Nursing School Ideals vs. Clinical Realities

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Background

Beginning nursing students learn about the ideals of clinical nursing practice in their early classroom and clinical preparation.

Because they have little practical experience in clinical situations, beginning nursing students are not able to differentiate nuanced, individualized, patient-centered care from incongruences or breaches in accepted safe and ethical practice (Nairn et al, 2012; Kitwood, 1997; McGarry et al, 2009).

Moreover, because beginning nursing students do not yet have the self-confidence and professional judgment which comes from experience, they often do not raise these concerns for discussion with their clinical faculty or preceptors (Hunink et al, 2009). Thus, opportunities for learning, reflection and clarification of professional practices and values are lost (Comrie, 2012).

Purpose

The purpose of this study is to identify potentially difficult or troubling situations encountered by beginning nursing students in their first year of clinical experiences. The research questions of this study are:

1. Do beginning nursing students perceive that they witness difficult safety and ethical issues in their initial clinical rotations?

2. How do beginning nursing students’ knowledge of the ‘ideal’ clinical world and little experience with the ‘real’ world, influence their perceptions and sensitivity to difficult safety and ethical situations encountered in the clinical setting?

3. How do beginning nursing students respond to these experiences, and do they feel prepared by their nursing education to handle such situations?

4. Do beginning nursing students who are new to the field, have new and creative ideas for preventing difficult safety and ethical issues encountered in the clinical setting?

Methods

• Literature Review
  – Databases used included CINAHL Plus with Full Text, MEDLINE with Full Text via EBSCO, and Google Scholar.
  – Key terms included moral sensitivity, undergraduate, student nurses, reality shock, and ethics.
  – Data on each of the reviewed articles, including purpose, method, sample, findings, and recommendations, were entered into a matrix and then analyzed to identify similarities and differences within the articles. Questions from the studies were also identified and compared.

• Online Survey
  – Developed to test the questions of the study
  – Consists of:
    • Newly developed questions
    • Existing tool - Modified Moral Sensitivity Questionnaire for Student Nurses (MMSQ-SN) which analyzes moral sensitivity in undergraduate nursing students (Comrie, 2012).

  – Beginning nursing students from nine RN programs in Western New York will be requested to participate in this project.

  – Some participants may benefit from sharing/descrating a particularly difficult situation they encountered in the open-ended question. Students are often reluctant to share these situations with their clinical instructors or preceptors due to fear or intimidation.

Conclusions

What we learn from this study can be incorporated into future nursing curriculum for beginning students to better prepare them for the realities of the clinical setting and to provide them with strategies to deal with these difficult situations. Nursing faculty and clinical nursing preceptors have a unique opportunity to shape the values and ethical reasoning of nursing students (Park et al, 2012; Garity, 2009). Dialogue, mentoring, and role modeling cultivate moral sensitivity and ethical reasoning, which can translate into graduates and future nurses who have the tools and skills to deal creatively and effectively with ethical conflict and provide leadership to contribute to responsive, patient-centered work environments (LeDuc & Kotzer, 2009; Park et al, 2012; Hunink et al, 2009; Garity, 2009; Kelly, 1993; 1998).

References