

Factors Affecting on Clinical Practice Performance among Undergraduate Nursing Students

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ABSTRACT: Nursing education prepares the students from various societies and convictions to be able in rendering professional nursing care to people of all ages, in all stages of health and illness. Nursing students are required to acquire and learn relevant skills and knowledge in the medical, behavioral and biological sciences. The present study planned for distinguishing the variables influencing clinical practice among undergraduate nursing students. **METHODS** -A cross-sectional research design was used to conduct the study. The study included sampling of 275 nursing students at Krishna institute of medical sciences deemed to be university. Self-administered questionnaires were utilized as a tool. Data was collected over a time of 3 months. The data were coded. Analysis was done by SPSS software version 20 for windows. **Results-** A total of 275 undergraduate nursing students majority were 234 (85.09%) while male were 41 (14.90%). The most detailed factor that improved clinical practice was successful supervision and evaluation as reported by 42.3% of members. The reported barriers incorporate students factors such as, absence of self-assurance and non-appearance, college factors for example inappropriate supervision and poor planning of clinical teachers. Anxiety among the undergraduate nursing students was identified with dread of committing errors (47.9%) and absence of competency (31.2%). There was significant association between Barriers of Effective Clinical Practice and Gender, Age. We found a huge relationship between barrier and gender .More male nursing students (62.1%) essentially revealed unsupportive environment as a barrier than female (35.6%). Similarly, period of members didn't have significant association with successful clinical practice. Deficiency of staff in the hospital influenced clinical supervision as reported by 89.6% of the students. Majority of nursing students (84.4%) agreed that parent's monetary status influenced clinical practice. Absence of cash made failure bear the cost of learning materials and other individual needs. **Conclusion** - Deficient supervision by clinical educators, absence of resources, quality of practical appraisal in clinical region, and anxiety were a portion of the elements that barriers for successful clinical learning. Student's readinesses, competency of the clinical of teacher, and perspectives of staff towards students in clinical area have significance performance in clinical practice. Contemplating these outcomes, we propose offering preclinical orientation to the students and conveying and explaining clinical learning objectives to Students before reporting to clinical.

Keywords: Factors, Clinical Practice, Performance, Nursing Students.

I. INTRODUCTION

Nursing education prepares the students from various societies and convictions to be able in rendering professional nursing care to people of all ages, in all stages of health and illness. Nursing students are required to acquire and learn relevant skills and knowledge in the medical, behavioral and biological sciences. Nurse teachers have faced the need to shuffle the jobs of educating, organization, look into and clinical help for undergraduate students. Nursing undergraduate students inside the Higher Education Institutes require more than the theoretical classroom teaching.

Nurse educators have a job past this in urging students to connect theory with clinical, and practice. Therein lays a test for nurse educators to guarantee they stay in the clinical setting and keep on giving training and backing, which is immovably grounded in both practice and theory [1]. Each student learns in a different manner and at their own pace. There may be sure factors, which may advance or obstruct their learning capacities and experience. Thus, in order to facilitate learning it is paramount that these factors must be identified and accorded due importance. A caring, supportive learning condition changes faculty- student relationship into a community association that advances proficient socialization and strengthening [2]. A qualitative study found that learning environment, educational behavior of instructors and individual factors of students influence the learning among nursing students [3]. Similarly, it was reported from a study from Kenya that apart from teacher's characteristics such as professional qualifications, availability of physical facilities, the student personnel management services, and provision of teaching and learning material another important factor which influences the performance of student in a positive manner is instructional supervision by head educator [4]. Studies have likewise detailed negative elements which have adverse influence on the academic and learning performance of nursing students. The important factors identified are bias in selection criterion, poor infrastructure, lack of technology, communication barrier, lack of motivation, and inadequate learning opportunities [5]. Gender nationality, cooperation in co-curricular exercises and enthusiasm for seeking after higher studies were distinguished as components which impact the scholarly performance of students [6]. A cross sectional study found that constrained assessment time, unseemly preparing in labs and emergency clinic, lacking English language instructional class, inaccessibility of diversion offices and poor infrastructure as the learning barriers [7]. There is an expanded call for improving the environment where nursing students become familiar with the clinical aptitudes, particularly in poor resource settings. Clinical posting where students learn clinical practice ought to permit students to gain nursing aptitudes and clinical thinking and create as expert. In regions where simulation learning is constrained or not accessible by any stretch of the imagination, learning happens in the genuine condition [8]. Despite the fact that nursing instruction is a blend of theoretical and practical learning encounters that empower nursing students to procure the information, abilities, and mentalities for giving nursing care [9], globally clinical training of nursing students is viewed as the premise of nursing practice. Nursing students should be upheld and guided so they can get mindful, responsible, and autonomous experts who can work inside the extent of expert practice [10]. Clinical practice gives chance to students to apply the theoretical knowledge into real situation [11, 12]. Clinical arrangements empower nursing students to increase fundamental aptitudes and give safe and quality nursing care through genuine practice [13,14]. Over the span of clinical practice, students apply their theoretical knowledge in a genuine situation, create psychomotor abilities, and watch and adjust to the expert job. The clinical condition should to be carefully chosen, acknowledged by nurse tutors, and prearranged to be equipped for changing nursing students into skilled nursing practitioners[15,16]; this is dependent on factors, for example, as curriculum design, cost effectiveness, and relationship with explicit health facilities [17].

II METHODS

Study Design. -cross-sectional research design was used to conduct the study. The study included sampling of nursing students.

Study Setting. Study was conducted at constitute unit of Krishna institute of medical sciences deemed to be university.

Study size.-The number of study participants were 275.

Data Collection tool. Self-administered questionnaires was developed by researchers, the tool includes on sociodemographic variables and factors influencing clinical practice. Data was collected over a period of 3 months.

Data Analysis. The data were coded. Descriptive analysis was done. Chi-square was done to test the association between variables. Analysis was done by SPSS software version 20 for windows.

Ethical considerations-Ethical clearance obtained from institutional ethics committee from Krishna institute of medical sciences deemed to be university. The information provided by the participants through questionnaires was

kept confidential. Informed consent is a written document which entails all the information related to the purpose of the study, data collection and participants' role in the study, and ensures that the participants have understood this information and are capable of making informed decisions and voluntarily consent to participate in the study.

III. RESULTS

Sociodemographic Characteristics of the Study Participants. A total of 275 undergraduate nursing students from Krishna institute of nursing sciences. The mean age was 20.3 and the middle age of the undergraduate nursing students was 21 years and the female undergraduate nursing students were 234 (85.09%) while male were 41 (14.90%).

Undergraduate nursing students Factors Affecting Performance in Clinical Practice. Greater part of the nursing undergraduate nursing students (84.4%) concurred that clinical position offers undergraduate nursing student's sufficient open door for clinical learning. The most reported factor that improved clinical practice was successful supervision and evaluation as reported by 42.3% of members. Existence of barriers to effective clinical learning was reported by 74.4% of the participants. The reported barriers include student factors such as, absence of self-assurance and non-appearance, college factors for example inappropriate supervision and poor planning of clinical teachers. The most reported reason for poor clinical practice was poor correspondence between hospital staff and undergraduate nursing students (49.0%) Majority(60%) of undergraduate nursing students revealed that clinical posting didn't give them satisfactory opportunity to powerful clinical learning and they referenced deficiency of mentors in clinical region as the fundamental explanations behind insufficient clinical learning (60%) followed by learning resources (26.7%) and lacking supervision (13.3%). The most reported barriers preventing effective performance in clinical practice were unsupportive condition because of deficiency of staff in the clinical, absence of clinical teachers, high patients loads for staff in the ward 34 (45.9%) and anxiety 27(36.5%) among undergraduate nursing students.

Reactions of Nursing Students on Anxiety as a Factor Affecting Negatively Clinical Practice. Anxiety among the undergraduate nursing students was identified with dread of committing errors (47.9%) and absence of competency (31.2%). The circumstances that generally caused anxiety were clinical appraisal during clinical assessments (38.5%) and excessively severe supervision (26%). Measures proposed by undergraduate nursing students that could lessen nervousness were friendly clinical educating, sufficient clinical supervision (44.8%), reasonable of clinical task, and continuous clinical.

Association between Barriers of Effective Clinical Practice and Gender, Age.

There was significant association between Barriers of Effective Clinical Practice and Gender, Age. We found a huge relationship between barrier and gender. More male nursing students (62.1%) essentially revealed unsupportive environment as a barrier than female (35.6%). Furthermore, anxiety was progressively basic in female nursing students (48.9%) contrasted with male nursing students (17.2%). age didn't have significant association with clinical practice ($p=0.606$).

Hospital Factors Affecting Performance in Clinical Practice by Students. Inadequacy of staff in the hospital affected clinical supervision as revealed by 89.6% of the students. Other than 22.9% of nursing students announced absence of equipment for performing procedures inside the hospital and absence of well- equipped skills laboratories as an important factors influencing clinical practice. What's more, 21.9% of nursing students reported lack of teaching/learning resources, for example, equipment's for nursing care systems. This implies here and there students performed procedure by easy route in opposition to the theory learned in class.

Effect of Student's Social-Economic Background on Clinical Practices. Social and monetary elements of nursing students were accounted for to influence clinical practice and make mental issues. The social atmosphere of the college was significant in empowering students' clinical learning. Majority of nursing students (84.4%) agreed that parent's monetary status influenced clinical practice. Absence of cash made failure bear the cost of learning materials and other individual needs. A positive college social environment improved clinical practice as reported by 85.4% of respondents while 20.5% reported good interpersonal and collaboration among students supported self-confidence.

Ways of Improving Clinical Practical Learning.

The methodologies of improving clinical practice recommended by students incorporate continuous utilization of abilities skills laboratory (62.5%), participation in nursing conferences in the hospital (18.7%), utilization of simulation (12.5%), and watching nursing procedures videos recordings to acquire skills (6.5%). The most referenced methodologies by nurse tutors were recruitment of adequate number of nurse tutors that coordinated the quantity of students (51.8%) and accessibility of modern skills laboratory for demonstration (42.4%).

Discussion The current study aimed at identifying the factors affecting clinical practice among nursing students. We found that there do exist a few facilitators and boundaries of successful in clinical practice. The encouraging components are powerful supervision, sufficient number of tutors, and clinical educators. Barriers to effective clinical practice included absence of self-confidence, non-appearance, inadequate supervision, absence of resources, and anxiety. The finding demonstrated that powerful supervision which is a facilitator of compelling clinical practice is additionally reported by previous studies [17]. Hand and Schalge [18, 19] reported that effective clinical practice advanced learning and helped students to accomplish learning results and capabilities through the decent variety of learning opportunities. The number of tutors and clinical educators that coordinate with student numbers could encourage powerful strong supervision. Anyway it isn't the situation in resource poor settings where there is a crisis of human resource for health, both in number and in inspiration. Presence of barriers to effective clinical practice, for example, insufficient supervision, absenteeism, self-confidence absence of resources, and tension is accounted for additionally in different studies, Awuah-Peasah [20].

This connected to late reporting time and non-appearance from clinical leads to poor performance showing in clinical practice; an excessive number of patients may exhaustion and abscondment in clinical areas. Absence of basic equipment and supplies for nursing care causes students ignores clinical practice. The student felt that clinical practice give better chances and great setting to apply theory to practice. Anxiety was accounted for by majority of the students as one of the elements that influence the performance in clinical practice. The finding identify with another study which found that tension added to poor clinical practice and influenced up to 94% female students in the start of arrangements [21]. The experience of nervousness was found to influence more female students than male. Explanations behind nervousness were distinguished as a committing errors and absence of experience. Effective clinical supervision and giving proper patient task to students and case presentations of clinical cases could assist with diminishing anxiety. In the clinical settings, deficiency of staff, absence of learning materials, and overcrowding of patients were significant obstructions to clinical practice. In certain hospitals students could be utilized to cover shortage of staff as opposed to meeting the learning results. This finding is like an investigation by Killam and Carter [22] which referred to constrained resources and shortage of staff which lead to nursing students covering the deficiency rather to learning since they were assigned to work like qualified nurses. In this manner the hospitals must guarantee satisfactory staffing and resources to help quality clinical training. The impression of facilitators and barriers to clinical practice may identify with how well arranged students in the aptitudes skills laboratory and direction before position.

Conclusion - The study uncovered a few considers that impact execution clinical practice among nursing students. Three elements were studied, i.e., students based factors; factors; hospital based elements; and social-monetary foundation of students. Student's elements appeared to assume a greater job in fruitful clinical learning followed by hospital based factors. Deficient supervision by clinical educators, absence of resources, quality of practical appraisal in clinical region, and anxiety were a portion of the elements that hindered successful clinical learning. Student's readiness, competency of the clinical of teacher, and perspectives of staff towards students in clinical area have significance performance in clinical practice. Contemplating these outcomes, we propose offering preclinical orientation to the students and conveying and explaining clinical learning objectives to Students before reporting to clinicals. Moreover, supervision of students in clinical practice by nurse tutors is basic. Furthermore, this can

strengthen clinical teacher nursing students' relationship and create and additionally build confidence and capability among nursing students.

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