



UNIVERSITY
OF WOLLONGONG
AUSTRALIA

University of Wollongong
Research Online

Faculty of Science, Medicine and Health - Papers:
Part B

Faculty of Science, Medicine and Health

2018

Is provision of professional development by RNs to nursing students a choice?

Carina Anderson

Central Queensland University, cca151@uowmail.edu.au

Lorna Moxham

University of Wollongong, lmoxham@uow.edu.au

Marc Broadbent

University of the Sunshine Coast, m.broadbent@cqu.edu.au

Publication Details

Anderson, C., Moxham, L. & Broadbent, M. (2018). Is provision of professional development by RNs to nursing students a choice?. *Australian Journal of Advanced Nursing*, 35 (4), 34-41.

Research Online is the open access institutional repository for the University of Wollongong. For further information contact the UOW Library:
research-pubs@uow.edu.au

Is provision of professional development by RNs to nursing students a choice?

Abstract

Objective This paper reports on a major category that emerged as a result of a Grounded Theory study that explored Registered Nurses' (RN) understanding of the nursing standard requirement to provide nursing students with professional development during their clinical placements.

Design Grounded Theory study.

Setting Nursing clinical education.

Subjects Fifteen registered nurses participated in this study (n=15). Thirteen were female and two were male.

Main outcome measures In-depth semi-structured interviews were the means of data collection. Constant comparative method was used to analyse data.

Results The notion of choice emerged as a major finding. Choice is conceptualised as choosing whether or not to be involved in the professional development of nursing students. The category choice is informed by two themes; unsuited to teaching, and respecting peers.

Conclusion According to the Australian nursing standards RNs are responsible for providing professional development to nursing students on clinical placements. Results from this Grounded Theory study revealed that participants perceived it is an RNs choice whether or not to provide professional development to nursing students.

Publication Details

Anderson, C., Moxham, L. & Broadbent, M. (2018). Is provision of professional development by RNs to nursing students a choice?. *Australian Journal of Advanced Nursing*, 35 (4), 34-41.

Is provision of professional development by RNs to nursing students a choice?

AUTHORS

Dr Carina Anderson

RN, BN, PhD.
Lecturer, CQUniversity
PO Box 1128
Noosaville, Queensland, Australia
c.anderson@cqu.edu.au

Dr Marc Broadbent

RN, MEd, PhD
Senior Lecturer, School of Nursing, Midwifery and
Paramedicine, University of the Sunshine Coast
Locked Bag 4, Maroochydore DC, Queensland, Australia
mbroadbent@usc.edu.au

Professor Lorna Moxham

RN, PhD, MEd
Professor of Mental Health Nursing,
School of Nursing, Faculty of Science, Medicine and Health,
Northfields Ave, University of Wollongong, NSW, Australia
lmoxham@uow.edu.au

KEYWORDS

Clinical placement, nursing student, registered nurse (RN), teach, nursing standard, professional development

ABSTRACT

Objective

This paper reports on a major category that emerged as a result of a Grounded Theory study that explored Registered Nurses' (RN) understanding of the nursing standard requirement to provide nursing students with professional development during their clinical placements.

Design

Grounded Theory study.

Setting

Nursing clinical education.

Subjects

Fifteen registered nurses participated in this study (n=15). Thirteen were female and two were male.

Main outcome measures

In-depth semi-structured interviews were the means of data collection. Constant comparative method was used to analyse data.

Results

The notion of choice emerged as a major finding. Choice is conceptualised as choosing whether or not to be involved in the professional development of nursing students. The category choice is informed by two themes; unsuited to teaching, and respecting peers.

Conclusion

According to the Australian nursing standards RNs are responsible for providing professional development to nursing students on clinical placements. Results from this Grounded Theory study revealed that participants perceived it is an RNs choice whether or not to provide professional development to nursing students.

INTRODUCTION

When an RN renews their annual licence to practice in Australia they must declare they will practice (or begin to practice) according to the national nursing standards (NMBA 2016b). This process is similar in other countries such as the United Kingdom (UK), New Zealand and Canada, who also have annual registration renewal systems that require RNs to declare they will practice according to their respective country's nursing standards (Nursing and Midwifery Council 2015a; Nursing Council of New Zealand 2015; Canadian Nurses Association 2014). Embedded within the Australian registered nurse standards for practice is the requirement for RNs to contribute to the professional development of nursing students (NMBA 2016a). According to these standards "as part of practice, RNs are responsible and accountable for supervision and the delegation of nursing activity to enrolled nurses (ENs) and others" (Nursing and Midwifery Board of Australia 2016a, p.1) where the term 'others' includes nursing students. Furthermore standard number 2.7 states the RN "actively fosters a culture of safety and learning that includes engaging with health professionals and others, to share knowledge and practice that supports person-centred care" (NMBA 2016a, p.3). Similarly, other countries including Canada, the Republic of Ireland and the UK, have the expectation that RNs will provide nursing students with professional development embedded within their own nursing standards (Nursing and Midwifery Council 2015b; Nursing and Midwifery Board of Ireland 2014; College of Registered Nurses of British Columbia 2012).

Nursing students depend on RNs to teach and support them during their clinical placements (Daly et al 2014). Students rely on the knowledge and experience of RNs to teach them how to apply the skills they have learned in the classroom to a clinical environment (Rhodes et al 2012). However, the research literature suggests students do not always have good learning experiences when they are on clinical placements (Kassem 2015). In fact, sometimes they are "perceived as a burden and teaching not part of the registered nurse role" (Ó Lúanaigh 2015, p.451). According to Sanderson and Lea (2012) role confusion can occur in regards to RNs function with nursing students who are on clinical placements. This Grounded Theory study explored RNs understanding of the nursing standard requirement to provide nursing students with professional development during their clinical placements. This paper reports on a major category that emerged as a result of this Grounded Theory study, that is, choice.

METHODOLOGY

Grounded Theory methodology was used in this study. Grounded Theory was chosen as a research methodology because there was no known research about RNs understanding of the nursing standard that requires them to provide professional development to nursing students on clinical placements.

Ethics approval for this research was granted by the University Health and Medical Human Research Ethics Committee (Approval No: HE12/141). The study site was in Queensland, Australia. Fifteen participants were interviewed and included RNs with a minimum of five years' experience who had prior involvement working with nursing students on clinical placements. Of the fifteen participants, thirteen were female and two were male. One of the participants worked as a clinical nurse educator, three had nursing management roles and the remaining eleven participants were employed as clinical nurses (working clinically). Participation was voluntary and participants could withdraw at any time without prejudice. No participants withdrew from this study.

Individual semi-structured interviews were conducted with the participants to collect data. Each interview was approximately 45 minutes in length. Data from each individual interview was analysed using the constant comparative analysis technique. As data was collected it was analysed and sorted into codes and categories.

Data collected from subsequent interviews was then analysed and compared to existing codes and categories (Strauss and Corbin 1998). When no new data emerged the categories that were formed eventually became saturated, that is, data saturation had occurred (Liamputtong 2009). This paper reports on one of the categories from this research project, namely, *choice*.

FINDINGS

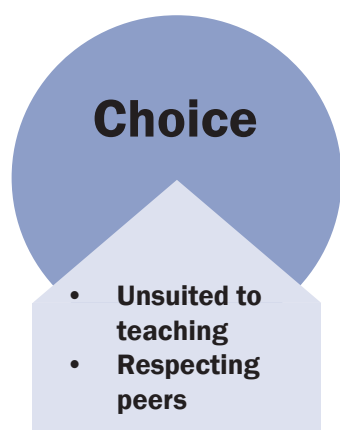
Choice

The category *choice* emerged from the notion that participants believed it acceptable to choose whether or not to provide professional development to nursing students on clinical placements. Participants expressed that it should be a personal choice whether or not to provide professional development to nursing students.

So it should still be a choice but you would want to have a -- I would think that you would want to have a good reason for not wanting to be involved as a registered nurse (P10).

Two subcategories inform choice. These are: unsuited to teaching and respecting peers. The subcategory unsuited to teaching is about how participants described that it was preferable for some RN's not to be involved in the professional development of nursing students because they were deemed as being unsuited to teaching students. The subcategory respecting peers explains how RNs would accept their peers' decision whether or not they wanted to contribute to the professional development of nursing students. Figure 1 provides a visual illustration of the category choice.

Figure 1: Choice



Unsuited to teaching

Participants generally believed that some RN's were *unsuited to teaching* and were better off not contributing to the professional development of nursing students.

Yeah, no. She's just, yeah. I love her to death but as a student I would not want her as my preceptor. And she's too old to look at her own self and say "Hey, they might actually take me the wrong way", or, "Hey I can be a little bit abrupt maybe I need to change how I interact with people." You'll never change her now. It's too late. So I said we need to evolve people out (P1).

I think it's better for the students if they're placed with someone who wants to teach them, rather than someone who sees them as a major burden and really don't want them there. You still try to get the staff to have students and sometimes they don't have a choice, but feedback I've heard from students is they often have better experiences with the staff that want to teach them (P9).

There was suggestion that some RNs are not comfortable with providing professional development to students.

Yes, I know some people, yes, some people are really put off by it. They are just not comfortable doing it (P2).

Others were considered harsh to students.

But sometimes they're more critical of the students. So, like more destructively critical of the students (P15).

Burnout in nursing is well known (Melvin 2015). Participants highlighted burnout in respect to providing professional development to nursing students.

So if you've had say a student Monday to Friday for a week and you've given your heart and soul into it, and then the next Monday you've got a start all over again with a new student, eventually if you're not careful you'll burn that person out (P8).

And there are times when I know myself I've gone, Oh my God, not another student for goodness sake (P9).

Maybe we get a bit jaded about having the students because it just seems to be that week after week after week there's a new lot of students coming in or we just have some that are there for 4-weeks, they go, then the following -- we get another lot of students and sometimes you know, I mean it's good for us as it keeps us on our toes and makes sure that we're kept up to speed and fresh about policies and doing the right things, don't get into bad habits, but sometimes you just wish you didn't have someone with you because it can be very draining especially if your shift is very, very busy (P13).

Sometimes participants said they just did not feel like having to provide professional development to students.

If I'm really ragged and I can't -- and I know that I haven't got perhaps as much patience or I just haven't -- I'm not thinking as clearly as I'd like to, I'd always say that to my colleagues and I say look maybe not today, maybe today's not a good day for me to do this. And we've talked about that as well at times because it's not fair on the students if you try and take on that responsibility and then you're not ready for it and that poor student will go home at the end of the day and probably think to themselves right, I don't really want to do this again (P5).

As well as expressing how some RNs are *unsuited to teaching*, participants respected their peers' choice whether or not to provide professional development to students.

Respecting peers

The theme *respecting peers* is about participants being respectful of their peers' decision not to provide professional development to students. Participants indicated a general acceptance of the practice of not contributing to the professional development of students despite the nursing standard saying they should. Sometimes students were purposely not allocated to particular RNs:

So, they avoid -- say for example the person in charge would avoid giving them to somebody that they know that wouldn't teach them properly I suppose you could say (P7).

There was acceptance that some RNs did not want to contribute to the professional development of students.

They've had students and they just don't want to do it anymore. They've sort of -- well I've done my time, I've put in the time and it's my time not to do it anymore, there's other people that you can ask you know (P2).

There was also recognition that RNs sometimes needed a rest from students:

If you have students for 2 or 3 months and just about every shift you work you're working with students, mentally it's draining and sometimes it's just nice to be able to go, okay I just want to do my work and not have to worry about a student. So yes, I do think they -- and it's important for them, it's important for the staff and the student that the staff aren't becoming -- resentment towards the students, and come to work with the attitude of oh my God I've got a student again today (P9).

Being respectful of how an RN feels in regards to having students was further highlighted by the following participant:

I mean you have to respect the individual and how they're feeling because if they're not interested in having a student, the student is not going to get anything from it and it's probably going to even put a student off going back to their second year or -- you don't want them to have bad experiences and if the nurse -- registered nurse is not interested and not into it well then you know, I don't think it's fair to -- that the student has to be submitted to that (P11).

In summary, participants believed that it was a personal choice whether or not to provide professional development to students. It was suggested that some RNs are unsuited to teaching nursing students. Being unsuited to teaching was considered appropriate justification for not being allocated nursing students. Participants were respectful of their peers' decision in regards to whether or not they wanted to be allocated students. To conclude, there was a belief that RNs could choose whether or not they wanted to be involved with the professional development of nursing students. This is relevant to nursing because according to the Australian nursing standards (NMBA 2016a) it is an RN's responsibility to provide professional development to nursing students and, furthermore, nursing students rely on RNs to teach them in the clinical environment in order to become competent practitioners.

DISCUSSION

This study explored RNs' understanding of the nursing standard requirement to provide nursing students with professional development during their clinical placements. Findings suggest that participants believed it is an RNs choice whether or not they contribute to a nursing student's professional development. The literature also suggests RNs tend to believe that providing professional development to nursing students is a choice.

Chuan and Barnett (2012) in their Malaysian study found RNs attitude toward students influenced students' learning. They found some RNs were not willing to teach students and were unpleasant to the students. This type of behaviour by RNs can adversely affect student learning (Levett-Jones and Lathlean 2009; Levett-

Jones et al 2007) which can ultimately effect the students' ability to deliver safe patient care. According to participants in this Grounded Theory study, RN's who behave in this way towards students tend to be referred to as *unsuited to teaching*.

Burnout which is a component of compassion fatigue, is emotional or psychological distress that can effect one's wellbeing (Gibbons et al 2011). Burnout from having students is known to occur to some RNs who regularly are allocated students on clinical placements (Courtney-Pratt et al 2012; Haydock et al 2011) and, according to this Grounded Theory study, can make some RNs become unsuited to teaching. Burnout from continuously having students should be managed within healthcare organisations however according to Brann and Gustavson (2013) management tends to overlook the extra work that goes with providing students with professional development.

Brown et al (2012) found sometimes students are not allocated to certain RNs because they [the RNs] were not considered suited to teaching students. In the same way findings from this Grounded Theory study describe how RNs were purposefully not allocated students because they were unsuited to teaching. Moreover, not all RNs feel confident with their ability to teach students (Luhanga et al 2010). Lack of confidence in teaching ability can deter some RNs from wanting to contribute to the professional development of students (Mather et al 2015).

Some RN's are simply hesitant to be involved in the professional development of nursing students (Brammer 2008). In their study, Levett-Jones and Lathlean (2009) found that RNs would argue during handover, directly in the presence of nursing students, over who would take the students because the RNs did not want to be allocated students. Lengthy debate of up to 'ten minutes' duration over who would or would not have the students would occur (Levett-Jones and Lathlean 2009, p.2874). This is an example of the behaviour of choosing not to contribute to the professional development of students as an accepted practice by some RNs. Similarly Brown et al (2012) describes negative body language and unfriendly behaviour towards students by RNs during handover. Brown et al (2012) found clinical teachers are inclined to accept this behaviour and focus on helping the students to get through their clinical placements.

Leners et al (2006) assert that some RNs just refuse to work with students. Dickson et al (2006, p.419) found clinical facilitators tend to avoid putting students with RNs who have the attitude of "Oh no not students again!" This demonstrates clinical facilitators (RNs) yielding to the negative attitudes of their peers toward nursing students. This is similar to the finding in this research where participants described they had observed RN's accepting their peers' decision whether or not to be involved in the professional development of nursing students.

Students depend on RNs to help them to develop their nursing skills and become competent in the clinical area. If RNs do not adhere to the practice standard requirements in regards to providing professional development to nursing students then students are at risk of not acquiring the necessary clinical expertise in order to become safe, competent practitioners when they graduate. This, in turn, could have implications for patient safety. Furthermore the NMBA (2017, para 1) states RNs must "meet the NMBA's professional standards in order to practise in Australia". RNs can be deregistered if they contravene professional boundaries, are unsafe and/or do not meet the nursing standards (AHPRA, 2017). If RNs do not adhere to the practice standards in regards to their responsibilities towards nursing students they are not meeting the professional standards.

LIMITATIONS

Limitations to this research project include that all participants were RNs from one state in Australia, Queensland and that the sample size was fifteen (n=15), meaning, the research was conducted on a specific group of

people and the sample size was small. With this in mind, a qualitative research project aims to develop an overall understanding of a phenomena rather than to generalise findings from a quantitative perspective. RNs who read this research may find they can relate to the research results because an understanding of the phenomena resonates with them.

CONCLUSION

Participants in this research believed it was an RN's choice, rather than a mandated nursing requirement, whether or not to be involved in the professional development of nursing students on clinical placement. Findings revealed that being unsuited to teaching was justification for not being allocated nursing students. Furthermore participants explained how they were respectful of their peer's decision (choice) whether or not to be involved in the professional development of nursing students. This provides insight into why sometimes students on clinical placements do not feel supported by RNs. The findings demonstrate lack of consistency in the level of professional development provided to students on clinical placements. This is important because even though students are taught clinical skills at university; the students depend on RN's assistance and support in order to safely practice the nursing skills they have learnt in the classroom on real live patients. In other words, nursing students rely on the support and clinical expertise of qualified RNs to help them to become competent.

RECOMMENDATIONS

- Education is needed to raise RNs awareness that it is a nursing standard requirement to provide professional development to nursing students on clinical placement.
- Workshops are needed to educate RNs how to teach and support nursing students in the clinical environment so RNs can confidently provide students with professional development.
- To avoid burnout, additional time should be factored into RNs' workloads when they are allocated students.

REFERENCE LIST

- Australian Health Practitioners Regulation Agency (AHPRA). 2017. *What we do*. Retrieved from <http://www.ahpra.gov.au/About-AHPRA/What-We-Do.aspx> (accessed 20.3.18).
- Brammer, J.D. 2008. RN as gatekeeper: Gatekeeping as monitoring and supervision. *Journal of Clinical Nursing*, 17(14):1868-1876.
- Brann, M. and Gustavson, R. B. 2013. The inconvenient truth about nursing workload. *Nevada RNformation*, 22(3):10-21.
- Brown, J., Stevens, J. and Kermodie, S. 2012. Supporting student nurse professionalisation: The role of the clinical teacher. *Nurse Education Today*, 32(5):606-610.
- Canadian Nurses Association. 2014. *Canadian registered nurse examination competencies June 2010 – May 2015 professional practice*. Retrieved from <https://www.cna-aiic.ca/en/becoming-an-rn/rn-exam/competencies> (accessed 01.05.14).
- Chuan, O.L. and Barnett, T. 2012. Student, tutor and staff nurse perceptions of the clinical learning environment. *Nurse Education in Practice*, 12(4):192-197.
- College of Registered Nurses of British Columbia. 2012. *Regulatory supervision of nursing student activities*. Vancouver, BC. Retrieved from www.crnbc.ca (accessed 01.10.16).
- Courtney-Pratt, H., Fitzgerald, M., Ford, K., Marsden, K. and Marlow, A. 2012. Quality clinical placements for undergraduate nursing students: A cross-sectional survey of undergraduates and supervising nurses. *Journal of Advanced Nursing*, 68(6):1380-1390.
- Daly, J., Speedy, S. and Jackson, D. 2014. *Contexts of nursing*. Chatswood, Australia: Elsevier.
- Dickson, C., Walker, J. and Bourgeois, S. 2006. Facilitating undergraduate nurses clinical practicum: The lived experience of clinical facilitators. *Nurse Education Today*, 26(5):416-422.
- Gibbons, C., Dempster, M. and Moutray, M. 2011. Stress, coping and satisfaction in nursing students. *Journal of Advanced Nursing*, 67(3):621-632.
- Haydock, D., Mannix, J., and Gidman, J. 2011. CPTs' perceptions of their role satisfaction and levels of professional burnout. *Community Practitioner*, 84(5), 19-23.

- Kassem, A. H. 2015. Bullying behaviors and self efficacy among nursing students at clinical settings: Comparative study. *Journal of Education and Practice*, 6(35):25-36.
- Leners, D., Sitzman, K. and Hessler, K. L. 2006. Perceptions of nursing student clinical placement experiences. *International Journal of Nursing Education Scholarship*, 3(1):1-17.
- 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(20):2870-2879.
- Levett-Jones, T., Lathlean, J., Maguire, J. and McMillan, M. 2007. Belongingness: A critique of the concept and implications for nursing education. *Nurse Education Today*, 27(3):210-218.
- Liamputtong, P. 2009. *Qualitative research methods* (3rd ed). South Melbourne, Australia: Oxford University Press.
- Luhanga, F.L., Billay, D., Grundy, Q., Myrick, F. and Yonge, O. 2010. The one-to-one relationship: Is it really key to an effective preceptorship experience? A review of the literature. *International Journal of Nursing Education Scholarship*, 7(1):1-15.
- Mather, C.A., McKay, A. and Allen, P. 2015. Clinical supervisors' perspectives on delivering work integrated learning: A survey study. *Nurse Education Today*, 35(4):625-631.
- Melvin, C.S. 2015. Historical review in understanding burnout, professional compassion fatigue, and secondary traumatic stress disorder from a hospice and palliative nursing perspective. *Journal of Hospice and Palliative Nursing*, 17(1):66-72.
- Nursing and Midwifery Board of Australia (NMBA). 2016a. *Registered nurse standards for practice*. Canberra, ACT: Nursing and Midwifery Board of Australia.
- Nursing and Midwifery Board of Australia (NMBA). 2016b. *Renewal of general registration for Registered Nurses: Nursing and Midwifery*. Canberra, ACT: Nursing and Midwifery Board of Australia.
- Nursing and Midwifery Board of Australia (NMBA). 2017. *Professional standards*. Retrieved from <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx> (accessed 8.2.17).
- Nursing and Midwifery Board of Ireland. 2014. *The code of professional conduct and ethics for registered nurses and registered midwives*. Retrieved from <http://www.nursingboard.ie/en/code/collaboration-with-others.aspx> (accessed 10.8.16).
- Nursing and Midwifery Council. 2015a. *Legal requirement to be on the register*. Retrieved from <http://www.nmc.org.uk/registration/staying-on-the-register/legal-basis-of-registration/> (accessed 14.12.15).
- Nursing and Midwifery Council. 2015b. *The code: Professional standards of practice and behaviour for nurses and midwives*. London: Nursing and Midwifery.
- Nursing Council of New Zealand. 2015. *Annual practising certificates (APCs)*. Retrieved from <http://www.nursingcouncil.org.nz/Nurses/Annual-practising-certificates> (accessed 4.11.15).
- Ó Lúanaigh, P. 2015. Becoming a professional: What is the influence of registered nurses on nursing students' learning in the clinical environment? *Nurse Education in Practice*, 15(6):450-456.
- Rhodes, M. L., Meyers, C. C. and Underhill, M. L. 2012. Evaluation outcomes of a dedicated education unit in a baccalaureate nursing program. *Journal of Professional Nursing*, 28(4):223-230.
- Sanderson, H., and Lea, J. 2012. Implementation of the clinical facilitation model within an Australian rural setting: The role of the clinical facilitator. *Nurse Education in Practice*, 12(6):33-339.
- Strauss, A. and Corbin, J. 1998. *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd edn). Thousand Oaks, London: SAGE Publications Inc.