

Measuring and Maintaining an Optimal Clinical Learning Environment

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Clinical education is a vital aspect of the under graduate nursing curriculum. In the clinical area students learn by seeing, doing and applying the principles learnt in theory. It's a way students go from the phase of novice to expert. Student has the opportunity to develop some of the crucial skills during their clinical practice. Actual learning takes place in the clinical area and it becomes constructive when a productive learning environment is provided. Chan opines that the clinical placements provide student nurses with the opportunity to combine cognitive, psychomotor and affective and problem-solving skills developing competencies in the application of knowledge, skills, attitudes and values in clinical situations. However, this is possible only when they acquire good clinical learning environment (CLE).

Concept of Clinical Learning Environment (CLE)

The clinical environment encompasses all that surrounds the student nurse, including the clinical settings, the equipment, the staff, the patients, the nurse mentor, and the nurse teacher. Hart & Rotem define CLE as "the attributes of the clinical work setting which nurses perceive to influence their professional development". Similarly, Dunn & Hansford recognise the CLE "as an interactive network of forces within the clinical setting which influence the students' clinical learning outcomes". It is during such clinical placements that students develop their nursing knowledge, skills and attitudes. Clinical area may be considered as a clinical classroom where learning takes place in a complex social context through unplanned activities with patients and other health care providers. CLE also provides them an opportunity for professional socialisation. All in all, Chan considers CLE as a multidisciplinary entity which has a direct impact on student's clinical placement outcomes.

Stressors in the Clinical Area

Clinical practice placements are the vital aspect of nursing education but a student may feel anxious

and vulnerable in the clinical area especially at the beginning of their nursing career. Many research studies have confirmed clinical placements as the anxiety provoking and stressful experience among student nurses. In a qualitative study by Sharif & Masoumi initial clinical experience was found as the most anxiety producing part of student clinical experience especially among Second year students when compared to the Fourth years. Similarly, a descriptive correlation study by Beck & Srivastava found 94 Second, Third and Fourth year nursing students reporting clinical experience as the most stressful part of the nursing programme. Literature suggests anxiety regarding clinical placement is not limited to pre-registration student nurses, according to McCrea et al, and Begley anxiety, stress and role conflict related to loss of position were also seen among post-registration midwifery students.

Stress during clinical placements may come from various sources. According to Neary three main concerns for students are fear of doing harm to patients, the sense of not belonging to the nursing team and of not being fully competent on registration. Sharif & Masoumi report that fear of making mistake (fear of failure), lack of clinical experience, unfamiliar areas, difficult patients and being evaluated by faculty members are the anxiety-producing situations in the initial clinical experience. Other stressful situations may be excessive responsibility on the unit/ward, the theory-practice gap, ineffective teaching and learning programmes, poor managerial governance of the service, detachment of professional nurses from their teaching role, poor relationships among staff, over-reliance on the medical model of care and patient neglect.

Stress among student nurses can be measured using the Beck & Srivastava Stress Inventory, the General Health Questionnaire and the Nursing Stress Scale.

Studies have also observed that despite student anxiety a positive clinical learning environment promotes learning. Co-operation between school/college of nursing and clinical staff, bridging the theory-practice gap, inclusion of students as part of the nursing team, good relationship between staff and students are all part of promoting positive learning environment.

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Measuring the Clinical Learning Environment

Several standardised tools are available to assess the CLE. Two such tools used in the recent years are the Clinical Learning Environment Scale by Dunn & Burnett a 23-item instrument with five subscales: 'Staff-student relationships', 'Preceptor's commitment', 'Patient relationships', 'Student satisfaction' and 'Hierarchy and ritual'. And, the Clinical Learning Environment Inventory by Chan which has 42 items to measure individualisation, innovation, involvement, personalisation, task orientation and satisfaction.

These tools may be used both at the beginning and the end of every clinical placement or as a summative evaluation at the end of the academic year. Use of these tools prior to student placement provides information on what students expect in the clinical area and assessment at the end of placement informs their satisfaction with the placement. Based on the outcome, the college and nurse educators can plan future placements in the area.

Promoting Positive Clinical Learning Environment

Keeping the above two scales as a yardstick the following aspects need to be considered while planning clinical learning for students.

Induction Day

Induction day is the first day of a student's placement in an area. In order to reduce stress and anxiety among students, it is important for a person responsible to orient students to the new area. This can be carried out with a combination of talks on the service, policies and procedures, tour of the hospital and meeting the key personnel in the service area. Induction day helps students to get oriented to the clinical placement area in a broader way and gives them an idea on the service provided. Every time a student goes to a new area, an induction/orientation to that area is essential.

Preceptor

A preceptor is a registered nurse/midwife who has been specially prepared to guide and direct student learning during clinical placement. Every staff nurse has a responsibility to teach students in the clinical area; however if a student is assigned to a named staff nurse who would act as a preceptor then teaching-learning becomes focused and clinically oriented. To be a preceptor, a registered nurse needs to undergo a preceptorship training programme which can be delivered by the attached university/college. This training familiarises the reg-

istered nurse to the nurse education programme and equips him/her to guide students on practice placements. Precepting students can be an added responsibility to nurses' daily routine however with proper training and guidelines from the college/university, staff nurses can be made a part of student education. It also enhances student learning in the clinical area. To make this happen, there is a need for commitment from both the college/university and the service area.

Staff-Student Relationship

Assigning a preceptor is not the end of the story; instead the relationship between staff and student actually informs its outcome. Good learning takes place only when there is a good relationship between the staff nurse and student. If there are personality clashes then there is a possibility of poor learning. Therefore, it is important to train staff nurses to be a preceptor and also where possible, at a time assign only one student to a preceptor. These clashes can also be minimised by having frequent meetings between the preceptors and the nurse educators.

Nursing Practice

A clear nursing practice in the clinical area is important to promote positive learning environment. Nursing practice includes method of delivery of care, nursing care plans and any issues with nursing practice. Students need to be aware of these to practice effectively in the placement area. In order to promote proper nursing practice, it is important to have a structured method of delivery of care and nursing care plans based on a theoretical model for example, Self care theory or Tidal model. This will help students to apply the nursing theories in practice and understand the guidelines of individualised care plan and treatment.

Role of Clinical Instructor

Clinical instructors have a major role in supporting, guiding and teaching new skills to students in the clinical area. Clinical instructors contribute to students learning through demonstrating certain skills in the clinical area to make it more real. For example, giving an intra-muscular (IM) injection or starting an intravenous (IV) infusion may be best demonstrated on the ward to clearly teach students on how to interact with patients before, during and after the procedure and to highlight the infection control aspects associated with the procedure when done in a clinical setting. It also informs students to make use of the available resources within the clinical area. Students also get a first hand experience of doing the procedure on living individuals espe-

cially when the clinical instructor is guiding and supporting them. Some of the other teaching skills may be adopted in a clinical area are questioning, role playing and interactive discussion.

Student Satisfaction

Student placement has an impact on every one in the clinical area. Therefore, it is important to know if students are benefiting from the placements and are they satisfied. Student satisfaction can be promoted through continuous assessment and support in the clinical area, which may be provided by a member of teaching team or the nurse manager in the ward. Some of the resources also may help students learning such as having a library in the hospital or/and books and journal articles made available on the ward.

Conclusion

Clinical education is an integral part of nursing curriculum and it needs nourishment in order for students to develop competencies in knowledge, skill and attitude on nursing. Clinical experience marks the beginning of nursing career and the student nurse carries that experience throughout his/her life as a nurse. Therefore, it is essential to provide a positive learning environment.

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इस मासिक पत्रिका में प्रकाशन के लिए हिन्दी रचनाओं का स्वागत है। नर्सिंग व्यवसाय, स्वास्थ्य और सकारात्मक सोच से परिपूर्ण रचनाओं को प्राथमिकता दी जाएगी। इन विषयों पर आलेख, तथ्यात्मक टिप्पणियां, लघुकथा, कविता, संस्मरण आदि भेजे जा सकते हैं — संपादक