



**READINESS OF NURSING STUDENTS IN ENTERING CLINICAL
PRACTICE: A STUDY OF PHENOMENOLOGY**

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ABSTRACT

The government's policy requires all parties to prepare for the New Normal stage, including the education sector. During the new normal era, online learning has shifted to limited face-to-face learning with the implementation of health protocols. Such a situation can affect student learning readiness which is adjusted to the conditions, legal basis, and the learning process in general. This study aimed to explore the experiences of nursing students' readiness to enter clinical practice. The research method used qualitative with a descriptive phenomenological study approach. The population was nursing students' batch 2020 at a West Indonesia Private University with a purposive sampling was 5 participants, data saturated. The research instrument used in-depth, semi-structured interviews conducted by the researcher. Five themes emerged namely increasing knowledge of nursing students in theory and practice, preparing physically to enter clinical practice, mental preparation to enter clinical practice, nursing students' perceptions of clinical practice, and motivation of nursing students to prepare for clinical practice. Nursing students prepare themselves physically, mentally, and emotionally and increase their knowledge to enter clinical practice to improve their skills and not cause errors, anxiety, and doubts. Further examination of the influencing factors of nursing students' readiness to enter clinical practice is required.

Keywords: motivation; attitude of health personnel; clinical skill; anxiety; students, nursing

ABSTRAK

Kebijakan dari pemerintah mengharuskan semua pihak untuk bersiap pada tahap New Normal termasuk bidang pendidikan. Berdasarkan Surat Keputusan Bersama 4 Menteri bahwa pembelajaran daring dialihkan menjadi pembelajaran tatap muka terbatas dengan penerapan protokol kesehatan. Hal ini dapat mempengaruhi kesiapan belajar mahasiswa yang disesuaikan dengan kondisi, dasar hukum serta penerapan proses pembelajaran. Penelitian ini bertujuan untuk menggali secara mendalam pengalaman kesiapan mahasiswa keperawatan dalam memasuki praktik klinik di era new normal. Metode penelitian yang digunakan adalah kualitatif dengan pendekatan studi fenomenologi deskriptif. Populasi penelitian ini adalah mahasiswa keperawatan pada satu Universitas Swasta Indonesia Barat angkatan 2020. Metode pengambilan sampel pada penelitian ini yaitu purposive sampling dengan jumlah 5 partisipan dan sudah mencapai saturasi data. Instrumen penelitian yang digunakan yaitu wawancara mendalam (in-depth interview) yang dilakukan oleh peneliti. Penelitian yang dilakukan menghasilkan 5 tema yaitu meningkatkan pengetahuan mahasiswa keperawatan secara teori maupun praktik, kesiapan fisik dalam memasuki praktik klinik, kesiapan mental dalam memasuki praktik klinik, persepsi mahasiswa keperawatan tentang praktik klinik, dan motivasi mahasiswa keperawatan untuk mempersiapkan diri menjalani praktik klinik. Peneliti selanjutnya dapat meneliti tentang faktor-faktor yang mempengaruhi kesiapan mahasiswa keperawatan dalam memasuki praktik klinik dengan metode kuantitatif.

Kata Kunci: motivasi; sikap; keterampilan klinik; cemas; mahasiswa keperawatan

INTRODUCTION

The New Normal policy requires all parties to prepare for the New Normal stage, including in the field of education in increasing productivity in accommodating learning needs (Fatmawati & Lilawati, 2021). The implementation of learning that is shifted to limited face-to-face learning will affect the world of education including the readiness of students in the face-to-face learning process

in Indonesia because it must be adapted to the conditions, legal basis, and application of the learning process. The readiness must be prepared by students regarding the psychosocial aspects of the students who must apply health protocols when entering the classroom, regular and mandatory learning schedules, and activities other than academic learning (Nugroho et al., 2020).

Student readiness in learning can determine the quality of the learning process, making it easier for the students to concentrate, so that they can obtain good learning achievements. If the preparation is done well, the adjustment will also be faster, and students can enjoy the learning process (Mulyani, 2013). The process of learning readiness, students are required to be active and learn independently. Each individual must have the formation of readiness to learn something new because they have different development backgrounds (Idamayanti, 2020).

A study conducted using a literature study approach found that the readiness of the face-to-face learning process in Indonesia during the COVID-19 pandemic must be adjusted to the conditions, legal basis, and application of the learning process. The readiness that must be prepared by students is psychosocial from the students who must apply health protocols when entering the classroom, regular and mandatory learning schedules, and activities other than academic learning (Nugroho et al., 2020). Based on observation conducted to nursing students in the Faculty of Nursing at a University in Western Indonesia, which has conducted limited face-to-face learning, namely clinical practice by paying attention to health protocols such as limiting the number of students in the room, maintaining distance, requiring the use of double masks in the practice environment, and providing hand sanitizer. Furthermore, all students and lecturers must be fully vaccinated and take routine swab checks that have been scheduled and show negative results before participating in clinical practice.

Preliminary survey conducted on 25 students in batch 2020, it was found that 13 out of 25 respondents stated that they were ready to study offline in the new normal era and they are better prepared physically than socially or psychologically. The readiness is done by preparing themselves by studying the material and preparing masks, hand sanitizers, and vitamins. But instead, 12 out of 25 respondents stated that they were not ready to study offline in the new normal era, because they have not been able to adapt well, still hesitant and have not fully mastered the material, are used to online learning, and still do not dare to face lecturers, and patients face to face. Based on the results of interviews with 5 nursing students of batch 2020, that in clinical preparation, on average they are not yet ready, so they need to prepare many things, namely physical and mental preparation.

This study aimed to explore the readiness of nursing students to enter clinical practice in the new normal era.

METHOD

This is a qualitative with descriptive phenomenological study approach. Qualitative research is a systematic approach used to describe the experiences and situations from natural settings to learn about a topic from the perspectives of participant (Grove & Gray, 2019). Phenomenology is one of the qualitative research approaches rooted in a philosophical tradition developed by *Husserl and Heidegger* which is centered on the experience of human life. Phenomenology is an approach to thinking about people's life experiences, which are the essence of the phenomena that constitute their experience (Polit & Beck, 2018).

This research was conducted at the faculty of nursing at a private university in Western Indonesia. The participants of this study were the students of the Faculty of Nursing at a West Indonesia Private University batch 2020. The sampling technique used was purposive sampling. The inclusion criteria for this study were nursing students batch of 2020 who carried out online learning outside Jabodetabek. The participants were five students, data was saturated. Saturation occurs when the data collected is the same as the data that has been collected previously (no new information/data) (Grove & Gray, 2019).

Researchers are the key instrument of research, collecting, and analyzing data (Grove & Gray, 2019). The research instrument used was in-depth and semi-structured interviews. The researcher conducted a pilot study on two nursing students (outside of the participants) from a Private University, West Indonesia. Before the researcher conducted the interview, the researcher gave informed consent to the participants. Interviews were conducted online by Zoom and recorded during the interview process. Researchers make a schedule with participants, then interviews are conducted with a duration of 30-40 minutes. The questions asked during the interview were based on the structured interview and then the various questions using the probing technique. The questions are 1) What is your opinion about the offline learning policy in this new normal era?; 2) Based on your experience, how is your readiness to enter clinical practice?; 3) What things are prepared in entering clinical practice?; 4) What are the factors that affect your readiness to enter clinical practice?

Subsequently, the researcher scheduled a discussion with two participants to confirm their interview findings and avoid bias (Polit & Beck, 2018). Interview recordings are stored in a file that is protected with a password and can only be accessed by the researcher. Additionally, the researcher examined secondary non-verbal data from the participants (field notes), such as intonation, laughter, silence, and sighs.

The data analysis used the Colaizzi's method to analyze the data until saturation which consisted of seven steps, namely: 1) obtain a description of the participant's experience 2) Read and copy the interviews that had been revealed by the participants; 3) extract significant statement; 4) Articulate the significant statement from each question; 5) categorizing the meanings that have been formulated into groups of themes; 6) Integrate results into descriptions; 6) Formulate a description of the phenomenon under study in a clear identification statement; 7) Re-validate the findings to participants (Polit & Beck, 2018).

RESULTS AND DISCUSSION

Results

The participants were nursing students from outside Jabodetabek as many as five participants, namely two male participants and three female participants (**table 1**). This phenomenological study's exploration of nursing students' readiness to enter clinical practice revealed five themes, as illustrated in Table 2.

Table 1 Characteristics of Participants

Participant	Age	Gender	Online Location
P1	20	Female	Lampung
P2	20	Female	Toraja
P3	19	Female	Lampung
P4	21	Male	Poso
P5	19	Male	Nias

Table 2 Readiness of Nursing Students to Entering Clinical Practice

Themes	Category
Theme 1 Improving the knowledge of nursing students in theory and practice	1a. Self-education
	1b. Reviewing of material
	1c. Critical thinking
	1d. Understanding the skill procedures
Theme 2 Physical readiness to enter clinical practice	2a. Adequate rest
	2b. Taking vitamins

	2c. Use self-protection
	2d. Regulate sleep patterns
Theme 3 Mental readiness to enter clinical practice	3a. Do relaxation techniques
	3b. Understanding the patient's character
Theme 4 Nursing students' perceptions of clinical practice	4a. Feeling fear in dealing with situations in clinical practice
	4b. Feeling stress in dealing with clinical practice
	4c. Worrying about not having optimal health
	4d. Perceptions of the severity of clinical practice
Theme 5 Motivation of nursing students to prepare for clinical practice	5a. Support from others
	5b. Time management
	5c. Environmental adaptation

Theme 1 Improving the knowledge of nursing students in theory and practice.

Based on the analysis, the first theme consists of 4 categories, namely self-education, reviewing material, critical thinking, and understanding skill procedures. Preparing students to enter clinical practice needs to increase their knowledge by looking for information when they feel doubt, by looking for additional information from seniors, and self-study from other sources. This is in accordance with the following participant statements:

"...So sometimes when I catch something different, I doubt I'll try to find another one, is it the same or not what I caught, or it turns out that what I caught was different" (P1)

"I personally actually saw it from clinical educators' video too, but sometimes I look for additional information from other videos..." (P1)"

Additionally, in preparing, every student can learn and understand the material given by the teacher.

"...in clinical practice, my readiness to be able to continue to learn and understand the practices that will be developed and worked on which will later be used..." (P2)

In increasing knowledge, students can also review the material that has been given previously such as reviewing material, relearning about communication, studying and preparing for communication, and summarizing the material. Some participants' statements:

"...the learning must have been done before, maybe when we went to the clinic, we've read it again and again..." (P5)

"...So, how do you get ready to study again? Learn to communicate with patients, how to communicate correctly, and maybe what you just learned in the laboratories... in the laboratories, it will be repeated so that later in clinical practice it can run smoothly..." (P3)

When dealing with patients, each student is required to think critically to determine the right type of treatment for the patient. This is in accordance with the following participant statements:

".. for example, theoretical, how in a theory we as students are required to think critically in theory." (P2)

"...when you practice in the lab, you know, oh, it should be like this, because the patient's condition is like this, so they can think critically." (P1)

Before entering the practice clinic, nursing students must have good skills. Therefore, when preparing to enter the clinic, nursing students must have studied and understood the procedure correctly.

"...if for now... it won't be long before I will practice clinically, um... maybe repeating pediatrics, maternity lessons, lessons learned in the laboratory, assessment procedures... yeah... "it's more about the study ..." (P3)

Theme 2 Physical readiness to enter clinical practice.

Physical readiness from the second theme has four categories, namely adequate rest, taking vitamins, using self-protection, and regulating sleep patterns. Adequate rest and sleep patterns are very necessary because this will affect the level of concentration. Some participants stated:

"...from me to take a little rest time, such as listening to songs, reading books, and preparing myself. If we have prepared ourselves then we have not mentally depressed because we are ready. For example, tomorrow, I will go to the clinic, then I must prepare myself, I took adequate rest..." (P4)

Apart from getting enough sleep and regulating sleep patterns, students must take vitamins in preparing for clinical practice. Vitamins function to maintain the immune system of everyone.

"... about physically, need to rest, then usually take vitamins before going to the hospital, either at night or sometimes like the next day still at the clinic..." (P1)

"...physical, it's the most vitamins..." (P4)

Self-protection is also prepared before entering clinical practice, because in the field of practice students will encounter various patient conditions. Therefore, every student must protect himself, so as not to be contaminated by the patient or infect the patient again.

"...So before clinical practice I usually just think that what I have to do is according to the protocol because I don't want patients to be harmed because of my actions, I'm still learning, that's how it is..." (P1)

Theme 3 Mental readiness to enter clinical practice.

Based on the analysis, there were three categories from this theme, namely doing relaxation techniques, and understanding the patient's character. One of the mental readiness is to do relaxation techniques that aim to reduce stress when preparing to enter clinical practice.

"... about mental... I need to take a little time to relax, listen to songs, read books..." (P4)

"...the way I deal with it is to keep breathing and stay relaxed, stay focused so that what is focused doesn't lost..." (P2)

Students also need to prepare themselves mentally by studying and understanding the patient's character. Patients have different backgrounds, so it can cause anxiety in students for fear of being uncooperative in acting.

"...there are patients who are sometimes friendly, sometimes they may be emotional, want to get angry, maybe there are people who are not cooperative when we take action..." (P5)

Theme 4 Nursing students' perceptions of clinical practice

Based on analysis, there were four categories from the fourth theme, namely feeling fear in dealing with clinical practice situations, feeling stress, worries about not having optimal health, and perceptions of the severity of clinical practice. Students feel fear in dealing with situations in clinical practice, whether they meet patients, nurses, or act.

"...maybe the action is lacking, so I feel inferior, afraid, I have to be prepared if I have done something wrong sometimes, maybe the nurses will reprimand me..." (P5)

Nursing students will find out about clinical practice. Therefore, the students feel stressed and nervous to face clinical practice.

"...So right before starting the clinic, it started to get stressful, like thinking, can it be done." (P1)

"...maybe the first one is nervousness, even though it's ready, but there is still a feeling of nervousness that is experienced like that..." (P2)

In preparing for clinical practice, nursing students are concerned about whether they will have optimal health. Optimal health is needed in clinical practice because students treat patients with various disease conditions.

"...fear of being physically unhealthy and suddenly becoming weak in a physically unsupportive sense ..." (P2)

"...for example, if you are physically unwell, you are not ready, then because of the schedule, the schedule is sometimes sudden..." (P5)

Nursing students will seek information about clinical practice. So that students find it difficult to undergo clinical practice.

"...because I've heard the previous stories, I'm influenced, so I suggest that tomorrow will be a tough clinic, because yesterday my friends had a hard time going through it. So, it's like adding to the burden on my own mind..." (P1)

"...from other people's stories... maybe the lecturer checks, visits, the nurses too... maybe from that side of the story, I can't stand it, oh my gosh, I'm afraid of that" (P5)

Theme 5 Motivation of nursing students to prepare for clinical practice.

Motivation is obtained from two factors, namely motivation from outside and within everyone. The motivation of nursing students to prepare for clinical practice is the support from others, time management, and the environment. The support of other people is needed to motivate and encourage students to prepare for clinical practice. It can reduce the level of stress and pressure felt by students. This is in accordance with the following participant statements:

"...if we're in the room because we don't seem to have a problem, what can we do, we even support each other. It's like we talk like that if we are afraid. We like talking to each other... after that it's like encouraging each other like that. (P3)

Motivation from within students in preparing themselves to undergo clinical practice is to manage time well. For example, managing time to do assignments, rest, and other non-academic activities.

"...I also participate in non-academic activities such as committee organizations and so on, so I need to adjust my time like that and without affecting my clinical practice preparation which is my priority in my academics..." (P2)

Environmental factors affect the readiness of students to enter clinical practice. Students must be able to adapt to a new environment, so that they feel comfortable and safe in carrying out actions or activities. Students have different backgrounds, both attitudes, cultures, and perspectives on the environment.

"...I have an extrovert nature, so I easily adapt to other people and the environment so that it is not a problem for me to be easy to adapt and easily connected..." (P2)

"...for the external, because I think that we can't control the external. So, I chose to find a quieter place like studying outside and avoiding the commotion..." (P4)

Discussion

Readiness is described as a feeling or condition completely to be ready to take action (Musallam & Flinders, 2021). The readiness of nursing students to enter clinical practice must be able to increase their knowledge both in theory and practice, such as skills (Theme 1). The findings show that students increase their knowledge by learning on their own by seeking additional information such as from seniors and other sources, learning and understanding the material that has been given by the teaching team (1a). Previous research stated that nursing students face clinical practice must prepare themselves beforehand by discussing and exchanging opinions, especially regarding skill procedures that will be carried out in the clinic, such as infusion procedures through materials that have been given by lecturers and also through videos on the internet (Amar et al., 2019).

Another way to increase knowledge is to do a self-evaluation to find out its strengths and weaknesses. Self-evaluation aims to explore strengths and weaknesses in the learning process and reflect on their practice. In this way, they can feel their progress throughout the learning and set goals to increase their knowledge (Lemes et al., 2021). Self-evaluation can be done independently through review of material like theory and practice regarding skill procedures and during learning in the laboratory is very necessary in preparing to enter clinical practice (1b; 1d). It can train communication skills and

perform nursing actions, as well as get information about demonstration procedures so that students understand the actions to be taken (Apriani et al., 2020).

Students will repeat the material learned by using critical thinking skills (1c). Learning in clinical practice can develop students' abilities in critical thinking, attitudes, clinical skills, knowledge, time management, and decision-making (Sianturi & Natalia, 2021). Critical thinking is needed by nurses to decide on the right treatment given to patients, and can think carefully, and increase their confidence in dealing with problems (Deirma, 2019).

The physical condition of students must be considered before entering clinical practice such as taking vitamins, getting adequate rest, and regulating sleep patterns (Theme 2). Physical readiness means that every student has the physical ability to carry out clinical learning. Physical readiness includes a healthy body, not having health problems and not being lethargic. Physical preparation is needed to be able to follow the learning in the hospital well and be able to easily carry out activities. Therefore, students must have immunity and good health to be able to follow the clinical practice that will be carried out (Fajrin Ramadhani et al., 2021; Purnamasari & Setyawan, 2021).

Good sleep patterns will have an impact on the physical readiness of nursing students in clinical practice. If a nursing student cannot fulfill his sleep needs, there will be a decrease in concentration and the body will become weak in the learning process and clinical practice (Fadlilah et al., 2020). Self-protection can also be prepared by implementing health protocols such as applying cough and sneezing etiquette, maintaining physical distance and social restrictions, and washing hands is very important for nursing students because it can increase body immunity and break the chain of spread of COVID-19 (Zuhana et al., 2021).

In addition to physical conditions, nursing students need to prepare mentally for students before entering clinical practice (Theme 3). Based on the findings, the mental readiness carried out by nursing students is to perform relaxation techniques, prepare themselves optimally, and understand the patient's character. Previous research found that nursing students often experience stress. Therefore, students need to control their stress response and have stress coping by doing relaxation techniques (Tricintia et al., n.d.). In addition, students can prepare themselves emotionally and attitude so that they can overcome difficulties in the field of practice and can undergo clinical practice well). Stress and pressure can also be reduced if students can learn and understand the patient's character based on cultural differences. In addition to culture, students must meet the patient's needs holistically, namely biological, psychological, social, and spiritual needs (Amar et al., 2019; Bobode et al., 2016).

Students prepare themselves in terms of knowledge, physically, and mentally, but students also have perceptions about clinical practice, namely feeling fear in dealing with situations in clinical practice, feeling stress in dealing with clinical practice, worries about not having optimal health, and perceptions about the severity of clinical practice. Students often feel that they are not ready to undergo clinical practice because they feel that the knowledge learned is still lacking, afraid of being wrong, and nervous about interacting directly with patients for the first time (Amar et al., 2019; Musallam & Flinders, 2021). In the second year, students, errors that tend to occur are errors in carrying out nursing care implementation procedures and only focusing on knowledge. Students do not use their critical thinking in carrying out nursing care (Pertiwi & Ermayani, 2017; Santos, 2019).

At the beginning of the clinic, stress often occurs in nursing students. The level of anxiety and stress is often experienced by level II students compared to level III. Three categories must be considered, namely the fear of hurting the patient, not being fully competent in the procedure, the heavy workload in class, and not being familiar with a new environment (Putri et al., 2018; Rajeswaran, 2017). Even though students already have practical training, there are still students who have difficulty in carrying out clinical practice (Amar et al., 2019). Based on the findings, students have a perception of the severity of clinical practice, because they heard stories from other people who have gone to clinics before. The practice area requires students to be able to meet and interact directly with other people

and be anxious for students, afraid when asked by the patient and the patient's family, and afraid of being wrong when taking actions (Nuhidayati, 2018).

LIMITATION OF THE STUDY

The main limitation during the research was that there was an unstable network. Because the data collection in this study used online interviews via Zoom, the researchers asked for an unclear statement from the participants. This study was limited to a specific point in time; therefore, the complexity of clinical practice was not reflected. A longitudinal study involving the entire clinical practice time is required to explore student preparation.

CONCLUSIONS AND SUGGESTIONS

This study explored the readiness experiences of nursing students entering clinical practice. Based on the findings, nursing students felt fear, stress, and worry. Based on the findings, nursing students must prepare themselves physically, and mentally, with knowledge, and skills. Nursing students can also repeat learning materials by using their critical thinking. This study contributes to nursing education institutions where they can implement clinical consolidation programs between students and hospital supervisors and with educators to adequately prepare students for their clinical practice. Institutions can also conduct clinical simulations supported by technology by demonstrating collaboration with educators and hospital-based supervisors. This can prepare nursing students more optimally in terms of psychological and knowledge. Mental preparation is needed such as improving non-cognitive skills such as the existence of programs in the curriculum such as sharing experiences from alumni or from students who have experienced previous clinics, mentoring, and coping strategies carried out. The findings of this study can assist in developing future clinical readiness programs. Further examination of the influencing factors of nursing students' readiness to enter clinical practice is required.

ETHICAL CONSIDERATIONS

This study was approved by the Research Ethics Committee of Faculty of Nursing at Western Indonesian Private University. The ethical principles used were respect for human dignity, justice, informed consent, anonymity, and confidentiality.

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Conflict of Interest Statement

No conflict of interest in this manuscript

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