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NURSING STUDENTS' SATISFACTION DURING CLINICAL PRACTICE

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Abstract

Introduction: More than half of curricula of nursing students is based in clinical practice. The aim of this study is to measure nursing student satisfaction during the period of clinical practice.

Methods: A self-report test-retest questionnaire was administered to a convenience sample of 303 students enrolled in Bachelor study in Nursing Program in Shkodra University. An across-sectional study was designed; using a self-administered nineteen-item online questionnaire for the students. This study was conducted during November -January 2023. We have used the standardized questionnaires for measuring student satisfaction in clinical practice. Data were analyzed using Microsoft Office Excel 2010.

Results: The sample consists of 303 students (18 males and 285 females) who were asked about their concerns during the clinical practice period. 67 of students were in first year, 114 in second year, 122 in third year of study program.

Conclusions: Satisfactory levels in clinical practice were reported by students. In the future we have further challenges to improve the relationship between nursing teachers and students.

Keywords: assessment, clinical practice, satisfaction, student.

Introduction

Students are present in clinical settings for a relatively short time, usually 2-4 weeks. They are essentially unknown to the nursing staff in their locations and although they participate in patient care, they are not necessarily seen as true members of the health care team. This problem is compounded by students who carry out their internship in several different locations, who constantly need to reorient themselves to the environment and staff and relearn the rules and procedures in that organization. Experiences in the clinical setting can influence the level and type of learning that occurs, as well as significantly impact how students are socialized into the nursing profession. (Reider, J. and O. Riley-Giomariso. 1993) In most, if not all, bachelor's degree nursing programs, students undertake to complete their clinical experience in a variety of settings, including: hospitals, mental health institutions, community services, and long-term care institutions. In all of these settings, there are various factors that can influence the quality of clinical education and therefore student learning and, consequently, the development of their competence.

Përbërësit, ose njerëzit e përfshirë në procesin e edukimit klinik, përfshijnë edukuesit klinike, studentët, klinikistët, pacientët dhe familjet.

Maloney and Sheard (1992) suggest that it is important not to overlook the role of patients and their families, as noted in this model, because they are usually overlooked in discussions of clinical education. (Maloney, D. and C. Sheard. 1992) It is also very important to understand that although clinical educators in nursing play a very important role in the clinical education of students, the staff of licensed nurses in the wards where students are assigned have a very strong impact, if not the strongest, on the effectiveness of the clinical experience, in terms of achieving learning outcomes and completing the student experience. (Ip, W.Y. and D. Chan. 2005)

Other factors that have been highlighted in the literature include some operational issues, such as: the duration of clinical practice (Olse, Gresley and Heater 1984) and the type of environment used for practice) and the type of experience existing in each clinical unit. (Atack, L., et. al. 2000).

Three key factors are central to the quality of students' clinical experiences in any setting: the nature of the learning in the clinical setting in which students are placed, the model of clinical education used for their supervision, and the quality of the clinical supervision they receive.

The clinical learning environment has been described by Dunn and Hansford as “a network of interactive forces that influence student learning outcomes in the clinical setting”.

It refers broadly to the social context of the student's clinical experience and includes elements such as the culture of the organization/ward, the relationship between students and staff, the atmosphere in the ward or clinical unit, team spirit, attitudes towards learning/teaching and attitudes towards students. (Lambert, V. and M. Glacken. 2005)

The clinical learning environment is known to have a strong influence on students that directly impacts their learning (S. P., Hamer Cox, et.al. 2005). In contrast to classroom learning, students in clinical settings often find themselves involved in unplanned activities with patients and healthcare workers. (Dean, J. and N. Kenworthy. 2000). Although nursing students perceive the clinical setting as the best place to acquire knowledge and skills, they often feel at a disadvantage in the clinical setting. Clinical experiences require difficult adjustments on the part of students as they move from an environment that encourages thought to one that encourages action. (Chan, D. 2004)

Nursing students often find themselves in an awkward position when they go into practice and not surprisingly, the clinical experience is seen as anxiety-provoking. (Jackson, D. and J. Mannix. 2001)

Different studies highlighted the importance of the clinical environment in clinical education programs and its potential impact on student learning. (Ip, W.Y. and D. Chan. 2005.)

Previous research suggests that “good” clinical environments are characterized by factors including non-hierarchical structures, good communication, team spirit, a positive atmosphere, democratic leadership styles, and positive relationships with staff. (Neville, S. and S. French. 1991)

Furthermore, Grindell, G. G., et, al 2001 suggested that when ward staff worked together and were motivated, students felt supported as well as well supervised. Conversely, situations that have been identified as negative for students' clinical learning include ambivalent and unwelcoming staff, lack of direction, poor communication with staff, supervisors who are inattentive or dislike students, and a lack of collaboration between staff and students. (Grindell, G. G., et, al 2001). A productive, stimulating, and supportive environment has created more satisfied students, and more satisfied students have facilitated the achievement of a more effective environment for clinical learning (Dunn and Hansford 1997 1306). Recent research by Saarikoski et al. (2002) and Attack et al. (2000) suggests that a positive atmosphere in the ward and effective clinical supervisory relationships with staff are the most important factors contributing to the quality of clinical learning among nursing students. Findings from student interviews in the study by Attack et al (2000) highlighted the importance of staff-student relationships in creating a positive learning experience. Elements of this include the notion of treating students as colleagues, students feeling more comfortable in relationships with staff, being part of a team and staff, being part of a team, and staff involving students in patient-related decision-making. (Attack, L., et. Al 2000)

Methods

The Aim of this study was to assess the satisfaction in clinical practice among the nursing students at the University of Shkodra.

Study population: Bachelor students at the Faculty of Health Sciences, University of Shkodra "Luigj Gurakuqi". A self-report test-retest questionnaire was administered to a convenience sample of 303 students enrolled in Bachelor study in Nursing program in Shkodra University

Study design: Across-sectional study was designed; using a self-administered nineteen-item online questionnaire for the students. This study was conduct during November -January 2023

Sampling procedures: A purposive sampling strategy. The sample consists of 303 students (18 males and 285 females) who were asked about their concerns during the clinical practice period. 67 of students were in first year, 114 in second years, 122 in third year of study program.

Data collection: *Online* self-administered questionnaire; shared anonymously via WhatsApp; 5-10 min to complete. Informed *consent* obtained

Data analyses: We have use the standardized questionnaires for measuring student satisfaction in clinical practice, Quality of Prac Experience Questionnaire. to mesure the satisfaction was used the Likert scale scorede from 1 Strongly disagree to 5 point Strongly Agree. Data were analyzed using Microsoft Office Excel 2010.

Results

The sample consists of 303 students (18 males and 285 females) who were asked about their concerns during the clinical practice period. 67 (22%) of students were in first year, 114(38%) in second year, 122 (40%) in third year of study program. In our study were included 303 students with mean age 20.23 years old, range age 18- 38 years old and SD=3.322.

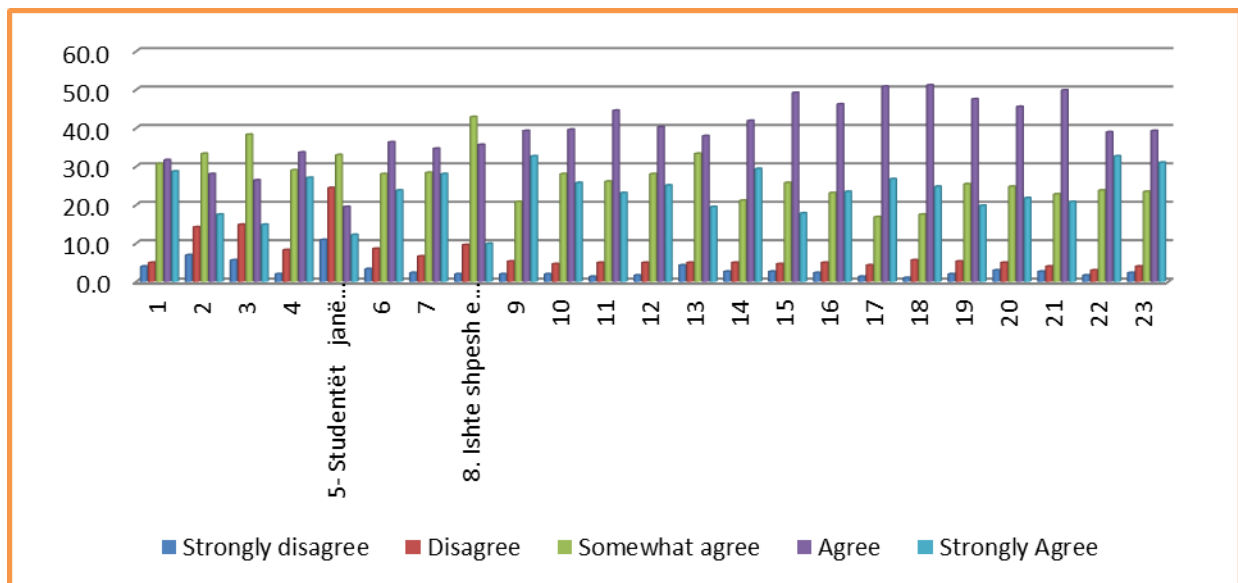
The mean score of questions was 85.8 point, minimum=23 point, maximum=115 point and SD= 16.75587 point. Regarding the level of satisfaction 2.5% of the students were strongly disagree, 7.2% were disagree, 26.9% were somewhat agree, 40.7% were agree and 22.6% were strongly agree. In the table 1 we have reported all the data of collected from the student.

Table 1. The level of satisfaction of clinical practice

Items	1. Strongly disagree		2. Disagree		3.Somewhat agree		4. Agree		5. Strongly Agree	
	N	%	N	%	N	%	N	%	N	%
1. The practicum instructor tried hard to help students during clinical practice and to bring them closer to staff members.	12	3.96	15	4.95	93	30.69	96	31.68	87	28.71
2- In general, ward staff helped nursing students to gain the widest possible experience	21	6.93	43	14.19	101	33.33	85	28.05	53	17.49
3. The clinic (ward) was available to students.	17	5.61	45	14.85	116	38.28	80	26.40	45	14.85
4. This was a good unit for nursing students to learn about clinical-practice	6	1.98	25	8.25	88	29.04	102	33.66	82	27.06
5.All nurses on the unit, to the newest student, felt part of the nursing team	33	10.89	74	24.42	100	33.00	59	19.47	37	12.21
6. The mentor made a real effort to understand difficulties students' might be having with their work.	10	3.30	26	8.58	85	28.05	110	36.30	72	23.76
7.The Clinical Partners/buddy nurses attached a great deal of importance to the learning needs of nursing students	7	2.31	20	6.60	86	28.38	105	34.65	85	28.05
8. It was often difficult to discover what the ward staff expected of students during this practicum	6	1.98	29	9.57	130	42.90	108	35.64	30	9.90
9. This experience has made me more eager to become a Registered Nurse	6	1.98	16	5.28	63	20.79	119	39.27	99	32.67
10. I felt that I was able to make a useful contribution to the nursing team on the unit	6	1.98	14	4.62	85	28.05	120	39.60	78	25.74
11. I usually had a clear idea of where I was going and what was expected from me during this practicum	4	1.32	15	4.95	79	26.07	135	44.55	70	23.10

12. This practicum helped me to further develop my problem-solving skills	5	1.65	15	4.95	85	28.05	122	40.26	76	25.08
13. The ward staff put a lot of effort into commenting on my performance	13	4.29	15	4.95	101	33.33	115	37.95	59	19.47
14. This practicum helped me to further develop my communication skills	8	2.64	15	4.95	64	21.12	127	41.91	89	29.37
15. I generally received constructive feedback on how I was going	8	2.64	14	4.62	78	25.74	149	49.17	54	17.82
16. This practicum helped me to further develop my technical skills	7	2.31	15	4.95	70	23.10	140	46.20	71	23.43
17. On the whole, I was clear about what I was doing well and what I needed to improve	4	1.32	13	4.29	51	16.83	154	50.83	81	26.73
18. This practicum helped me to further develop my reflective skills	3	0.99	17	5.61	53	17.49	155	51.16	75	24.75
19. My performance was assessed in an open, consultative way	6	1.98	16	5.28	77	25.41	144	47.52	60	19.80
20. This practicum helped me to further develop my understanding of concepts and principles of nursing practice	9	2.97	15	4.95	75	24.75	138	45.54	66	21.78
21. This practice helped me to further develop my organization / time management skills	8	2.64	12	3.96	69	22.77	151	49.83	63	20.79
22. Overall, I feel that this practicum was a worthwhile learning experience.	5	1.65	9	2.97	72	23.76	118	38.94	99	32.67
23. The Payton methodology has helped us a lot in nursing practices.	7	2.31	12	3.96	71	23.43	119	39.27	94	31.02

According the results obtained we can notice that satisfactory levels in clinical practice were reported by students. In the future we have further challenges to improve the relationship between nursing teachers and students. (See table 1 and graphic 1)



Graphic 1. The level of satisfaction according the items

In all items more than 50% of the students were very satisfied. Only in the item 2, 54.5% of the students, refers that the staff didn't helped nursing students to gain the widest possible experience. In the item 5 in which the students were asked about the involvement and feeling part of the nursing team the most part of them (68.3%) were not satisfied. Also more than 54.5% they were expressed that for them was often difficult to discover what the ward staff expected of students during this practicum. This reflects the lack of good cooperation between students and nurses in the wards where they practice clinical practice.

They clearly state that the internship has helped them a lot in solving technical, cognitive and time management problems during the internship. They feel confident about their future for licensing thanks to the internship and the use of the Peyton Method.

Conclusion:

- The quality of the practice seen through the eyes of the students, leads to the conclusion that about 55% of them agree with the fact that the clinical practice is carried out with high quality, while the rest disagree with this statement.
- Divided by gender, women studying nursing think that the implementation of clinical practice is carried out with higher quality compared to men.
- Divided by years of study, third-year students think that the implementation of clinical practice is carried out with higher quality compared to second-year students.

Changing the image of professional practices towards the institutions where they carry out clinical practices, because students often encounter problems and disagreements with the team members of these institutions. Promoting the image of the student nurse in these health institutions would be a good opportunity to resolve these conflicts.

Referencat:

1. Reider, J. and O. Riley-Giomariso. 1993. Baccalaureate nursing students' perspectives of their clinical nursing leadership experience. *Journal of Nursing Education*, 32(3): 127-
2. Maloney, D. and C. Sheard. 1992. An interpersonal skills approach to the learning triad: Client, student and educator. In McAllister, L., M. Lincoln, S. McLeod and D. Maloney. 1997. eds. *Facilitating Learning in Clinical Settings*. Cheltenham: Stanley Thornes.
3. Ip, W.Y. and D. Chan. 2005. Hong Kong nursing students' perception of the clinical environment: a questionnaire survey. *International Journal of Nursing Studies*, 42(6): 665-72.
4. Olsen, R.K., Gresley, R.S. and B.S. Heater. 1984. The effects of an undergraduate clinical internship on the self concept and role mastery of Baccalaureate nursing students. *Journal of Nursing Education*, 23(3): 105-8.
5. Atack, L., Comacu, M., Kenny, R., Labelle, N. and D. Miller. 2000. Staff and student relationships in a clinical practice model: Impact on learning. *Journal of Nursing Education*, 39(9): 387-396.
6. Lambert, V. and M. Glacken. 2005. Clinical education facilitators: a literature review. *Journal of Clinical Nursing*, 14: 664-673.
7. S. P., Hamer Cox, A., Callister, L. C., Johnsen, V. and G. Matsumura. 2005. Nursing education and service collaboration: Making a difference in the Clinical Learning Environment. *Journal of Continuing Education in Nursing*, 36(6): 271-277.
8. Dean, J. and N. Kenworthy. 2000. The principles of learning. In Nicklin P.J. and N. Kenworthy. eds. *Teaching and Assessing in Nursing Practice: An Experiential Approach*. Edinburgh: Bailliere Tindall.
9. Chan, D. 2004. Nursing students' perceptions of hospital learning environments: an Australian perspective. *International Journal of Nursing Education Scholarship*, 1(1):.
10. Jackson, D. and J. Mannix. 2001. Clinical nurses as teachers: Insights from students of nursing in their first semester of study. *Journal of Clinical Nursing*, 10(2): 270-278.
11. Ip, W.Y. and D. Chan. 2005. Hong Kong nursing students' perception of the clinical environment: a questionnaire survey. *International Journal of Nursing Studies*, 42(6): 665-672
12. Neville, S. and S. French. 1991. Clinical education: students' and tutors' views. *Physiotherapy*, 77(5): 351-4.

13. Grindell, G. G., Bateman, A. L., Patsdaughter, C. A., Babington, L. M., and G. Medici. 2001. Student contributions to clinical agencies. *Nursing and Health Care Perspectives*, 22: 197-202.
14. Dunn, S. and B. Hansford. 1997. Undergraduate nursing students' perceptions of their clinical learning environment. *Journal of Advanced Nursing*, 25(6): 1299-306.
15. Atack, L., Comacu, M., Kenny, R., Labelle, N. and D. Miller. 2000. Staff and student relationships in a clinical practice model: Impact on learning. *Journal of Nursing Education*, 39(9): 387-396.