

While placements are essential to help students develop skills and relate theory to practice, unsupportive mentors can increase anxiety and prevent students from learning

Creating supportive environments for students

In this article...

- › Literature review of student experience on placement
- › Mentors' role in enhancing student nurse learning
- › How clinical areas can better facilitate student learning

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Abstract Emanuel V, Pryce-Miller M (2013) Creating supportive environments for students. *Nursing Times*; 109: 37, 18-20. Appropriate clinical placements are an essential part of pre-registration nurse education. They provide students with the opportunity to learn practical skills and gain knowledge, so students' learning is heavily dependent on the quality of support mentors provide.

At the end of each clinical placement, student nurses are asked to evaluate the experience. One recurring theme to emerge from these evaluations is that students often perceive mentors to be too busy to provide the required level of support. This can lead to increased levels of anxiety for students as they may feel unsupported. Mentors are one of the critical factors affecting students' ability to learn and cope on their placements.

This article examines the current situation and highlights how mentors can enhance the clinical experience for students.

It is the responsibility of higher education institutes (HEI) in partnership with the NHS to prepare nurses and midwives to cope with the complex nature of clinical practice (Burns and Paterson, 2005). By doing this, we can help students become knowledgeable, skilled and fit for practice and able to provide high-quality patient care. With this in mind, undergraduate student nurses need to be supported by experienced and competent mentors. The

Nursing and Midwifery Council (2008) has defined mentors as practitioners who facilitate learning, supervise and assess students in the clinical setting and have set standards to support learning in practice. The NMC places responsibility on mentors to provide support and guidance and act as positive role models to ensure that at the end of the pre-registration nursing course students are fit for purpose.

Pre-registration nurse education in the UK has undergone radical changes over the last decade (Brown et al, 2005). Nursing is now an all-degree entry profession and the NMC (2010) has introduced new standards for pre-registration nursing practice, requiring students to demonstrate their fitness for practice in order to become a qualified nurse and be placed on the NMC register. Individual student nurses have to complete practice assessment documents verified by a sign-off mentor with a minimum of 12 months' experience.

In order to provide high-quality nursing care to patients, student nurses need to learn theoretical knowledge as well as practical skills. Cope et al (2000) emphasises the importance of student nurses being taught to link the theory learnt in university to the realities of nursing practice. Teaching is a major aspect of the mentors' role; however, mentors often report a lack of both time and resources to facilitate learning, which can lead to students feeling unsupported, and may contribute to higher drop-out rates. To prevent this, nurse educators should make the purpose of clinical learning explicit to both students and mentors.

Literature review

Enormous expectations are placed on student nurses. They are expected to develop

5 key points

1 Students need to be able to demonstrate their fitness for practice in order to be placed on the nursing register

2 Clinical placements are essential for teaching students new skills and to link theory to practice

3 Student nurses frequently report negative experiences on placement and anticipate hostility

4 Although students find placements anxiety provoking, effective and supportive mentorship can help to reduce this

5 Mentors sometimes need to prioritise patient care over student learning due to staff shortages

an understanding of compassionate practice and nursing theory and to develop this understanding through working in partnership with patients (Royal College of Nursing, 2008). According to Henderson (2011), learning in practice settings is invaluable for pre-registration student nurses, which is why placements account for 50% of the nursing curriculum. Students undertake various placements and have to adjust as they move from one environment to the next. Having to fit into the social and professional environment of the clinical area and be accepted as part of the team can be challenging and can increase the pressures students face.



Students value their contribution to care

QUICK FACT
50% Of the pre-registration nurse curriculum is taken up by placements

Environment

Students learn most effectively in environments that facilitate learning by encouraging and supporting and making them feel they are part of the team (Papp et al, 2003). If the environment is unpredictable, unstructured and overwhelming, students can be left with feelings of vulnerability and anxiety. Papp et al (2003) identified that issues such as staff shortages, a lack of mentors, increased workload, staff feeling threatened by student nurses, and poor teaching skills can contribute to students not feeling supported. Both the NHS and HEIs have a responsibility to provide a high standard of nursing education and support, which includes high-quality teaching and leadership in clinical education.

Papastarou et al (2009) found student nurses perceived serious deficits in practice learning. Not only do they frequently report negative experiences and dissatisfaction in the practice setting, but also they anticipate hostility and difficulties communicating with staff (Chan, 2001). Responding to their needs and demonstrating a positive attitude to teaching can enhance students' learning (Tsai, 2005).

Masoumi and Sharif (2005) conducted a qualitative study using focus groups to look at student nurses' opinions and experiences in practice. Three themes emerged as factors students consider important in clinical experience:

- » Anxiety;
- » Clinical supervision;
- » Professional role.

The students identified anxiety as the main theme; in particular the unfamiliarity of caring for patients and fear of making mistakes in the clinical environment caused

them to feel anxious. It could be argued that this anxiety is due to fear of the unknown, a sense of lack of knowledge and uncertainty about the professional role of the nurse. Nurse educators can reduce anxiety significantly by using simulation, where real-life case studies and scenarios are worked through and the roles and responsibilities of student nurses are outlined.

On placement, students value familiarity, acceptance, trust, support, respect and recognition of their contribution to patient care, emotional and clinical support and opportunities to practise, all of which can help to reduce anxiety (Box 1) (Chan, 2004). To provide students with this positive learning experience, HEIs and the NHS need to have a robust partnership with clear expectations on both sides so issues within the practice setting can be addressed.

Mentors

Research has shown problems with the level of support student nurses receive from clinical staff who are acting as their mentors. According to Pellatt (2006) fostering a relationship that is conducive to learning requires effort on the part of the mentor, and Bennett (2003) suggests that mentors need to take the time to get to know their students. Castledine (2002) found that clinical placements often are unwelcoming and unattractive to new students.

Student experience varies considerably, in some areas staff are adequately prepared and welcoming and in others students experience a poor working environment. O'Driscoll et al (2010) highlighted that although most mentors are aware of their role in working with student nurses, there are several barriers preventing them from giving the required support, such as organisational constraints, increased workload and perceived negative experiences (Box 2). Such constraints can lead to mentors having to prioritise patient care over student learning.

It is now compulsory for nurses to become mentors, but becoming effective in this role requires adequate preparation and teaching and assessing skills (Bray and Nettleton, 2007). It is questionable whether the length of mentorship training adequately prepares registered nurses to facilitate such complex learning. Often what may seem straightforward in the classroom is more difficult in clinical practice as the environment must be conducive to learning.

O'Driscoll et al (2010) identifies that the challenges faced by mentors include inadequate training to become a mentor and difficulties in taking responsibility for students without any reduction in their workload. Mentors felt that students should take more responsibility for their own learning and recognise opportunities, rather than expecting to be "spoon fed". In order to acquire and develop knowledge and skills, student nurses should consider what they can bring to the clinical setting and how to give their mentor feedback in order to develop mutual respect.

Discussion

It is imperative that an effort is made to improve student learning and satisfaction within the clinical setting and that student nurses are trained to deliver high-quality patient care. To be able to meet these challenges, students need to perceive themselves as empowered and supported when in clinical practice. The literature suggests that to provide effective student support, mentors must be positive role models, knowledgeable, and able to develop good working relationships. Robust mentorship encourages students to reflect on their role as a nurse and on working in clinical environments. However, it must be acknowledged that mentoring is not a

BOX 1. WHAT STUDENTS VALUE ON PLACEMENT

The following reduce anxiety during placements:

- Familiarity
- Acceptance
- Trust
- Support
- Respect and recognition of their contribution to patient care
- Emotional and clinical support
- Teaching based on current evidence
- Opportunities to practise

Source: Chan (2004)

BOX 2. BARRIERS TO MENTORSHIP

Barriers preventing mentors giving the required support to students include:

- Organisational constraints
- Increased workload
- Negative experiences
- Inadequate preparation for the role of mentor
- Staff shortages

Source: O'Driscoll et al (2010)

straightforward role. Staff shortages must be addressed as clinical areas often do not have the time to adequately support student nurses.

With the health service currently undergoing numerous reforms, qualified nurses are placed under increasing pressure to meet targets. This impacts on the level of support provided to student nurses as staff prioritise their workload over student learning. Strong collaboration between HEIs and clinical areas can positively contribute to students' experiences.

Conclusion

The knowledge and skills student nurses need to carry out their clinical roles must not be underestimated. Clinical support has been highlighted as an area where improvements can be made. This support is crucial and a critical factor in students' wellbeing. Students work in an evolving healthcare environment that requires nursing care to be delivered to an exceptional standard. It is therefore vital that mentors provide continuous support, constructive feedback and encouragement. **NT**

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