji we wszystkich dziedzinach pielęgniarstwa klinicznego podczas studiów, zaś studentowi służy jako przewodnik po praktykach klinicznych i ostatecznie pozwala na orientację w zdobytej przez siebie wiedzy i umiejętnościach. Kształcenie kliniczne jest procesem, które wspiera edukację studentów pielęgniarstwa w zdobywaniu odpowiednich umiejętności pozwalających na skuteczne, niezależne i odpowiedzialne działanie w tej dziedzinie. Wszystkie kompetencje, które student pielęgniarstwa zdobywa bazują na silnej integracji kształcenia teoretycznego i praktycznego.

Cel. Zbadanie opinii studentów na temat dzienniczka praktyk używanego podczas praktyk klinicznych.

Materiał i metoda. Badaniem objęto 30 studentów studiów zaocznych oraz 40 studentów studiów stacjonarnych II roku studiów pielęgniarstwa I stopnia w roku akademickim 2010/2011. Studenci odbywali praktyki w Klinice Pediatrii Uniwersyteckiego Centrum Medycznego w Mariborze. Badania miały charakter ilościowy z wykorzystaniem wywiadu. Zebrany materiał podano analizie statystycznej, do której zastosowano program SPSS 17.0.

Wyniki. Badania pokazały, że studenci są zadowoleni z dzienniczka praktyk, ponieważ daje zrozumiałe wskazówki do realizacji interwencji pielęgniarstwa oraz umożliwia samoocenę na koniec cyklu kształcenia praktycznego. W opinii studentów byłoby dobrze opracować jeden dobry dzienniczek praktyk dla praktyk odbywających się we wszystkich klinikach. Z drugiej strony, studenci widzieliby dzienniczek dostosowany do konkretnej dziedziny pielęgniarstwa.

Wnioski. Dzienniczek praktyk studenta pozwoli zarówno studentom, jak i koordynatorowi praktyk na pełne śledzenie rozwoju studenta podczas edukacji we wszystkich obszarach pielęgniarstwa klinicznego.

Słowa kluczowe: praktyka kliniczna, dzienniczek praktyk, student pielęgniarstwa, interwencje pielęgniarstwa

ABSTRACT

The importance of booklet nursing student in clinical practice

Aim. Purpose of this study was to determine student opinion about a booklet that is used in clinical practice. The booklet will allow to student coordinators of clinical practice full traceability of student activities in terms of monitoring their progress in professional competence acquisition in all clinical areas of nursing during their studies, while to the students it will serve as a guide for clinical practice and later for the knowledge they acquired.

Material and Methodology. The study included 30 part-time and 40 full-time students in the second year of the undergraduate study program in nursing care (first degree) in the academic year 2010/2011, who participated in clinical practice at the Pediatric Clinic of the University Medical Center Maribor. We used a quantitative research approach and the method of interview. The data were statistically analyzed using software SPSS 17.0.

Results. The results showed that students of nursing care are satisfied with a booklet of activities in nursing, since they represent an accurate and easy-to-understand guide to performing nursing interventions and also self-assessment at the end of clinical practice. Students are of the opinion that the main characteristic of a good guide book is usability in all areas of clinical practice; on the other hand, they want a guide book that would be more specific for individual clinical fields.

Conclusions. The booklet of nursing activities will allow both students and coordinator the complete controllability in terms of tracking professional advancement of a student during the studies in all clinical fields and at the end of studies will serve as proof of practical training of students at our faculty.

Key words: clinical practice, booklet of nursing activities, student of nursing care, nursing intervention

INTRODUCTION

Specificity of nursing requires a complex approach to its teaching and a combination of theory and practice with the possibility of combining cognitive, psychomotor and empathic skills of the student [1]. One important consequence of the Bologna process is a more thorough preparation of students for work in a clinical setting immediately after graduation. This also strengthens the role of the faculty staff - mentors in the framework of the education of future nurses [2].

Clinical training is a process that supports students of health care in their training and allows them to acquire the relevant skills, which will enable an effective, independent and responsible performance in the field. During clinical practice, students develop decision-making and negotiating abilities and the ability to work in a team, while also gaining skills, developing personal responsibility, considering contemporary approaches to health care, and developing critical thinking and assessment.

Training of nurses responsible for general nursing care comprises at least three years of study or 4600 hours of theoretical and clinical training. It is designed to combine theory with practice, exercises and analysis. The duration of the theoretical training represents at least a third, while the duration of clinical training represents at least one half of the minimal duration of training [3].

The coordinator of clinical practice expects that each student of nursing care will be carrying out individual nursing interventions from a defined set in accordance with the established norms by the end of his or her undergraduate level training. With a well-defined required level of obligation to perform individual nursing interventions and with a known set of required nursing interventions, it is possible to track the professional growth of student and his acquisition of professional nursing skills.

At the Faculty of Health Sciences, University of Maribor, we keep to the principle that the educational process is focused on the student. The process puts him in an active role and helps him to gradually start making his own decisions about his learning activities. To this end, a working group of the faculty professors prepared a booklet about nursing activities with a set of nursing interventions pertaining to individual basic living activities. Students will use this booklet for all three years of study and for all clinical areas. It has been designed with the aim of making the training of students transparent in the faculty's databases and finding new opportunities to improve work.

DATA AND METHODS

Aim of the survey

The survey was conducted to determine the opinion of students regarding the new booklet on nursing activities and its advantages and disadvantages, problems in its application and its role.

Purpose of Research

The key objectives of the survey were to examine the literature in the field of monitoring students in clinical prac-

tice during their studies, to determine students' opinion on the booklet of nursing care and to provide recommendations and suggestions for improving this booklet.

Hypotheses

- H1: Students think it's reasonable that one booklet is intended for use in all areas of clinical practice during their studies.
- H2: Students feel that the book is not specific for use in pediatrics.
- H3: Full time students are of the opinion that it would be reasonable to align required level of knowledge of advanced nursing interventions in the booklet with the capabilities of students according to their academic year.

Description of the research sample and the environment

The survey involved full and part-time sophomore students of the Nursing Care (first degree) academic program in the academic year 2010/2011. We used a random, ad hoc sample. The survey was conducted at the end of clinical practice at the Pediatric Clinic of UKC Maribor from February to March 2011. The survey included 70 (37.4%) second-year students, divided into 40 (36.7%) full-time and 30 (38.5%) part-time students.

Research Methodology

We used the quantitative approach, namely the method of interview. Data was collected using a structured questionnaire, which was designed exclusively for the purpose of this survey. There were 22 statements, which were divided into three thematic sections: the advantages/disadvantages of the booklet of nursing care (8 statements), problems in the booklet's application (6 statements) and the booklet's role in the student's self-assessment (8 statements).

To determine students' level of agreement with individual statements we used the Likert scale of 1 to 5, where 1 means that the student completely disagrees with the statement, and 5 that the student completely agrees.

Collection and processing of statistical data

The collection of data was completely anonymous. Answers to questions in the survey questionnaire have been quantified. The data obtained from questionnaires were analyzed using statistical software SPSS 17.0. The hypotheses were tested with statistical tests. We used basic statistical parameters (Descriptives), one-way ANOVA and the Pearson correlation coefficient.

One-factor analysis of variance (ANOVA) was used to determine differences between full-time and part-time sophomore students regarding their opinion on the booklet on nursing activities. Statistical significance was tested at 5 % risk ($p = 0.05$). The value of the Cronbach coefficient was 0.919. Since its value was greater than 0.85, we conclude that the grading scale is sufficiently reliable.

RESULTS

The results in table 1 show that there are statistically highly significant differences between full-time and half-time sophomore students in almost all statements regarding the booklet's advantages and disadvantages. The statement "During clinical practice I have learnt to perform individual interventions and procedures" is the only statement where there is no statistically significant difference between full-time and half-time students ($F=0,525$; $p=0,471$). Both full-time and half-time students are of the opinion that they have learnt to perform individual interventions during their clinical practice (full-time students average= $4,00\pm1,062$; half-time students average= $3,80\pm1,243$; $p=0,471$).

■ Tab. 1. Differences between full-time and part-time students regarding the booklet's advantages and disadvantages

Statements in the first set	Studies	Average/Standard deviation	95% average confidence interval		F	Sig. (p)
			Low value	High value		
During clinical practice I have learnt to perform individual interventions and procedures.	Full-time	4,00/1,062	3,66	4,34	,525	,471
	Half-time	3,80/1,243	3,34	4,26		
	Both	3,91/1,139	3,64	4,19		
The booklet has allowed me to gain additional knowledge of those interventions where my knowledge was not complete.	Full-time	2,73/1,176	2,35	3,10	15,175	,000
	Half-time	3,80/1,095	3,39	4,21		
	Both	3,19/1,254	2,89	3,48		
The booklet has allowed me to monitor the individual interventions that I performed.	Full-time	3,50/1,109	3,15	3,85	7,899	,006
	Half-time	4,23/1,040	3,84	4,62		
	Both	3,81/1,133	3,54	4,08		
The booklet served as a guide to the clinical practice.	Full-time	2,73/1,219	2,34	3,11	19,827	,000
	Half-time	3,93/1,980	3,57	4,30		
	Both	3,24/1,268	2,94	3,55		
The booklet helped me to better assess my knowledge.	Full-time	2,83/1,299	2,41	3,24	19,611	,000
	Half-time	4,07/1,944	3,71	4,42		
	Both	3,36/1,308	3,05	3,67		
The booklet helped me to monitor / perform interventions I have not had a possibility to see or perform before the clinical practice.	Full-time	2,53/1,198	2,14	2,91	27,867	,000
	Half-time	3,97/1,033	3,58	4,35		
	Both	3,14/1,333	2,83	3,46		
The booklet taught me to time-manage performing individual nursing interventions in a clinical setting.	Full-time	2,50/1,177	2,12	2,88	24,336	,000
	Half-time	3,87/1,106	3,45	4,28		
	Both	3,09/1,327	2,77	3,40		
The booklet allowed me to use my knowledge in practice.	Full-time	2,68/1,228	2,28	3,07	17,585	,000
	Half-time	3,83/1,020	3,45	4,21		
	Both	3,17/1,274	2,87	3,48		

The results in table 2 show that there are statistically highly significant differences between full-time and half-time sophomore students in four out of six statements regarding problems in the booklet's application. There is a statistically significant difference between full-time and half-time sophomore students regarding the statement "I have had no problems using the booklet" ($F=22,693$;

$p=0,000$). Statistically significant differences in opinion between full-time and half-time students are evident with the statements "The instructions for use were clear" ($F=11,930$; $p=0,001$), "It seems sensible that one booklet is meant to be used in all the fields of clinical practice" ($F=10,570$; $p=0,002$) and "The booklet is specifically meant to be used in the pediatric field" ($F=18,776$; $p=0,000$).

■ Tab. 2. Differences between full-time and part-time students regarding problems in the booklet's application

Statements in the second set	Studies	Average/Standard deviation	95% average confidence interval		F	Sig. (p)
			Low value	High value		
I have had no problems using the booklet.	Full-time	2,53/1,176	2,15	2,90	22,639	,000
	Half-time	3,83/1,085	3,43	4,24		
	Both	3,09/1,305	2,77	3,40		
The instructions for use were clear.	Full-time	3,08/1,269	2,67	3,48	11,930	,001
	Half-time	4,03/1,964	3,67	4,39		
	Both	3,49/1,236	3,19	3,78		
I was unable to perform certain interventions in the booklet, specific to pediatric nursing.	Full-time	4,05/1,061	3,71	4,39	,763	,386
	Half-time	4,27/1,980	3,90	4,63		
	Both	4,14/1,026	3,90	4,39		
The number of students in the group prevented us from performing individual nursing interventions more than once.	Full-time	3,48/1,432	3,02	3,93	1,977	,164
	Half-time	3,93/1,230	3,47	4,39		
	Both	3,67/1,359	3,35	4,00		
It seems sensible that one booklet is meant to be used in all the fields of clinical practice.	Full-time	2,68/1,492	2,20	3,15	10,570	,002
	Half-time	3,80/1,349	3,30	4,30		
	Both	3,16/1,529	2,79	3,52		
The booklet is specifically meant to be used in the pediatric field.	Full-time	2,08/1,248	1,68	2,47	18,776	,000
	Half-time	3,47/1,432	2,93	4,00		
	Both	2,67/1,491	2,32	3,03		

■ Tab. 3. Differences between full-time and part-time students regarding the booklet's role in the student's self-assessment

Statements in the third set	Studies	Average/Standard deviation	95% average confidence interval		F	Sig. (p)
			Low value	High value		
The booklet allowed me to identify mistakes in performing individual nursing interventions in the pediatric field.	Full-time	2,75/1,104	2,40	3,10	14,555	,000
	Half-time	3,80/1,186	3,36	4,24		
	Both	3,20/1,246	2,90	3,50		
The booklet allowed me to learn about and perform individual nursing interventions in the pediatric field.	Full-time	2,70/1,324	2,28	3,12	26,848	,000
	Half-time	4,10/1,759	3,82	4,38		
	Both	3,30/1,312	2,99	3,61		
The booklet enabled me to self-evaluate at the end of clinical practice in the pediatric field.	Full-time	3,25/1,080	2,90	3,60	7,853	,007
	Half-time	4,00/1,145	3,57	4,43		
	Both	3,57/1,162	3,29	3,85		
After the end of clinical practice in the pediatric field, I have more self-confidence.	Full-time	3,18/1,152	2,81	3,54	3,211	,078
	Half-time	3,70/1,291	3,22	4,18		
	Both	3,40/1,232	3,11	3,69		

The booklet allowed me to learn about / perform individual nursing interventions that I have never performed before.	Full-time	2,83/1,394	2,38	3,27	10,789	,002
	Half-time	3,87/1,196	3,42	4,31		
	Both	3,27/1,403	2,94	3,61		
A good booklet would be structured according to the years of study. This would allow to capture more precisely also specific nursing interventions of different clinical fields (eg. pediatric, gynecological ...).	Full-time	4,53/905	4,24	4,81	,152	,698
	Half-time	4,60/621	4,37	4,83		
	Both	4,56/792	4,37	4,75		
It would be sensible to align the demanded level of knowledge of the more demanding nursing interventions with the student's capabilities according to his year of studies.	Full-time	4,45/986	4,13	4,77	,125	,725
	Half-time	4,37/964	4,01	4,73		
	Both	4,41/970	4,18	4,65		
It would be reasonable to include the degree/level of knowledge of key nursing interventions and the possibility of multiple performance of one and the same nursing interventions	Full-time	4,15/1,210	3,76	4,54	1,163	,285
	Half-time	4,43/898	4,10	4,77		
	Both	4,27/1,089	4,01	4,53		

The results in table 3 show that there are statistically highly significant differences between full-time and half-time sophomore students in four out of eight statements regarding the booklet's role in the student's self-assessment. There is a statistically significant difference in the opinion of full-time and half-time students regarding the statement "The booklet allowed me to identify mistakes in performing individual nursing interventions in the pediatric field." ($F=14,555$; $p=0,000$). A statistically significant difference in the opinion of full-time and half-time students is evident also regarding statements "The booklet allowed me to learn about and perform individual nursing interventions in the pediatric field" ($F=26,848$; $p=0,000$), "The booklet enabled me to self-evaluate at the end of clinical practice in the pediatric field" ($F=7,853$; $p=0,007$) and "The booklet allowed me to learn about / perform individual nursing interventions that I have never performed before" ($F=10,789$; $p=0,002$).

DISCUSSION

Our main goal at the Faculty of Health Sciences, University of Maribor is to have high-quality educational programs, which will produce competent graduates with a broad spectrum of knowledge. [4] also argue that the Bologna process is a way to a goal and its result should be high-quality education of nursing care students, who will in turn display excellence in the practice of nursing care.

All surveyed students agree that using this booklet, they have learnt to perform nursing interventions during clinical practice, although full-time students were somewhat

less satisfied, which may be associated with their high expectations. The difference is in favor of those part-time students who have completed secondary medical school and already have work experience. [5] indicate in their survey that 92.5 % of students agree that they obtain all the necessary knowledge and skills to work with patients in a clinical setting during their education.

During clinical practice students are faced with real situations in a clinical setting, which allows them to prepare for their new role as nurses [6]. If the booklet helps to structure practice well, that can help bridge the gap between theory and practice [6, 7, 8, 9].

There are also differences between full-time and part-time students regarding the use of the booklet. Full-time students state that they had more difficulties in the use of the booklet and that instructions were not clearly specified, or rather that they did not understand them. Part-time students find it important that one booklet is intended for use in all fields of clinical practice, even in the pediatrics, because at the end of the studies the booklet will reflect their knowledge and experience.

The first hypothesis was confirmed, since the data indicates that students find it reasonable to use one booklet of nursing care in all fields of clinical practice. At the same time we can confirm the second hypothesis because the students are on average of the opinion that the booklet is not meant only for use in pediatrics. Nevertheless, a statistically significant difference is evident between full-time students, who feel that the booklet is non-specific, and part-time students, who are more or less vague on the argument that the booklet is specific to the pediatric field.

The opinions of full-time and half-time students on the role of the booklet in student self-evaluation are divided. Most of the half-time students already have previous experience with performing nursing interventions in practice as opposed to full-time students, therefore they find it easier to identify their own mistakes in performing nursing interventions. At the same time, they profit from the booklet more than full-time students in terms of learning or performing specific nursing interventions and are thereby able to pass their self-assessment at the end of clinical practice in pediatrics. Full-time and part-time students are of the opinion that it a good booklet would have content structured by year of studies, because of which it would more accurately capture specific nursing interventions in different clinical fields. Both groups agree that the key to the book is to accurately define the level of complexity of knowledge in relation to the ability of students in each study year and the possibility of multiple recurrence of nursing interventions. Since there is no statistically significant difference between full-time and half-time students regarding the statement, we can reject the third hypothesis.

CONCLUSION

Future graduates in nursing can obtain all the necessary skills only in an educational environment that features a close integration of theoretical and practical training in real, i.e. clinical settings [10].

This study has shown that the booklet is a helpful tool for students. With its help, students will be clearly aware of their obligations and opportunities to gain new knowledge in clinical settings. With a well-defined required level of obligation to perform individual nursing interventions and with a list of care interventions, each student will be able to track their progress in acquiring the skills of their profession. At the same time it will allow the coordinator of clinical practice full traceability in terms of the monitoring of the student's progress.

REFERENCES

1. Morgan R. Using clinical skills laboratories to promote theory - practice integration during first practice placement: an Irish perspective. *J Clin Nurs*. 2006; 15(2): 155-61.
2. Skela Savič B, Mežik Veber M, Romih K, et al. Set of interventions in health care for clinical training - a guide for students. College of Nursing, Jesenice; 2009, 15-6.
3. Kristl J, Jurišević M, Šoukal Ribičič M et al. Guidelines for practical training at the University. University of Ljubljana: Ljubljana; 2007, 8-9.
4. Mežik Veber M, Kaučič BM, Kastelic M et al. Student satisfaction with the concept of integrated learning in the office of nursing at the College of Nursing. [v:] Majcen Dvoršak S, eds. Nurses and midwives - Knowledge is our strength. 7th Congress of Nursing and Midwifery Slovenia. Faculty Nursing and Midwifery Slovenia - Association of professional associations of nurses, midwives and health technicians Slovenia: Ljubljana; 2009.
5. Edwards PA, Davis CR. Internationally Educated Nurses Perceptions of Their Clinical Competence. *J Contin Educ Nurs*. 2006; 37(6): 265-9.
6. Heslop L, Mcmyre M, Ives G. Undergraduate student nurses' expectations and their self-reported preparedness for the graduate year role. *J Adv Nurs*. 2001; 35(5): 626-34.
7. Chapman R, Orb A. The nursing student's lived experience of clinical practice. *Aust J Adv Nurs*. 2000; 5(2): 9.
8. Andrews M, Roberts D. Supporting student nurses learning in and through clinical practice: the role of the clinical guide. *Nurse Educ Today*. 2003; 23(7): 474-81.
9. Shariff F, Masoumi SA. Qualitative study nursing student experiences of clinical practice. *Brit Med J Nurs*. 2005; 9(4): 1-7.
10. Može M. Obtaining national vocational qualifications in the field of nursing. *Obzor Zdr N*. 2005; 39(1): 39-46.

Praca przyjęta do druku: 10.07.2012

Praca zaakceptowana do druku: 6.12.2012

