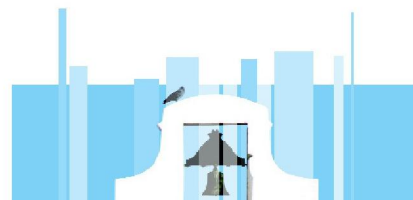


Success and failure on Clinical Education: teacher and students points of view

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Nursing is a human science profession and an academic discipline that focuses on the diagnosis and treatment of human responses to actual or potential health problems possessing its own distinct body of knowledge.

Nurses make use of caring behaviors and the science of nursing to facilitate positive adaptive responses in human beings by mobilizing human and environmental resources to promote healing, maintain well-being, prevent illness, and promote health based upon the understanding and application of scientific principles from the natural and social sciences.

Nursing education congregates knowledge and skill acquired or developed by the teaching-learning process considering future trends in health care. Nursing students learning care is aimed to all people throughout the lifespan.

TEACHER'S POINT OF VIEW

Clinical education settings include hospitals, aged care facilities, community centers, schools, prisons, humanitarian agencies. Those settings aim to provide unequalled opportunities and an environment that is demanding and supportive, where all students learn the practice of nursing through knowledge, skills practicing, an accurate professional attitude on care

deliverance and most of all the linkage to theoretical knowledge. These environments embrace cultural diversity and learning experiences opportunities and they become part of a multi-disciplinary team.

A major amount of practice experience takes place in a simulated practice setting, school laboratory, before students enter genuine practice locations, but caring for clients can not be simulated in these laboratory settings. Nursing classes provides knowledge and the opportunity to students develop competencies that make possible a nursing student to provide "safe care" for "real patients. Nursing students during Clinical Education are faced to new demands and adaptations in a personal level to a new reality and the adoption of appropriate behaviors to new requirements corresponds to a very important time in students' competences development.

They have contact with several factors promoting new acquisitions and personal reorganizations. No two days are likely to be the same in the nursing student daily life.

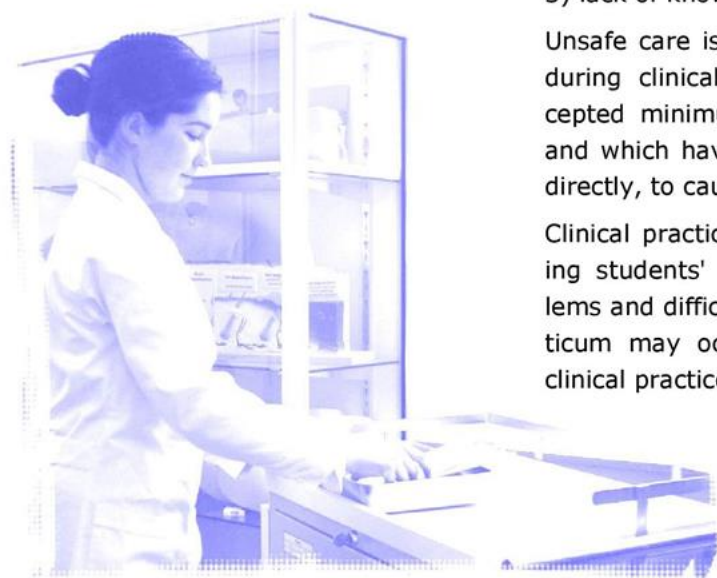
A nursing teacher in those contexts plays an important role in supervision, assessment and guarantee proper care delivery. The clinical teacher should be an empathic person who understands the students' feelings and tries to respond properly to those feelings.

He should have relational and human qualities, technical skills, capacity to make proper decisions and, most of all, pedagogical attitude.

Clinical supervision helps students to reach excellence, but It's a common thought that clinical teacher has a more evaluative role than a facilitator role. Teacher supervision is an enduring systematic process that encourages and supports improved nursing students practice, according to scholar standards procedures (Nursing Norms Procedures). Teacher expects a dynamic and positive relationship between students and him through counseling, supporting, sharing of knowledge and guided research. Guaranteeing each student as unique, clinical teacher is aware of different learning rates and develops strategies designed to meet the needs of each student. Clinical education learning processes are intended from simple to complex situations, with defined learning outcomes that are known by students.

Since the staff member is ultimately responsible for patient safety, close student supervision is required in all cases, especially when a student's performance is uncertain.

A constant feed-back to students should clarify to help prevent misunderstandings about their learning and practice development.



Clinical education assessment is centered especially in students' performance, results, knowledge, achievements and new competences in demand of safe care delivery.

The competency of nursing students is assessed by the nursing teacher, and the agency staff, on a daily basis, where are collected good and not-so-good (bad) episodes of their performance.

Students who demonstrate a satisfactory accomplishment of clinical objectives will pass, and for those who deemed unsafe or incompetent will fail on clinical education semester and has to repeat it on the forward year.

All faculty decisions, regarding clinical failures, must be guided by the professional and ethical conduct to ensure patient safety. Clinical teacher when identify a troubled situation with students performance and development, shares it within the clinical education staff. A meeting with the coordinator teacher, clinical teacher, clinical instructor, and student may be arranged to an explanation for the current situation, to provide study or behavior guidelines.

One or more of the following behaviors constitute clinical failure based on safety care:

- 1) unsafe performance;
- 2) inconsistent decisions, not supported by a proper making process; ?
- 3) lack of knowledge;

Unsafe care is any act, practice or omission during clinical education that fails the accepted minimum standards of nursing care and which have the potential, directly or indirectly, to cause damage.

Clinical practice is fundamental to the nursing students' learning however some problems and difficulties during their clinical practicum may occur. Stressful sources during clinical practice have been already studied by

many researchers, such as lack of clinical knowledge, difficult patients, fear of making mistakes and the constant feeling of being evaluated by teachers and local nurse staff.

One of the main causes of students' anxiety is some discrepancy regarding the theory-practice gap identified by students: what they were taught in theory is performed by staff members in different ways. Teacher promotes differences acceptance requiring students to referee in how they would perform on clinical practice and make use of critical thinking

Clinical teacher has a difficult role when a student fails. He was once a student as well and he is aware of the amount of pressure that students carry from personal goals and family expectations. But there are minimum demands to accomplish, based always on safety that might compromises patient and others, minimum learning outcomes to demonstrate.

Some students are away from they're families, and sometimes deal with economical issues. Failure represents more money, more effort, family disappointment and self-discrimination. Not to speak about loss of self esteem.

These aspects will probably reinforce the vicious circle of low expectations, low self-esteem and, in extreme cases, school defeat.

When Students are face to such experience, they should understand the learning opportunities of it and what and why turned into failure.

Students share this experience together as a group, and they get as much as affected as the failed student, becoming more anxious, leading to a conflict until they are able to accept they're peer failure.

STUDENTS'S POINT OF VIEW

WHAT IS LIKE TO BE IN CLINICAL EDUCATION, FOR A STUDENT?

To be in Clinical Education is, for every nursing student, a moment of great tension, great learning and both personal and professional growing.

The way they're obligated to suddenly grow up and become a more mature and responsible person is, sometimes, aggressive. This situation makes them, nurse students, and very special people.

During this time, they live situations that make them think and reflect about the kind of responsibility they have in their hands.

It's hard to separate the more and less importance experience that every nurse student lives because every single moment is a moment of learning and makes them grow as human beings and future nurses.



THE GROUPS: STUDENTS THAT WORK TOGETHER FOR A COMMON PURPOSE

In hospital, nursing students groups are usually bigger: four to seven students or more, friends and peers that live together very intensively each moment and make it a moment of friendship and complicity.

STUDENTS EXPERIENCES

Reflecting about the experiences between students, it's impossible not to mention the development of straight bonds, almost unbreakable, especially in the hospital because they spent many hours together, live so many moments of happiness and despair.

Each moment in Clinical Education marks the nursing student, all those hours are lived with tension, tension that affects them and their relationship, affects the communication with the teachers and clinical instructors.

SOME SUCCEED, SOME DON'T

Not every student succeeds and that's a fact that affects the entire group.

It it's hard for the rest of the group that succeeded to control the anxiety and worry not only for their own situation but also for their colleagues.

"It's not easy to see a colleague that is also a friend and companion not to succeed and not be able to help him."
JF

"We know and have full understanding that all these facts affect us and our performance and tend to acquire the responsibility to ourselves, the responsibility of not being able to help and protect every member of our group, without understanding that our individual performance is affected."
CS

The group also learns with their colleague's mistakes, even those who stood slightly behind. To those colleagues, they'll understand that what happened was important in their



growing and learning and that they can make that a positive experience that won't repeat itself. Not to succeed is a common thought that was always referred by every student during Clinical Education. This was a very difficult time, the group left behind some of their colleagues in a short period of time...

Every student refer more difficult periods than others, days that they all felt down, not an easy time for them, students and not easy for our clinical teacher.

And for those who have not succeed?

"The first felling is denying, then resignation for what happened. One year of our lives was lost, our self-esteem and confidence was shacked...Then the reaction of our family and friends that don't seem to understand the importance of what happened." CC

And after that? The student realizes that he or she has to move on, that every learning is a positive achievement and that the same mistakes won't be made twice... Colleagues will never stop being our colleagues and friends.

WHAT WERE THE REASONS POINTED BY THE STUDENTS TO AN UNSUCCESSFUL CLINICAL EDUCATION?

Too many hours on bus, tiredness, physically exhaustion were some of

the reasons pointed to failure.

"We all have problems in our lives that sometimes we're not able to leave outside, we were nervous and tense (this was our first great proof!), we all were afraid to commit stupid mistakes that lead us to failure" CL

Our education only makes sense if we're open to change and to learn new things or it won't be a successful learning.

THE SUPPORTING GROUP

Most of the times, each member/student is a support to the rest of the group, a smiling face that make each one of them believe that everyone can proceed and succeed and overcome this step in their learning.

Changing experiences was a positive aspect: discussing, criticizing and analysing some situations in group, always supporting themselves, making every member look to everything that happened with the feeling that they had learn.

STUDENTS EXPECTATIONS

When a clinical education has began, every student has several expectations of what will happen: some are afraid because they don't know the Hospital, the nursing instructors that will guide them and even the teacher. This insecurity always drives them to think they can not make it!

"Some of our friends surprised us during this time: we knew each other but always outside the hospital and did not know how it would be to have them as colleagues on Clinical Education. It's amazing how some of us overcome everything we've expected: we've hopped to be a nice group, friends that help each other in bad times; We found in each one of us an ally that made the whole process easier, bearable and even funny." RS

"I hoped I could overcome myself, focus on my work and always give my best." AA

Analysing all this feelings and expectations, students refer that consider themselves able to do a good job, yet conscientious that they also have a long way to pursue. They need self-control and need to acquire knowledge so that they can become good professionals, not only as social unit but also as a community member from our College.

Beside this aspects already mentioned, *"I think it's important to focus on the positive side of this CE, I've acquire great manual ability, more self confidence, I've established great relationships with the people I took care of and even with the professionals that guided me."* CL

STUDENTS EMOTIONS

Thinking of all the emotions the students have experienced, there were situations of great intensity... There were days that they refer to have

needed a great capacity of abstraction not to fall apart in front of our patients, in front of someone that expected them to be able to give them comfort and hope.

"There were days I thought that being a nurse wasn't on my destiny, I thought I wouldn't be able to follow my way, which I believed that the choices I had made for my life weren't the right ones. I really believed I was fighting for something that I would never be good at. I heard things that hurt me, others that made me smile. Some days I woke up with the feeling not to go, that something would go wrong!" CC

In fact, we've always tried to give our best and none of us regrets that...

Maybe for lack of experience, students always have tendency to be emotionally attached to those he/she takes care of and it's very hard not to see progressions on their health and to see them getting worst.



"None of us will forget all those persons we took care of, who helped us and trusted us to take care of them." CS

THE INSTITUTIONS

All the institutions where our students have performed Clinical Education gave them experiences in contact with distinguished realities, some more complicated than others, that made them think about their abilities, their behaviour as students and as human beings.

Some students refer they had to leave the hospital exactly when they felt themselves more confident; nevertheless, they also refer to find this aspect very positive because this fact allowed them to contact with different realities, equally rich in knowledge.

OUR PERCEPTION OF TEACHERS PARTICIPATION

The teacher also has an important part in this phase, he is a constant presence, always with the student, always available to support him and criticize, making the student think for himself, and yet always open to any suggestion.

It is understandable to the group that any member's failure is also complicated for the teacher as much as it is for the students.

Although the group feels that the presence of a teacher is very important and knows that he's there for them, after the failure of any group member, this relationship tends to achieve an extreme: if the student accepts and understands what happened, their relation becomes stronger; if the student does not agree or can not understand all the events that led to that situation, this relation tends to become colder.

Nevertheless, all the students agree in one point: teachers' presence is to support them and help them to become excellent health professionals.

HOSPITAL'S REALITY

In this context, the student has to develop abilities of critical thinking, organization and practices, always having in their mind that time management is essential to become a good nurse.

This fact can also be a stressful factor: to have so many things to do and have to do them well done and have to make them on schedule.

At this stage, the student has theoretical knowledge to make things right, he is prepared to do it but the first impact is always very hard for every one of them, they don't feel they have the "Know how" to do it right.

They need practice and that they only acquire it in time, in clinical settings.

In this context the student is allowed to experience the true concept of team work, thought in school. Without team work, this would be a really difficult time.

CONCLUSION

Each moment in Clinical Education is a moment of personal and professional growth, so intense that some times the student doesn't see it happening, he can only understand his own changes some time later.

Those are moments lived individually in an intense way.

"Looking back and looking forward, we all agree that we have left this first experience in CE with absolutely sure that being a nurse is what we want to do, take care of others, despite the responsibility that it implicated, this is what fulfils us. Changing experiences, we now know that we could never have chosen another job, another way of life (as some of us initially thought we could)." CS



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