

**The clinical environment – do student nurses belong? A review of Australian literature**

Author

Gilbert, Julia, Brown, Lynne

Published

2015

Journal Title

Australian Journal of Advanced Nursing

Version

Version of Record (VoR)

Rights statement

© 2015 Australian Journal of Advanced Nursing. The attached file is reproduced here in accordance with the copyright policy of the publisher. Please refer to the journal's website for access to the definitive, published version.

Downloaded from

<http://hdl.handle.net/10072/101580>

Link to published version

[http://www.ajan.com.au/ajan\\_33.1.html](http://www.ajan.com.au/ajan_33.1.html)

Griffith Research Online

<https://research-repository.griffith.edu.au>

# The clinical environment – do student nurses belong? A review of Australian literature

## AUTHORS

### Julia Gilbert

RN, RM, BHsc, Grad Dip Bus Man, Bach Laws, Grad Dip Legal Prac.  
Lecturer, Griffith University, Gold Coast Campus, Parklands Drive, Southport, Queensland, Australia.  
julia.gilbert@griffith.edu.au

### Lynne Brown

RN, BHSc, MN (Hons.)  
Lecturer, Griffith University, Logan Campus, University Drive Meadowbrook, Queensland, Australia.  
l.brown@griffith.edu.au

## KEY WORDS

student nurses, clinical environments, sense of belonging

## ABSTRACT

### Objective – broad aim

This paper aims to identify some of the issues related to the nursing students' experience of belonging on clinical placements from the current Australian literature. Anecdotal and empirical evidence suggests that nursing students on clinical placements often experience problems that can adversely affect their feeling of belonging in the clinical setting and ultimately their career decisions. As nursing shortages increase, retention of student nurses in their chosen profession is often affected by their clinical experiences, both positively and negatively (HWA, 2012).

### Setting and Subjects

Health professionals' attitudes towards nursing students may affect their feelings of belonging to the environment and the health care team. These health professionals include Registered Nurses and a range of other health professionals including medical staff, physiotherapists and dieticians. The clinical settings in which student nurses' practice vary greatly and may also make a difference to the student experience and their feelings of belonging.

### Primary Argument

Student expectations should include feeling welcomed to the clinical area and respected as part of the nursing culture. Clinical placements provide the 'real world' experience to complement classroom and laboratory education. These expectations are clearly not met in some clinical environments. Complimentary research reinforces the benefit of partnering students with experienced registered nurses who have an interest in teaching nursing students.

### Conclusion

The literature has identified some examples of where students have felt a sense of belonging to the clinical environment and others where the situation has been less than encouraging. Provision of support, guidance and ensuring appropriate clinical education remain ongoing challenges for Australian universities and the health care system (Henderson et al 2011).

## INTRODUCTION – RELEVANCE AND SETTING THE SCENE

The chronic national nursing workforce shortage has been compounded by the decrease in numbers of students completing their degree and entering the workforce (Courtney-Pratt et al 2011; Beadnell 2006). It is therefore imperative that student nurses are not discouraged from continuing in their chosen profession by feeling they do not belong in the clinical environment.

Belongingness is intrinsic in humans with the need to belong and be accepted by their social group, a fundamental element in social interactions. It involves feelings of security, feeling connected to the clinical nurse group and that their professional and personal values are in sync with the larger clinical group (Levett-Jones and Lathlean 2009). This view is reinforced by research findings where self-esteem and belongingness are linked, and acceptance into a cultural group signifies that the individual is meeting the important social domains (Beadnell 2006). Research into the link between nursing students' clinical experience and learning has been limited, and further research is required to examine belongingness and the influence this has on the students' clinical placement experience (Mallik and Aylott 2005).

When the way in which nursing students were educated changed in the late 1980's from hospital trained to university education, one of the key issues for the registration authorities and universities was the maximisation of clinical skill development on clinical placement (Nolan 1998). Anecdotal and empirical evidence suggests nursing students on clinical placements experience problems that can have far reaching effects on their progress through their degree. Many of these problems are directly related to the feelings of belonging to the profession, the clinical environment and to the health care team.

Australian undergraduate nursing students currently complete their degree within accredited universities usually over three years. One essential component of the degree involves clinical placements where students are allocated to various health facilities for a set period of time. During this time, students aim to integrate knowledge from the classroom into skill development, form part of the clinical workforce and are supported by a university or facility clinical facilitator/mentor. Not all students experience support by the clinical staff in the environment during this time, which can lead to superficial learning, student feelings of not belonging and increased student attrition. Students who experience anxiety during clinical placement may experience decreased learning opportunities, also resulting in student attrition (Melincavage 2011).

An examination of Australian and British nursing student stories of clinical placements (Levett-Jones et al 2007) found the clinical managers and nurses who were supportive and welcoming, who valued and included nursing students into the workplace were conducive to their feelings of belongingness. Taylor et al (2014) also found student satisfaction with a clinical placement had an impact on their decision to graduate and register. Although part of these decisions was related to the students' preparation for placement, qualitative data suggests their feeling of belonging in the clinical setting also had an influence on the decision to complete their undergraduate nursing degree and become a registered nurse.

## DISCUSSION

Clinical placement can occur in a variety of hospital based or community settings including mental health, aged care and acute care areas, covering all shifts including night duty (Zielinski and Beardmore 2012). The majority of universities provide block placement for student nurses during the designated university semesters. Block placement involves nursing students being allocated to designated 'blocks' of time and then to facilities who have agreed to host the nursing students during this time.

The nursing students on clinical placement are supported and supervised by a clinical specialist called a

facilitator, usually paid for by the university, in addition to the clinical registered nurse (Courtney-Pratt et al 2011). Clinical practice is vital for nursing students to integrate knowledge from the classroom with their development of practical nursing skills. Clinical skills are more than successfully performing tasks; they incorporate client assessment, identification of deficits and problems and the ability to critically think to provide solutions (Walker et al 2014). A usual clinical placement day consists of approximately 6-8 hours of patient contact and/or up to one hour of post clinical reflection and discussion to identify and discuss learning experiences with other students.

During one study (McKenna et al 2009), students attended placement weekly to facilitate learning and assimilation into the clinical setting. Some students found the experience of learning about a procedure at university and performing that procedure the next day on placement to be helpful in linking theory and practice. Findings from this research indicated that students attending placement in one clinical facility felt included and accepted by staff, facilitating the development of trust and optimum learning experiences. Students were able to continually engage with theory and practice, consolidating one skill at a time, extending learning and boosting confidence (McKenna et al 2009). Alternatively, students who experienced block placements reported having to re-orientate on each placement and experienced difficulty in establishing relationships with the clinical staff. This information suggests that to encourage professional socialisation, clinical placements should be conducted in the same clinical facility over an extended period of time. Limitations of this research include data that was obtained from a larger study with only student midwives experiences discussed in this paper. Findings cannot therefore be generalised to other student groups in other institutions, but does form the basis for further research.

Levett-Jones et al (2009) sought to measure whether the duration of clinical placement impacted on the student nurses' perception of belonging in the clinical workplace and found students required a 'settling in' period as well as the establishment of relationships with staff in order to feel a sense of belonging. This research utilised information gathered from 362 third year undergraduate nursing students from two Australian and one British university through anonymous online surveys. Findings from this research indicated that all participants identified that feelings of belongingness impacted on their confidence, resilience, capacity and motivation to learn. Many students identified that they felt uncertain, lost and unsure as they struggled to learn about the staff, clients, culture and practices of the clinical area. Students also identified that they felt their ability to learn was impacted by this assimilation process, and only when they were considered to be a team member, did they learn new skills or consolidate learned skills, leading to feelings that they belonged in the clinical setting.

Clinical placements afford students the opportunity to not only link theory to practice but also to begin socialisation into the nursing culture. Early research (Nolan 1998), discussed how students striving to fit into the nursing culture norm would do whatever was needed to be accepted. The sense of 'belonging' along with knowledge and affirmation from staff and patients were of particular importance to student nurses. Clinical placements are integral to completion of the nursing degree, and entry of the nursing student into this nursing 'atmosphere' where they can learn and socialise with clinical nurses is vital (Kern et al 2014). Nursing students, who fail to gain entry into this elite environment and gain belongingness, experience their clinical placement as outsiders, often with detrimental results (Courtney-Pratt et al 2014; Kern et al 2014).

The impact of mature aged nursing students (so called 'Baby Boomers'), on health workforce retention once they graduate, is important, as many employers consider them to be more likely to stay in the workforce (Walker et al 2014). One concern is that these students are considered to be at 'high risk' of academic failure and withdrawal from undergraduate nursing degrees (Walker et al 2014). These students in particular, may

struggle with engagement in the profession of nursing during clinical placement due to bias and decreased feelings of belonging. One Australian study utilised open ended questions as part of an online survey to discover both supports and obstacles to learning opportunities on placement, and how these factors impact on the feelings of belonging experienced by the mature aged graduate registered nurse (Walker et al 2014). As the ratio of mature aged students are anticipated to increase within future undergraduate nursing programs, additional research into methods to both attract and retain these students is advised.

One of the key elements of student learning then is for nursing students to fit into the clinical setting, be accepted by staff and clients and have a sense of belonging. 'Fitting in' has been documented by Malouf and West (2011) as being vital for new graduate nurses. This need to belong was a significant component of their clinical performance and there is no reason to suspect it is any different for the student nurse. Sedgwick et al (2014) focused on the experiences of nursing students from minority groups and their feelings of belonging in the clinical setting. Findings from this study identified the additional barriers faced by this group of nursing students, often resulting in a higher attrition rate than other nursing student groups. Sedgwick et al (2014) also found that every interaction the minority students had with the nurses who they came into contact with, had an impact on their sense of belonging in the environment.

The impact of clinical placement on student retention across the undergraduate nursing degree has been a focus for many universities, leading to research into why undergraduate student nurses terminate their nursing degree. Students undertaking an accelerated university nursing degree program have experienced significantly lower level connectedness to the clinical setting and associated feelings of belonging, due to reduced confidence (Sedgwick 2013). Accelerated nursing degrees are common throughout the world and, as there appears to be little research evident in this area, the suggestion is made that further research is required.

Researchers have postulated that the first clinical placement for second year undergraduate nursing students can influence their decision to continue (James and Chapman 2010). In this research study, six second year undergraduate nursing students enrolled in a Bachelor of Nursing degree in an Australian university, completed a compulsory three week clinical placement for their acute medical surgical course. Their only prior clinical placement comprised a two week aged care facility placement in their first year. Findings from this study included reports that almost all of the students felt overwhelmed and disorientated by sights, noises and smells associated with the busy clinical environment, the patients and their clinical conditions, leading to them feeling that they did not belong in the clinical area. Some students also identified the pain and suffering experienced by the patients were triggers for feelings of helplessness experienced by the students. Three major themes were identified as a result of this research: feelings of confrontation and being overwhelmed, the concept of patients as people and the students' perception of their preceptors (James and Chapman 2010). Many participants felt that familiarity with the preceptor facilitated building of confidence and the use of initiative in the clinical setting. Some participants reported feeling intimidated and unwelcome by their preceptors, leading to them feeling overwhelmed, disorientated and disconnected from the clinical setting (James and Chapman 2010). Limitations relating to this study include the very small participant group of six students, drawn from one clinical context (nursing) which limits the usefulness of this information in the broader context of all nursing students.

A positive learning experience can occur when encouragement and constructive feedback are given to students through the support of a role model. Donaldson and Carter (2005) found students like to have access to a nurse role model, adding to their sense of belonging in the environment, their confidence and feelings of competence. Many of the students in a study by Suresh et al (2012), had difficulty feeling supported in the

clinical environment with low staffing levels, which caused a decrease in the quality of nursing care and decreased feelings of belonging in the clinical environment.

Further research reinforced the benefit of partnering students with registered nurses with expertise and an interest in teaching nursing students, thereby bridging the gap between theory and practice (Donaldson and Carter 2005). Opportunities for clinical placement in non-hospital settings, including general practice settings, offer student nurses clinical practice in primary care (Peters et al 2013). Whilst these placements offer high quality placement interactions with practice nurses and patients, their success is dependent on support being provided to the practice nurses who act as facilitators, mentors and educators (Peters et al 2013).

Other Australian research has focused on the undergraduate nursing student experience during clinical placements in rural and remote areas (Webster et al 2010), reinforcing the issue of belonging as an important aspect of clinical placements. This qualitative study involved a cohort of eight (8) second year nursing students from Australian Catholic University on a four week rural placement in northern New South Wales. A pre and post placement questionnaire captured their experiences and knowledge development in rural communities and rural health clinical placements. Findings from this study confirmed student clinical experience in rural areas influenced the student's perception, attitudes, preparedness for practice, engagement and feelings of belonging within their clinical facility.

Discussion regarding the impact of the length of clinical placements on student belongingness has been extensive. Some researchers (Levett-Jones et al 2007; Mallik and Aylott 2005; Nolan 1998) suggest a short clinical placement across a variety of clinical settings decreases the sense of belonging in student nurses due to the period of 'settling in' which is required. Other researchers (Edmond 2001), believe it is not the length of the clinical placement that is important but the guidance and support that is given, suggesting a well-supported placement, regardless of the length, has the potential to provide the students with a feeling of belonging. This contradiction should be of particular interest to academics managing clinical placements as part of the undergraduate nursing degree.

## **CONCLUSION**

Limited research has been conducted on the structure of clinical placements. Historically, undergraduate student nurses attend placements in blocks where they attend a clinical facility for five days a week for a set number of weeks. Short placements can result in a decreased sense of belonging and limited learning opportunities for student nurses due to the time required for "settling in". The conflict between funding and the number of clinical placement hours has been identified as a negative factor in students achieving sufficient clinical experience. Frequent changes in clinical settings has also been identified by students as opportunities for varied experiences, but these experiences lacked depth of learning and they required more registered nurse time for orientation and support.

Little research has explored student perceptions of their clinical experiences and the impact of placements on their career choices. Experiences, acceptance and a sense of belonging can have implications not only for the students, but for the area of nursing they choose once they graduate.

In order to facilitate student learning on clinical placement there is support for sending students to a small number of facilities where they are well supported and increasing the length of placement time to maximise the learning and practice of clinical skills.

## REFERENCES

- Beadnell, C. 2006. Nurse education: Our health depends on it. *Australian Nursing Journal*, 13(7):25-27.
- Courtney-Pratt, H., Fitzgerald, M., Ford, K., Marsden, K. and Marlow, A. 2011. Quality clinical placements for undergraduate nursing students: a cross-sectional survey of undergraduates and supervising nurses. *Journal of Advanced Nursing*, 68(6):1380-1390.
- Courtney-Pratt, H., Fitzgerald, M., Ford, K., Johnson, C. and Wills, K. 2014. Development and reliability testing of the quality clinical placement evaluation tool. *Journal of Clinical Nursing*, 23(4):504-514.
- Donaldson, J.H. and Carter, D. 2005. The value of role modelling: Perceptions of undergraduate and diploma nursing (adult) students. *Nurse education in Practice*, 5(6):353-359.
- Edmond, C. 2001. A new paradigm for practice education. *Nurse Education Today*, 21(4):251-259.
- Henderson, A., Briggs, J., Schoonbeek, S. and Paterson, K. 2011. A framework to develop a clinical learning culture in health facilities: ideas from the literature. *International Nursing Review*, 58(2):196-202.
- Health Workforce Australia. 2012. Health Workforce 2025- Doctors, Nurses and Midwives. Commonwealth of Australia.
- James, A. and Chapman, Y. 2010. Preceptors and patients – the power of two: Nursing student experiences on their first acute clinical placement. *Contemporary Nurse*, 34(1):34-47.
- Kern, A., Montgomery, P., Mossey, S. and Bailey, P. 2014. Undergraduate nursing students' belongingness in clinical learning environments: Constructivist grounded theory. *Journal of Nursing Education and Practice*, 4(3):133-142.
- Levett-Jones, T., Lathlean, J., McMillan, M. and Higgins, I. 2007. Belongingness: A montage of nursing students' stories of their clinical placement experiences. *Contemporary Nurse: a Journal for the Australian Nursing Profession*, 24(2):162-174.
- Levett-Jones, T. and Lathlean, J. 2009. The ascent to competence conceptual framework: an outcome of a study of belongingness. *Journal of Clinical Nursing*, 18 2870-2879
- McKenna, L., Wray, N. and McCall, L. 2009. Exploring continuous clinical placement for undergraduate students. *Advances in Health Science Education*. 14(3):327-335.
- Mallik, M. and Aylott, E. 2005. Facilitating practice learning in pre-registration nursing programmes - a comparative review of the Bournemouth Collaborative Model and Australian Models. *Nurse Education in Practice*, 5(3):152-160.
- Malouf, N. and West, S. 2011 Fitting in: a pervasive new graduate nurse need. *Nurse Education Today*, 31(5):488-493.
- Melincavage, S.M. 2011. Student nurses' experiences of anxiety in the clinical setting. *Nurse Education Today*. 31(8):785-789.
- Nolan, C. 1998. Learning on clinical placement: The experiences of six Australian student nurses. *Nurse Education Today*, 18(8):622-629.
- Peters, K., Halcomb, E. and McInnes, S. 2013. Clinical placements in general practice: Relationships between practice nurses and tertiary institutions. *Nurse Education in Practice*, 13(3):186-191.
- Sedgwick, M. 2013. Comparison of second – degree and traditional undergraduate nursing students' sense of belonging during clinical placements. *Journal of Nursing Education*, 52(11):657-661.
- Sedgwick, M., Oosterbroek, T. and Ponomar, V. 2014. "It all depends": How Minority Nursing Students Experience Belonging During Clinical Experiences. *Nursing Education*, 35(2):89-93.
- Suresh, P., Matthews, A. and Coyne, I. 2012. Stress and stressors in the clinical environment: A comparative study of fourth year student nurses and newly qualified general nurses in Ireland. *Journal of Clinical Nursing*, 22(5):770-779.
- Taylor, M.A., Brammer, J.D., Cameron, M. and Perrin, C.A. 2014. The sum of all parts: An Australian experience in improving clinical partnerships. *Nurse Education Today*, 35(2):297-303.
- Walker, S., Dwyer, T., Broadbent, M., Moxham, L., Sander, T., and Edwards, K. 2014. Constructing a nursing identity within the clinical environment: The student nurse experience. *Contemporary Nurse: A Journal for the Australian Nursing Profession*, 49(12):103-112.
- Webster, S., Lopez, V., Allnut, J., Clague, L., Jones, D. and Bennett, P. 2010. Undergraduate nursing student's experiences in a rural clinical placement. *Australian Journal of Rural Health*, 18(5):194-198.
- Zielinski, V. and Beardmore, D. 2012. Rethinking student night duty placements- a replication study. *Australian Journal of Advanced Nursing (Online)*, 30(1):12-22.