Investigation of the teaching cognition and capabilities of clinical advisers for masters degree level nursing specialty graduate students

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Purpose: To assess the culturing cognition and teaching of core capabilities of clinical advisers for masters degree level nursing graduate students in order to provide criteria for selecting and training clinical advisers, and to monitor clinical teaching quality.

Methods: A questionnaire was completed by 66 nursing specialty clinical advisers. The questionnaire was divided into three sections: basic condition, culturing cognition of the nursing specialty graduate students, and self-evaluation of teaching core capabilities as measured by the Clinical Nursing Teachers Core Capabilities Graphic Rating Scale.

Results: Forty-five of the surveyed advisers served undergraduate level students (68.18%), and seven of them (10.61%) had experience advising graduate nursing students. The advisers, in general, had limited knowledge regarding guidance for nursing specialty graduate students. The self evaluation total score for core capabilities teaching was (120.55 ± 7.37), containing professional capability (4.47 ± 0.34), leadership capability (4.01 ± 0.22), problem solving capability (3.89 ± 0.30), and education teaching capability (3.65 ± 0.23). The highest scored item was the capability to assess and handle a patients’ condition (4.44 ± 0.56), while the lowest scored item was the capability to do scientific research (3.29 ± 0.89).

Conclusion: Clinical advisers for nursing specialty graduate students in our survey were generally inexperienced with regarding to training and culturing nursing graduate students. These advisers were prepared for core teaching competency, but were not qualified to conduct scientific research. Based on these results, it would be beneficial to provide the clinical advisers more training on teaching cognition for graduate students and improve their competency to perform scientific research.

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1. Introduction

Clinical practice is the most important component of graduate education courses for master’s degree level nursing specialty graduate students (MNS), who are expected to perform at a high-level in practical and professional settings [1]. Tutors for graduate cannot provide direct clinical mentoring for MNS, because most of them serve as nursing theory researchers or professors who have limited clinical experience [2]. As more MNS have been recruited, clinical nurses have take on more teaching duties as clinical advisers. Thus, the teaching capabilities of clinical advisers may have immediate effects on the quality of MNS training [3]. To assess the teaching capabilities of clinical advisers, develop a standardized training program for advisers, and improve the teaching quality of MNS advisers, we distributed a questionnaire among 66 MNS clinical advisers to assess their teaching capabilities.

2. Materials and methods

2.1. Sampling of MNS clinical advisers

The study populations consisted of 66 MNS clinical advisers from four affiliated teaching hospitals of Chongqing Medical University. All advisers were female, and forty-five (68.18%) had an undergraduate level educational and four advisers (6.06%) possessed a Masters degree or above. Among those surveyed, there were fourteen (21.21%) nurse practitioners, thirty-one (46.97%) nurses-in-charge, and twenty-one (31.82%) co-chief nurses or above. All advisers had prior experience directing undergraduate nursing students, while seven of them (10.61%) had prior experience advising graduate student nurses. Twenty advisers (30.30%) had participated in independent research.

2.2. Questionnaire design and statistical analysis

In March 2012, a questionnaire was distributed among 66 MNS clinical advisers, containing the following three sections: basic conditions, culturing cognition of the nursing specialty graduate students, and self-evaluation of teaching core capabilities. Basic conditions included, but were not limited to, sex, age, educational background, professional title, work seniority, and experience guiding undergraduate or graduate levels nursing students. The section assessing culturing cognition was designed based on the correlation research of Lifeng [3] and Tanjing [1]. The section Self-evaluation of teaching core capabilities section was assessed using the Clinical Nursing Teachers Core Capabilities Graphic Rating Scale [4]. This scale contains 26 items across four dimensions: professional capability, leadership capability, problem solving capability, and education teaching capability. Each item was self-assessed by clinical advisers using the five-point Likert scale, in which higher the scores indicate strong core teaching ability.

The Content Validity Index (CVI) score of the questionnaire was 0.97; factor analysis indicates that the twenty-six self-assessment items accounted for 51.65% of total data variance; Internal consistency coefficient of the total system was 0.91, and every dimension ranged from 0.61 to 0.85; Therefore the questionnaire featured good content validity, construct validity, and homogeneity reliability.

Respondents or others could complete the questionnaire, and in this survey the questionnaire was administered to clinical advisers prior to on-site teaching. A total of 70 questionnaires were distributed and returned, and 66 (94%) of the returned questionnaires were valid. The data was analyzed by descriptive statistics using SPSS 13.0 (SPSS Inc., Chicago, IL, USA).

3. Result

3.1. Culturing cognition

Based on the survey results, clinical advisers had relatively little knowledge about the difference between MNS and Master of Science in nursing students, particularly the training goals and clinical teaching methods used for MNS programs (Table 1).

3.2. Self-evaluation of teaching core capabilities

The self evaluation total score for teaching of core capabilities was (120.55 ± 7.37), including scores for professional capability (4.47 ± 0.34), leadership capability (4.01 ± 0.22), problem solving capability (3.89 ± 0.30), and education teaching capability (3.65 ± 0.23). Among the 26 items, the capability to assess and handle patients’ condition recorded the highest score (4.44 ± 0.56), while the capability to do scientific research had the lowest score (3.29 ± 0.89) (Tables 2 and 3).
4. Discussion

4.1. Knowledge about culturing of MNS

The survey showed that only four (6.06%) of clinical advisers of MNS were educated to a master’s degree level or above, and only seven (10.61%) had experience guiding graduate nursing students. Furthermore, almost all of the surveyed advisers had little knowledge concerning the difference between the training programs for MNS and a master of science in nursing. In particular, the advisers were no knowledgeable of the training goals and clinical teaching methods of MNS programs. One explanation for this results is that most clinical advisers have not completed formal graduate training. After obtaining graduate degrees, most nurses preferred to work on nursing education or supervision, rather than in the clinic setting in which they would serve as clinical advisers. Another potential explanation is that because domestic MNS education of MNS is a relatively new program, the clinical teaching system has not been fully developed. Based on these data, clinical education of MNS could be improved by making clinical advisers more knowledgeable regarding the training goals and methods of MNS programs.

4.2. Teaching core capabilities

All of the surveyed clinical advisers had experience directing undergraduate nursing students, indicating that the all had clinical teaching ability. Forty-five advisers (68.18%) had over eleven years of experience. Among the 26 individual factors, several items scored highly (>4 points), including assessment ability, judgment and disposition of patients, clinical skill, setting an example for students. These findings imply that clinical advisers have high ethical standards, rich clinical experience, strong professional knowledge, and clinical skill. These qualities ensure that MNS will receive excellent clinical practice training, and lay the foundation for the culturing of practical and professional nursing talents.

4.3. Strengthening of MNS teacher training

Among the surveyed advisers, the scores for the capability to carry out scientific research, knowledge of pedagogy and psychology, the realization of professional development trends, and experience in research hotspots were less than three point five, suggesting clinical advisers were not well trained in these areas. These weaker abilities, if not addressed, could compromise the quality of MNS training. Xiong et al. [5] put forward a double-teacher model which pairs clinical advisers with tutors with expertise in research and pedagogy in order to promote both the clinical skill and scientific research skills of MNS. Alternatively, Tu et al. [6] suggested that providing clinical advisers training on specialized theory and new progress in nursing research overcome the current weaknesses of clinical advisers. Zeng et al. [7] also emphasized the importance of understanding pedagogy and psychology for both clinical advisor and MNS. In light of the current clinical training environment, we suggest that the double-teacher model, with tutor training the clinical advisor in pedagogy, psychology and scientific research. This approach could help clinical advisor enhance teaching core capabilities and improve the quality of MNS training.

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<th>Table 2 – The highest scored item of teaching core capabilities (X̄ ± s).</th>
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<tr>
<td>Item</td>
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<tr>
<td>Assessment, judgment and disposition of patients</td>
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<td>Set an example for student</td>
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<td>Clinical skill level</td>
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<td>Relationship and cooperation</td>
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<td>To learn and self-improve</td>
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<th>Table 3 – The lowest scored item of teaching core capabilities (X̄ ± s).</th>
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<tr>
<td>Item</td>
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<td>Flexibility of teaching style</td>
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<td>The judgment of student psychology and forecast of action</td>
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<td>The realization of professional development trend and research hotspot</td>
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<td>The knowledge of pedagogy and psychology</td>
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<td>The capability of scientific research</td>
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