NURSING STUDENTS’ PERCEPTIONS OF WORKING WITH STAFF NURSES

by

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Sharon Holly Jones

April 2010
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The purpose of this project was to examine the perceptions of nursing students working with staff nurses during their clinical experiences. Based on this information, a resource for staff nurses was developed to assist them in mentoring students. A limited review of the literature identified helpful and hindering practices in the education of nursing students. Nursing schools and faculty are charged with theoretical and clinical education of nursing students so they may enter into the nursing profession as competent and safe nurses. Staff nurses play integral roles in the formative development of students.

Data from a previous study were examined. The variables of friendliness, approachability, availability and willingness of staff nurses were evaluated. Students consistently ranked the ability of nurses to teach lowest and friendliness of nurses highest. Student comments were organized qualitatively utilizing retrospective analysis. Two themes were identified from the qualitative data which added to the veracity of the research. Positive reported nurse behaviors towards students were then utilized as a basis for a mentoring guide.

Limitations for this project, as well as implications and topics of future research were identified and discussed. A resource guide was developed for distribution to staff nurses to assist them when mentoring nursing students.
CHAPTER ONE

INTRODUCTION

Nursing schools and faculty are charged with educating nursing students to enter the workforce as competent and safe entry level nurses. Staff nurses are an integral piece of nursing students’ education process and due to the nursing shortage fewer staff are available to assist in the educational process. Faculty depend on staff nurses to assist them in the clinical education of nursing students and often staff nurses are not given any direction on how to provide this assistance to both faculty and nursing students.

Information was gathered from the students concerning their perceptions of staff nurses’ friendliness, willingness to teach, approachability and their overall perceptions of what it was like to work with the staff nurses on the units the students were working in. It was important to understand the perceptions of nursing students in order to provide information to the staff nurse on how to interact with students. This information was analyzed and a resource developed with two objectives, provide the staff with suggestions on how to interact with nursing students and to enhance the clinical experience of nursing students.

Problem Statement

Staff nurses play a vital and key role in the learning process for nursing students (Valentine, 1997). Staff may feel ill prepared or unsure of their role concerning the learning process of the student (Matsumura, Callister, Palmer, Cox & Larsen, 2004).
Staff nurses at Billings Clinic and St. Vincent Healthcare do not have a resource outlining their expectations as mentors.

**Purpose of the Project**

The purpose of this project was twofold. The first purpose was to examine the perceptions of nursing students working with staff nurses during their clinical educational experiences. Second, based on the information obtained a resource was developed for staff nurses that outlined the expectations of a mentor working with nursing students.

**Background and Significance**

The clinical setting is also a learning environment for students. It is within this environment that nursing students are socialized into the nursing profession and learn the skills needed to enter the profession. This learning environment is a working environment for staff nurses who work with nursing students. With decreased staffing levels, workload and stress levels increase for nurse. When students are added to the mix the level of stress for nurses and nursing students rises. Developing a resource to help staff nurses interact and work with students may help to decrease some of this stress (Kilcullen, 2007). Stresses and negative environments may decrease the quality of learning experiences for nursing students.

The nursing shortage in the United States is predicted to reach 260,000 vacancies by the year 2020 and may reach as high as 500,000 by the year 2025 (Buerhaus, Staiger, Auerbach, 2008). Enlisting staff nurses to aid in the education of nursing students
becomes increasingly more difficult with vacancies. When there are decreased numbers of staff nurses available to help, the learning experience for nursing students may suffer (Hathorn, 2006).

Nursing education within healthcare facilities relies heavily on modeling of behaviors. Students observe how a procedure is performed and then imitate or practice the procedure on their own (Valentine, 1997). The staff nurse, in many instances, is the one modeling the procedure. The student views this modeling as “competent, powerful, and attractive” (Valentine, 1997 pg. 243). Staff nurses’ attitudes and behaviors impact the learning environment of the student. If the behaviors or attitudes are in opposition to what the students have learned this leads to confusion and increased stress for the student (Valentine, 1997).

Nursing students face many stressors on their journey to becoming a nurse. For many nursing students the first time they have any contact with the medical environment is their first clinical rotation. As described by one student nurse of her first clinical experience, “I was terrified! I did not know what to do or how to do it “(personal communication, 2009). Working with a staff nurse that is knowledgeable, friendly and willing to teach can help to decrease the level of stress nursing students experience in the clinical learning environment (Matsumura, et al., 2004).

A longitudinal qualitative study conducted by Gray & Smith (2000) explored the qualities of effective mentors from nursing students’ perspective. The study followed students from their first semesters as nursing students through their last semesters. Students felt that a good mentor would possess the following qualities: professional,
organized, caring and self confident as well as enthusiastic, friendly, approachable, patient and understanding with a sense of humor. Students also felt that a staff nurse that involved students in activities and made an effort to spend time with and showed interest in the student were good mentors. The authors found that as the confidence and knowledge level of the students increased the more they wanted a relationship with a staff nurse mentor. The evidence presented in this study demonstrated that the staff nurse does indeed make a large difference in the learning experience of nursing students and the impact they have is extensive (Gray & Smith, 2000).

The contribution of nursing students to clinical agencies, as perceived by staff nurses was studied by Matsumura, Callister, Palmer, Cox and Larsen (2004). Several principles of mentoring for staff nurses were identified such as treat the student the way you would like to be treated, mentoring students is a privilege not a burden, help the student to gain skills, teach and model professionalism, and turn a mistake into a learning experience. Staff nurses are not taught these principles in their orientation at the work setting and yet, in addition to all the duties they perform daily they are being asked to mentor and help educate nursing students. The day to day activities of a staff nurse are stressful to the staff nurse and the nursing students also experience similar stress with the clinical learning experiences they are obtaining. In order to lessen the stress and allow both staff nurse and student to experience the most from their time together there must be interventions or resources for staff nurses to follow and guide them when dealing with students (Matsumura, et al., 2004).
Kilcullen (2007) studied the impact of staff nurses on clinical learning. The authors found that staff nurses play an important and vital role in the clinical education of students. Students who received constructive feedback from the nurse manifested enhanced analytic skills and socialization in the clinical setting. Kilcullen (2007) summarized that students felt constructive feedback from staff nurses was perceived in a positive manner and was beneficial to the nursing student and helped the nursing student to understand areas where improvement was needed and offered them an opportunity to improve their performance. Instructors can perform these same actions but coming from a staff nurse it means more and is more beneficial to the student (Kilcullen, 2007).

Conclusion

Staff nurses today are under increased stress due to staffing shortages, increased workloads, and sicker patients. In addition, nurses are being asked to work with nursing students often without any training or guidance. Research has shown that staff nurses are vital to the education and the socialization of nursing students into the profession. Montana State University College of Nursing Mission, Role, Scope, and Philosophy statement (2009) states socialization into the profession is “a major learning process through which the student develops professional identity and commitment. To facilitate socialization, faculty and other professional nurses serve as role models and interact in dynamic relationships where inquiry facilitates growth and change”.

CHAPTER TWO

REVIEW OF LITERATURE

Introduction

The first section of this chapter focused on a review of the literature relating to the perceptions of nursing students working with staff nurses in their clinical learning environment. Two main areas of literature were reviewed. The first was the literature on students’ perceptions which included both positive and negative aspects of working with staff nurses. Although the literature was limited in this area several articles were found and reviewed. The second area of literature reviewed was Imogene King’s Open Systems Model, which prepared the ground work for King’s Theory of Goal Attainment.

Student Perceptions

Positive Student Perceptions

In a qualitative study by Atack, Comacu, Kenny, LaBelle, & Miller (2000) four themes representing student perceptions of staff nurses were identified by the authors. The four themes were communication, shared knowledge and decision making, professional socialization, and staff workload and student hours. The first theme focused on staff treating students as colleagues and communicating in an open honest manner. One student wrote “we just convey it now to the staff if we can’t do something. They understand and respect that. The nurses try to ensure that there is no such thing as a
stupid question because they can relate to our feelings and what we are experiencing as students” (Atack, et al., 2000, pg.4).

The second theme students identified was one of shared knowledge and decision making. Students appreciated it when staff would share their assessment finding and then involved the student in developing a plan of care. Students were also able to share their findings and knowledge with the nurses which contributed to their understanding of what was going on with the patient (Atack et.al, 2000).

The third theme centered on professional socialization. Students felt that being made to feel a part of the team was important and also had a large impact on their learning experience. Atack, et al (2000), summarized that simple actions such as offering nursing students a seat at report or inviting them to coffee break made the students feel appreciated and part of the team.

The fourth theme focused on staff workload and student hours. Both of these factors had the potential to have a negative impact on the student/staff nurse relationship. Students were afraid and more reluctant to approach the staff nurses if the nurse seemed too busy and staff appeared too overworked to have time for the student. Students stated that they liked working longer shifts, such as eight hours versus five hours because this gave them more time to practice their skills. The students felt that working the longer shifts allowed the staff to rely more fully on them, which the students felt contributed positively to their learning process (Atack, et al, 2000).

Papp, Markkanen & von Bonsdorff (2003) conducted a phenomenological qualitative study into the perceptions of nursing students of their clinical experiences.
This study included sixteen nursing students that were interviewed and their answers analyzed. The researchers reported that the appreciation and support students received from staff, the quality of mentoring and patient care observed by the students and the students’ self-directedness were factors which impacted students’ clinical learning experience. Students stated they needed to feel appreciated and supported during their clinical experience. Students also believed that staff nurses were influential in how students viewed the contributions they were making to the clinical experience (Papp, et al, 2003). In summary, Papp, et.al (2003) found that the staff nurse was vital in providing the support students needed to accomplish their educational goals during a clinical experience.

The findings reported by Papp, et al (2003) were echoed in an article by Arries (2009). The author reported that clinical staff that treated students with dignity and respect enhanced the students’ perceptions of being valued members of the healthcare team. Papp summarized the behaviors most desirable for staff nurses to possess included treating students with respect, open communication, active listening, kindness, fairness and truthfulness.

### Negative Student Perceptions

Just as positive qualities and behaviors impact nursing students, negative qualities or behaviors impact students’ learning as well. In their qualitative study, Gray and Smith (2000) discovered that inadequate feedback from a staff nurse mentor was viewed as a negative behavior that inhibited the learning experience of the student. Often the lack of
feedback was attributed to staff nurses who were viewed as unwilling to offer praise or afraid of hurting the students’ feelings (Gray & Smith, 2000).

Gray & Smith (2000) identified four types of staff nurses that proved to be “toxic” (p. 1548) to students learning. The types identified were avoiders, dumpers, blockers and destroyer/criticizer. The avoider is a type of nurse who is suddenly not around when it comes time to have anything to do with students. The dumper throws students into the deep end and feels they should sink or swim. Dumpers do not take any responsibility for students and their learning. Blockers are the third type of mentor who has a negative influence on students.

Blockers may absolutely refuse to help a student, withhold information or knowledge or can over supervise the student which results in the student not being able to learn and practice a skill.

Finally, the destroyer/criticizer is a nurse who belittles and undermines the student (Gray & Smith, 2000). The purpose of a clinical learning environment is to teach students and enhance their skills, not to make that learning intimidating or frightening (Gray & Smith, 2000).

Another concept that has a negative effect on the clinical learning experience of nursing students is shame. Bond (2009) explored the concept of shame and its effects on student learning. Bond (2009) discussed recognizing and preventing shaming behaviors on the part of nursing instructors as well as staff nurses who work with nursing students. As in most of the literature that was reviewed, Bond (2009) made reference to the negative behaviors such as grilling the students with questions, providing only negative
feedback and watching them like a “hawk”. These behaviors affected how the students
learned and contributed to the anxiety they experienced. When students were treated in
such a manner it was shown that the student developed feelings of incompetence and
insecurity, which are manifestations of shame. Bond (2009) also suggested that when
students experience shame, socialization into the nursing profession as well as the
learning experience itself is compromised. Recognition of shaming behaviors on the part
of staff nurses and instructors towards students and the effects of those behaviors can
make a great difference in the learning environment and quality of education for students.

Conceptual Framework

The framework for this project is based on Imogene King’s Open Systems Model
(Polit Beck, 2004). This model is based on three systems: personal, interpersonal and
social systems. These systems are “dynamic and interacting, within which transactions

Interpersonal System

The interpersonal system involves individuals interacting with one another
(Williams, 2001). Several concepts are associated with the interpersonal systems. These
are interaction, transaction, communication, roles and stress (Williams, 2001). The
interactions and transactions that take place between the staff nurse and the student are an
example of the interpersonal system. Communication between staff and student can take
two forms: verbal and non-verbal. Examples of verbal would be spoken and written
communication such as discussing the plan of care for a patient or the staff nurse writing
an evaluation of the student’s performance on any given clinical day. Non-verbal communication takes the form of actions or behaviors displayed by the staff or student such as appearance, distance, facial expressions, posture and touch (Williams, 2001). Examples of non-verbal communication would be smiling versus frowning, dressing in a professional manner and within the dress code policy of the organization.

**Personal System**

The personal system involves the individual (Williams, 2001). This system involves “perception, self, body image, growth and development, time, and space” (King, 1981). King (1981) summarized that the concept of perception is perhaps the most important when dealing with individuals because self perception influences behaviors. The personal system is important to this project as the behaviors of both staff nurses and nursing students are being looked at. Bond (2009) discussed shame and its effect on nursing students and the behaviors that contributed to shame. If staff nurses are unsure of themselves and they do not want to let the nursing student notice the staff nurse may grill the nursing student with multiple and perhaps unnecessary questions, over supervise them or criticize them in front of others (Bond, 2009). These are negative behaviors being exhibited by the individual (staff nurse) that is influencing the learning of another individual (nursing student). These types of behaviors may lead the nursing student to feel shame which in turn will affect the nursing students learning and self perception.
Social System

The social system is a group of people within a community or society that share common goals (Williams, 2001). King (1981) believes that social systems provide the framework for interaction and relationships while establishing roles of behavior and courses of action. King (1981) describes the concepts of the social system as the belief, attitudes, values and customs individual/s form within an organization. Other important social system concepts envisioned by King were organizations, authority, power, status and decision-making (King, 1981). For the purposes of this project Montana State University College of Nursing in partnership with Billings Clinic and St. Vincent Healthcare were the organizations where the project was conceived. The staff nurses within these organizations represent the authority, power, and decision-making involved within the social system.

King (1981) held the belief that the interpersonal system was of the greatest influence on the development of the Theory of Goal Attainment. King (1981) believed that personal systems and social systems influence quality of care. Major elements in a theory of goal attainment are discovered in the interpersonal systems (King, 1981). The interpersonal system is described by King as a system “in which two people, who are usually strangers, come together in a health care organization to help and to be helped to maintain a state of health that permits the functioning of roles” (King, 1981 p.142). For purposes of this project the relationship between staff nurses and nursing students uses the interpersonal system.
In summary, the interpersonal, personal and the social systems of Kings Theory and Framework of Goal Attainment fit well with this project. The goal was to enhance the clinical learning experiences of students by enhancing the relationship between the student and the staff nurse with whom they are assigned to work. This goal can be attained by assisting the staff nurse to understand how to interact with students and provide a quality learning environment in which they can develop clinical and critical thinking.

Conclusion

The literature highlighted the behaviors and qualities that are viewed as positive and desirable for a staff nurse to possess when working with students. One of the most valued was support and encouragement. Nurses who took an interest in nursing students and what they were learning were vital to being successful mentors and influenced the impact they had on the students. The literature described the impact and influence staff nurses have on the learning environment as well as the learning of individuals. The literature also addressed negative behaviors that affect the clinical learning environment of students.

The literature reviewed in detail the behaviors of staff nurses that are both beneficial and detrimental to the learning experiences of nursing students. The literature focused primarily on the feelings experienced by staff nurses and students but did not refer to the expertise or skill level of the staff nurses and if that made a difference in how they interacted with students. It is clear more research is needed into how staff nurses can
be taught to develop the behaviors that will encourage a healthy learning environment for nursing students. Investigation into staff nurses’ level of expertise and experience is needed when developing strategies to help educate staff nurses on how to successfully work with students.

The amount of literature that was specific to addressing the perceptions of nursing students working with staff nurses was limited. Many articles were found that spoke to staff nurses and their perceptions of students and some of those articles did speak to students’ perceptions and were used for this project. Overall, the available literature pertaining strictly to nursing students perceptions was limited.
CHAPTER 3

METHOD

Introduction

The purpose of this project was twofold. The first purpose was to examine the perceptions of nursing students working with staff nurses during their clinical educational experiences. Second, based on the information obtained a resource was developed for staff nurses that outlined the expectations of a mentor working with nursing students. The project was focused on the qualitative and quantitative data that had been collected from questionnaires obtained from nursing students of Montana State University College of Nursing, Billings Campus. Secondary analysis of data was found to be ideal for this project. Secondary analysis is a form of research involving data which has been previously collected by another researcher (Polit & Beck, 2004).

Design

A secondary analysis of data collected from MSU nursing students on the Billings campus was completed. Secondary analysis is gaining in popularity in the research environment (Nicoll & Beyea, 1999). As with all types of data collection secondary analysis has advantages and disadvantages. The advantage to this project was that the data were readily available.

There are five types of qualitative secondary analysis; analytic expansion, retrospective interpretation, armchair induction, amplified sampling and cross-validation
(Polit and Beck (2004. Retrospective interpretation was chosen for this study. Retrospective interpretation involves using the “original database to examine a new question that was not thoroughly assessed in the original study “(Polit & Beck, 2004, p. 262).

Data were collected from the nursing students on the Billings Campus of MSU-CON. It was analyzed and the information compiled. Measures of central tendency were utilized and a resource manual for staff nurses was then developed which will aid the staff in working with the student nurse.

**Setting and Population**

Montana State University Bozeman College of Nursing (MSU-CON) is a baccalaureate program of nursing located in Bozeman, Montana with extended campuses throughout the state. The extended campus located in Billings serves approximately one hundred eight five students from second semester sophomore through senior level. These nursing students are involved in clinical learning experiences at Billings Clinic and St. Vincent Healthcare. Billings Clinic is a two hundred eighty five bed licensed level one trauma center and St. Vincent Healthcare is a three hundred fourteen bed licensed level one trauma center (Billings Chamber of Commerce, 2009). Students begin their regular clinical experiences as second semester sophomore students and continue through their second semester senior rotations. Given the high volume of nursing students present on various units within the two hospitals faculty need assistance and the staff nurses on the units can provide that assistance. It is of utmost importance that staff nurses be given a resource to guide their interactions with students.
The setting for this project was Billings Campus Montana State University College of Nursing. Numerous nursing units within Billings Clinic and Saint Vincent Healthcare have nursing students present during different semesters of academic school year. The students who participated in the project were enrolled in junior and senior nursing courses at Montana State University Bozeman College of Nursing, Billings Campus.

Data Collection

The data for the original study were collected by Jane Scharff, Billings Campus Director. One hundred twenty nursing students, who had a hospital experience the previous semester, spring 2009, were eligible for the study. It was estimated that seventy five students completed the questionnaires. The original data were collected to understand and strengthen learning for nursing students. Students were asked to evaluate the following five questions:

1. Overall, the agency nursing staff members were friendly toward me as a student
2. Overall, I found the agency nursing staff to be approachable when I had questions
3. Overall, I found the agency nursing staff to be available when I needed assistance
4. Overall, I found the agency nursing staff to be willing to teach
5. Please add any comments you may have about your interactions with nursing staff while taking your clinical component at St. Vincent Healthcare or Billings Clinic.

All second semester juniors and all seniors from Montana State University College of Nursing, Billings Campus were given the questionnaires. The questions were asked using a Likert scale of 1-5 with 1 representing strongly disagree to 5 representing strongly agree. Once the data were collected and examined it would be used to improve the clinical environments the students found themselves in. There was no cost or risk to the students and there was no identifying information on any of the questionnaires. The original data were collected to better understand the experiences of nursing students at the two Billings Hospitals.

**Statistical Analysis**

Descriptive statistics were used for this project. Similarities were identified and compared to the existing literature and conclusions determined. Analysis of the qualitative information was done using basic content analysis looking for themes, patterns, or trends in the written comments on the questionnaires.

**Protection of Human Rights**

Prior to starting the data analysis approval was obtained from the Montana State University Institutional Review Board (IRB). The original study also received IRB
approval prior to data collection. In the original study students were given a brief description of the purpose of the study as well as a consent form.

**Conclusion**

The previously collected data were being used as they relate directly to the question being asked in this project: What are nursing students’ perceptions of working with staff nurses? This information will be used to develop a resource manual to aid staff nurses when working with nursing students.
CHAPTER 4

RESULTS

Introduction

The purpose of this project was twofold. Data completed by junior and senior nursing students on the Billings campus of Montana State University was collected and a secondary analysis of that data was performed. Based on the information obtained a resource was developed for staff nurses that outlines the expectations of a mentor working with nursing students.

Billings Clinic and St. Vincent Healthcare provided the clinical settings where junior and senior nursing students participated in clinical learning experiences. The clinical settings included medical-surgical units, critical care units, pediatric, labor, delivery and postpartum units, as well as inpatient psychiatric units.

Description of Sample

One hundred twenty students from the Billings Campus of MSU-CON were eligible to participate in the primary study. Participants in the original study included second semester juniors, first and second semester senior nursing students. No specific demographic data were collected that referred to gender or age. Nursing students attending a general orientation session in August 2009 who had participated in clinical learning experiences during the spring semester of 2009 were eligible to complete the
questionnaires. Of the one hundred twenty students eligible to participate, approximately seventy five completed the questionnaires.

Data Analysis

Upon completion of data collection qualitative and quantitative data were analyzed. These are discussed separately.

Quantitative Data

Quantitative data from the completed questionnaires were entered into the Statistical Package for the Social Services (SPSS) data analysis program Version 14 for Windows. Descriptive analyses was used to summarize the data. The following descriptive variable names were used to manage the data from the questions described in Chapter 3: friendly, approachable, available, and willing. Data were scored on a 1-5 scale with 1 meaning strongly disagree and 5 meaning strongly agree. The summarized data are illustrated in the following histogram and are displayed according to individual courses and as aggregates.
Figure 1. Quantitative Data, Juniors.

Figure 1 displays information generated from juniors for three clinical classes including pediatrics, obstetrics, and medical surgical nursing. The four variables ranged from 3.19 to 3.83 with willingness to teach receiving the 3.19 and friendliness received a 3.83. The medical courses provided the highest ranking overall ranging from 3.51 to 3.83. The two remaining courses, N348 and N349 ranked the four variables from 3.19-3.72 with willingness to teach being the lowest and approachableness receiving the highest marks.
Figure 2 displays the information generated from the questionnaires provided by the senior class for the two clinical courses they participated in; Psychiatric nursing and Urgent and Palliative Care. For N437, mean scores ranged from 4.11 for willingness to teach to 4.44. For N454, mean scores were lowest for availability, 3.94 and highest for approachability, 4.42. Overall the scores for both courses were relatively close.
Figure 3 displays the information generated from all the questionnaires that included all the clinical experiences from both hospitals where the nursing students practiced. The categories of friendliness, approachability and availability ranked the highest and willingness ranked the lowest. The range in mean scores for all students, all course at both hospitals was 3.54 for willingness to teach up to 3.81 for friendliness.

The quantitative data revealed the two areas of friendliness and approachableness were highest rated by both juniors and seniors. Another result was that the mean scores increased as the students advanced from the junior to the senior level. This may, in part, be due to the increase in self confidence as well as an increase in knowledge from the junior to the senior level.

Nursing students did acknowledge the stress that many staff nurses seemed to be experiencing and felt that this may be another reason for some of the negative behaviors
that the staff nurses displayed. A few students have also identified that the management of certain units did not seem to appreciate or value their presence and this also made them feel as though they were a burden or an unwanted intrusion into the culture of the unit.

Qualitative Data

Analysis of the qualitative data identified two themes, an environment in which caring behaviors were dominant and an environment where negative behaviors were dominant.

Caring Environment

Caring is a hallmark of the nursing profession and students appreciated and responded to staff nurses who cared about them and what they were learning. Students identified they felt they were more accepted and valued when the staff nurses displayed a sense of caring. Nursing students identified helpfulness, friendliness, and gratefulness for what the students brought to the table as examples of caring behaviors. Nursing students also pointed out that staff nurses who was knowledgeable and informative as well as willing to teach and search out learning opportunities for them were also highly valued. Students also felt staff nurses that treated them with respect were more effective in their role of a mentor. One student surveyed wrote “I really liked it when the nurse found learning opportunities for me or simply asked me to observe a new procedure. I felt like I was part of the team.” Students want to feel as though they are part of the healthcare team and when they are given opportunities to perform or observe new skills, other than what
has been assigned to them, they feel more like a member of the team, that they belong. Writes another student, “The nurses were great, they seemed like they really cared about what we were learning and acted like they really liked teaching me. It was great!” Students were excited about their futures, felt valued and a part of the nursing profession when they were engaged with staff nurses who embraced and practiced caring behaviors.

**Acculturation Environment**

The second theme identified involved behaviors in which the nursing students experienced acculturation. Acculturation is the process where an individual or group adopts the norms, values or lifestyle of the dominant culture (Botterweck, 2006). Staff nurses on any given unit are the dominant culture in which nursing students are a part and when nurses are angry or unhappy, students can mirror those same behaviors in an attempt to fit in and be a part of the dominant culture. Nursing students identified negative behaviors including rudeness, unprofessional attitudes, difficult to deal with, annoyance with students, unwillingness to teach, or making students feel inferior or a burden. One student wrote “downright rude” while another student wrote “the nurse acted as if I was a burden and didn’t know anything. She was angry and I felt out of place.”

**Conclusion**

Nursing students identified that environment impacted their learning. The caring environment behaviors identified were friendliness, approachability, willingness to teach.
Students also communicated that staff nurses who were knowledgeable and treated them with respect made them feel as though they belonged and were welcomed as part of the health care team. These behaviors impacted the learning experiences of the nursing students in a positive manner.

Nursing students also described an environment of acculturation that impacted their learning in a negative manner. Staff who were rude, unwilling to teach, unprofessional, and difficult to deal with impacted the students negatively. Many times confusion may have entered into misinterpreting the behaviors the students were experiencing. Often nursing students did not realize the staff member they were interacting with was not an RN and this may have led the student to feel as though they were unwanted or a burden.

Descriptive analysis was used to perform secondary analysis of the data for this study. The qualitative data were reviewed and themes were identified. The information that was obtained proved valuable in identifying nursing students’ perceptions of working with staff nurses. This information was utilized to develop a resource for staff nurses to guide them when mentoring nursing students at Billings Clinic and St. Vincent Healthcare in Billings, Montana.
CHAPTER 5

DISCUSSION

Overview

The purpose of this project was twofold. The first purpose was to examine the perceptions of nursing students working with staff nurses during their clinical educational experiences. Second, based on the information obtained a resource was developed for staff nurses that outlined the expectations of a mentor working with nursing students.

Implications

The literature has demonstrated the tremendous effect that staff nurses have on guiding and influencing nursing students. The information that was generated from the questionnaires completed by the nursing students on the Billings campus confirmed the veracity of the literature. Nursing students look to staff nurses as role models and are socialized into the profession by staff nurses. However, staff nurses experience a great deal of stress during their shift and when asked to mentor a nursing student in addition to their workload, it may prove overwhelming to them and have a negative impact on the nursing student. Staff nurses need to be given guidance on how to effectively and positively mentor nursing students. In order to accomplish this goal a resource manual, or class on mentoring needs to be developed to properly prepare staff nurses for this role. Staff nurses need to be educated by nursing faculty as to what is expected of them and
what they can expect from the students as well as what support is available to them from
the nursing faculty.

Providing staff nurses with suggestions on how to mentor nursing students will
not only be of great benefit to the nursing students it may also help to decrease the stress
the staff nurse experiences. Patients also benefit from nursing students assuming their
care as the nursing student may have more time to spend with them and provide more
individualized care. Staff nurses are the key to providing an environment of learning,
caring and learning what it means to be a nurse (Gray, Smith, 2000).

**Limitations**

There was a limited amount of research that was available which spoke
specifically to nursing students’ perceptions of working with staff nurses. In addition,
there is limited generalizability of the findings.

**Recommendations for Future Research**

The possibilities for future nursing research into this area are vast. It would be
beneficial to nursing education and nursing practice to examine staff nurses’ perceptions
of working with students as well as working with nursing faculty. There is documented
research in both these areas however it needs to be re-evaluated.

Research into how management views and regards the contributions that staff
nurses make to nursing students education is another area for research. Management
involvement and approval is vital to the overall functioning and morale of the unit and
the staff who work there. Researching how managers and senior leadership view the role of a staff nurse mentor would prove valuable in developing a strong and positive working relationship among nurse managers, staff nurses, nursing educators, and students.

Nursing faculty perceptions of working with staff nurses may be another area for a nursing research opportunity. Nursing faculty know what is expected of them and what they expect from nursing students but do faculty know what to expect from staff nurses? Faculty understands how best to work with staff nurses in providing a quality clinical learning experience for nursing students?

Conclusion

Providing a positive clinical learning experience for nursing students is not always an easy task to accomplish. Staff nurses make an impact on the learning of nursing students. It is the staff nurse that nursing students’ model themselves after when in the clinical environment. This study identified what students felt contributed to their education in a positive way, the caring behaviors displayed by staff nurses as well as those behaviors which were not beneficial. In addition to educating and training staff nurse mentors it is important to show appreciation and gratitude for the impact they have on a nursing student’s clinical education.
APPENDIX A

GUIDE TO MENTORING STUDENT NURSES
This guide is provided to assist staff nurses when mentoring nursing students from Montana State University College of Nursing-Billings Campus during the student’s clinical learning experience. This guide is intended to provide helpful hints that will make the mentoring process more meaningful for both staff nurses and nursing students.

What is a Staff Nurse Mentor?

As a staff nurse you are about to enter into a partnership in which you have the opportunity to make a powerful and lasting impression on the future of nursing. You, as a staff nurse are being asked to participate in assisting in the clinical education of future nurses. Literature has discussed and shown how great the influence staff nurses have on nursing students and how nursing students look up to and want to learn from those in the “trenches”, you the staff nurse.

As nursing faculty we need your help and welcome your participation. This guide has been developed to provide you with some helpful tips how to help make the most out of the partnership between and nursing students.

- A staff nurse who is willing to assist nursing students to achieve their clinical learning goals.
- A wise and trusted resource.
- An advocate, coach, facilitator, role model and guide for the nursing student.
What a Nurse Mentor is NOT!

- A “savior”
- A therapist
- parent
- An expert
- A friend

What qualities does a nurse mentor possess?

- Friendliness
- Approachable
- Sense of humor
- Good communication skills
- Honest and open
- Knowledgeable

Tips for Effective Mentoring:

1. Learn about your nursing student- Ask the student what their goals are for that clinical experience. Find out what their skill level is, what they can and cannot do.

2. Limit assignments- As a staff nurse you know what level of care your patient needs. If you feel the student isn’t prepared to deliver that level of care let the clinical instructor know and work with the instructor to assign an appropriate student.
3. Assure that communication with the student is clear and concise- Encourage and insist that students provide you with complete and accurate reports of the care or skills they have provided the patient and what remains to be done.

4. Lend a helping hand whenever possible- Offering assistance when a nursing student is providing care or performing a skill can convey a level of comfort.

5. Provide learning opportunities- Students feel valued and a part of the “team” when asked to watch or perform a new skill or procedure.

6. Provide constructive feedback- Remember you are a guide and constructive criticism delivered in a non-threatening and helpful manner can re-enforce the information you are sharing. Take the personal out of the message you are delivering and just state the facts in a way that isn’t threatening or puts the student on the defensive.

7. Answer questions promptly. If you do not know the answers admit it and, along with the student, find someone who does know the answer. This allows the student to know that you are human and are not afraid to ask for help. This allows the student to realize it is OK if they do not know the answer and that someone else is willing to help (Bushnell, 2003).

**Tips for Effective Communication:**

- Be present with and focused on your student
- Be quiet and listen to what the student is saying
➢ Ask questions in an open ended and non-threatening manner. This will help students to express themselves more clearly than simply asking yes or no questions.

➢ Make sure that verbal and nonverbal forms of communication match. Don’t say one thing when you mean something else.

➢ Do not criticize or judge your student in front of others. If you need to speak with them do so in private and in a safe environment.

➢ Be yourself, share your experiences with the student if appropriate, both successes and failures.

➢ Remember to think before speaking (Kupferman, 2005).

Being a mentor for nursing students is an important and valued part of the learning experience. The contributions made by staff nurse mentors have proven to be invaluable to students and are deeply appreciated by nursing faculty. The clinical nursing faculty of Montana State University College of Nursing-Billings Campus thanks you for your valued time, willingness to teach, and experience you provide to our nursing students.

THANK YOU
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