



**UNIVERSITY of the
WESTERN CAPE**

Faculty of Community and Health Sciences

**UNDERGRADUATE NURSING STUDENTS' LIVED EXPERIENCES WITH
PRECEPTORS DURING THEIR CLINICAL PLACEMENT AT A PSYCHIATRIC
HOSPITAL IN THE WESTERN CAPE**

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**A mini-thesis submitted in partial fulfilment of the requirements for the Degree of
Magister Curationis in the School of Nursing, Faculty of Community and Health
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Supervisor: Professor K. Jooste

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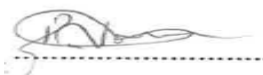
DECLARATION

I, Bhekithemba Vellem, declare that the report on **“UNDERGRADUATE STUDENT NURSES’ EXPERIENCES WITH PRECEPTORS DURING THEIR CLINICAL PLACEMENT AT A PSYCHIATRIC HOSPITAL IN THE WESTERN CAPE”** is my own work, that it has not been submitted for any degree or examination in any other university and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.



Name: Bhekithemba Vellem

Date: November, 2016

Signed:
.....

KEY WORDS

Undergraduate

Student nurse

Experience

Preceptor

Preceptorship

Clinical placement

Psychiatric hospital



ABBREVIATIONS

APH: Associated Psychiatric Hospitals

CE: Continuing education

HEI: Higher Education Institution

SANC: South African Nursing Council

SoN: School of Nursing

UWC: University of the Western Cape



DEDICATION

I dedicate this work to the hero of my lifetime, my mother Maxhanga Vellem for the prayers, love and support, and the spirit she instilled in me. I also dedicate it to my late aunty Beauty Vellem for being the parent at all times.



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ABSTRACT

Due to the large student-supervisor ratio, a school of nursing at an university in the Western Cape, developed specific preceptorship training for professional nurses working in e.g. psychiatric hospitals. This aimed at improving the clinical teaching expertise of professional nurses and ensuring positive experiences around placement of student nurses. It was unclear how undergraduate student nurses experienced their interactions with their preceptors while placed in psychiatric units.

The study used a descriptive phenomenological design to describe the lived experiences of student nurses with preceptors during their clinical placement at a psychiatric hospital. Undergraduate student nurses who were allocated to a preceptor at a psychiatric hospital in the Western Cape served as the population of the study. Purposive sampling was applied and individual unstructured interviews (n=11) held. This study adopted Collaizi's method of data analysis. Results of this study indicated that the nurse preceptors played a supportive role towards students during placement in psychiatric units. This resulted in meeting the students' objectives and needs in clinical placement. A challenge around a comprehensive learning environment was interpreted as a great need during students' training.

Ethical clearance was sought from the Ethics Committee of the University of the Western Cape and ethical principles followed in conducting the study. Trustworthiness was ensured during the research process.

TABLE OF CONTENTS

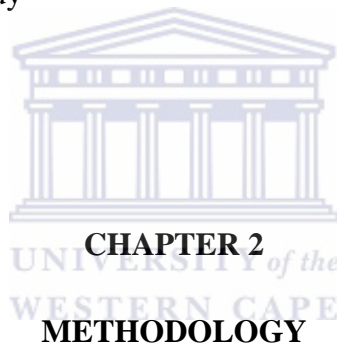
DECLARATION	ii
KEYWORDS	iii
ABBREVIATIONS	iv
DEDICATION	v
ACKNOWLEDGEMENTS	vi
ABSTRACT	viii
TABLE OF CONTENTS	ix
APPENDICES	xv
LIST OF TABLES	xvi



ORIENTATION TO THE STUDY

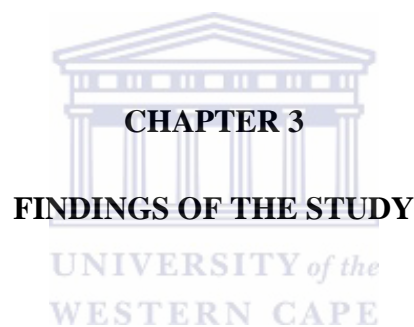
1.1 Introduction and background of the study	1
1.2 Problem statement	3
1.3 Research question	4
1.4 Aim of the study	4
1.5 Research objectives	4
1.6 Significance of the study	4
1.7 Definitions of key concepts	5

1.8 Research methodology	6
1.8.1 Population	6
1.8.2 Sampling	7
1.9 Data collection	7
1.10 Data analysis	8
1.11 Trustworthiness	8
1.12 Ethical considerations	9
1.13 The chapter outline of the study	11
1.14 Conclusion	11



2.1 Introduction	12
2.2 Research design	12
2.3 Research setting	12
2.4 Research population and sampling	13
2.4.1 <i>Study population</i>	13
2.4.2 <i>Sampling method</i>	13
2.5 Data collection process	14
2.5.1 <i>Preparation of the field</i>	14

2.5.2 <i>Method</i>	15
2.6 Pilot interview	15
2.7 Data analysis	16
2.8 Trustworthiness	17
2.8.1 <i>Credibility</i>	17
2.8.2 <i>Dependability</i>	18
2.8.3 <i>Confirmability</i>	18
2.8.4 <i>Transferability</i>	18
2.9 Conclusion	19



3.1 Introduction	20
3.2 The demographic profile of the participants	20
3.3 Data analysis -Themes and categories	21
3.4 Theme 1: The supportive role of a preceptor	23
3.4.1 <i>Category: Preceptors are open to questions</i>	23
3.4.2 <i>Category: Preceptors treat student nurses as professionals</i>	24
3.4.3 <i>Category: Preceptor is helpful towards students nurses</i>	26
3.4.4 <i>Category: Addressing problems with preceptors</i>	28

3.4.5 Category: <i>Easier to work with professional nurses that attended the preceptorship training</i>	29
3.5 Theme 2: Students experience internal and external challenges within practice	31
3.5.1 Category: <i>Students are fearful of the psychiatric practical setting</i>	32
3.5.2 Category: <i>Female students had challenges when working with male patients</i>	31
3.5.3 Category: <i>Preceptors should be more lenient towards students</i>	33
3.5.4 Category: <i>Students had limited learning situations in practice</i>	33
3.6 Theme 3: A comprehensive learning environment is needed for student training	35
3.6.1 Category: <i>Guiding students through a journey in practice</i>	36
3.6.2 Category: <i>Conducting ward rounds as a positive learning opportunity</i>	39
3.6.3 Category: <i>Viewing psychiatry through new lenses</i>	41
3.6.4 Category: <i>Reflecting on good memories</i>	43
3.6.5 Category: <i>Enthusiasm in linking theory with the real world of practice</i>	45
3.6.6 Category: <i>Objectives were SMART</i>	50
3.6.7 Category: <i>Learning through a variety of possibilities</i>	53
3.6.8 Category: <i>Discharging patients as part of the learning experience</i>	55
3.6.9 Category: <i>Learning how to give medication as part of learning opportunity</i>	56

3.6.10 <i>Category: Acknowledging the special characteristics of the preceptor</i>	60
3.7 Conclusion	64

CHAPTER 4

CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

4.1 Introduction	65
4.2 Conclusion	65
4.3 Recommendations	67
4.3.1 <i>The role of the preceptors</i>	67
4.3.2 <i>Challenges to be addressed</i>	68
4.3.3 <i>Creating a learning environment</i>	69
4.3.4 <i>Further research</i>	70
4.4 Limitations of the study	70
4.5 Conclusion	70
LIST OF SOURCES	72



APPENDICES

Appendix A: Information Sheet	81
Appendix B: Written Informed Consent	86
Appendix C: Letter of request to participating Hospital Research Ethics Committee to conduct the research	88
Appendix D: Letter of permission from the selected psychiatric hospital research ethics committee	90
Appendix E: Letter of approval from Western Cape Provincial Department of Health	91
Appendix F: University of the Western Cape Research Ethics Committee approval	92
Appendix G: Interview guide (unstructured)	93



LIST OF TABLES

Table 3.1 Participants in the study	21
Table 3.2 Themes and categories	22



CHAPTER 1

ORIENTATION TO THE STUDY

1.1 Introduction and background

Preceptorship has been widely used nationally and internationally, for clinical practicum. Due to an increase in student numbers and insufficient time spent between students and supervisors, a university in the Western Cape developed a continuing education (CE) course for professional nurses. A two-week training course was piloted in 2010 by a school of nursing at a university in the Western Cape. The course aimed at improving the clinical teaching expertise of professional nurses and ensuring positive placements of student nurses.

Support from preceptors enables student nurses to apply knowledge, skills and attributes in the clinical setting to facilitate the move from novice to expert (Jeggels, Traut & Africa, 2013:1). According to Altmann (2006:1), preceptorships can be useful, but only if well-designed criteria are employed to guide preceptor selection, education, orientation, and evaluation. Preceptorships are known to benefit nursing practice, nursing administration, and nursing education, however, continued research and evaluation of preceptorship programmes are recommended (Altmann, 2006:13). At a school of nursing, the clinical supervisors employed, had limited contact sessions with students in the clinical settings (Jeggels *et al.*, 2013:1). However, in the scenario of high student numbers, a need was identified to strengthen the support given to student nurses in the practical service settings.

A collaborative project was initiated by a higher education institution and the Nursing Directorate in the Western Cape to offer a continuing education (CE) course, targeting professional nurses who supervised student nurses in health service units. During the course of

this study, the specific school of nursing had already trained more than hundred professional nurses as preceptors, also for the selected psychiatric hospital that partook in this study.

Preceptors have roles to play when student nurses come to the units for the first time. Their roles include orientation, teaching and evaluation of student nurses. In addition, preceptors are expected to be role models who provide support to student nurses. The specific learning situation, and allocation of students to preceptors, also includes around three weeks at a psychiatric hospital in their 4th year of study. Although the preceptorship experience already started in 2010 at a selected psychiatric setting, there has been no study done to explore and describe the experiences of student nurses, who have been allocated to these preceptors.

Clinical placement is a vital component of nursing education because it links theory to practice (Wang, Li & Chen, 2010:36). South African student nurses, are placed at hospitals and community health centers during their undergraduate programme, from their first to fourth year of study, to ensure that the purpose of the training programme is achieved (Nursing Act No. 33 of 2005).

Clinical exposure to the mental health environment has also been identified as a major factor in promoting a more favourable attitude of students towards mental health nursing (Happell, 2008:849). The capacity to produce a more positive attitude towards mental health nursing as a future career option, is largely dependent upon quality clinical experience. A recent study by Martin (2013:12), claims that emotional demands inherent in the nature of the work in mental health care settings, appear to exacerbate students' distress. These students enter psychiatric settings for the first time and have to adapt to a completely different area and specialty of nursing, despite being in their final year of study. They are required to be competent in

psychiatric skills, i.e. mental status assessments. During this period, they need support in integrating the theory with practice, i.e. learning new skills, becoming competent and adjusting to the mental health care environment.

The number of student nurses has increased in the last couple of years, at the Higher Education Institution (HEI) where participants of the study were registered. This, despite the limited number of clinical supervisors to guide them at the hospitals. The researcher has observed that students placed in psychiatric units at times struggle to establish relationships with clients, fear psychiatric patients and struggle to engage with the multidisciplinary team while they are expected to learn at the same time. For students to become competent professional nurses, they need support such as that of a preceptor. A trained nurse preceptor has a role to support student nurses throughout placements.



1.2 Problem statement

A school of nursing in the Western Cape, started preceptorship training to ensure that professional nurses are trained in a teaching role to support students during clinical placement. A substantial body of literature clearly demonstrates that undergraduate student nurses tend to hold negative views towards psychiatric nursing and the care of people experiencing a mental illness, before they undertake clinical experience in the area. There is, however, minimal literature that examines preceptorship from the perspective of undergraduate student nurses undertaking clinical experience within the mental health setting (Charleston & Happell, 2005:304). The lived experiences of undergraduate student nurses with their preceptors during their clinical placement at psychiatric hospitals in the Western Cape, have not been researched; this is evidenced by the

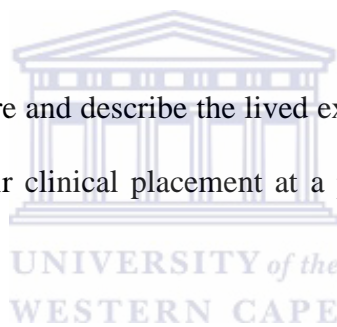
paucity of literature pertaining to this phenomenon, hence the need to conduct the study. It was unclear how undergraduate student nurses experienced their interactions with the preceptors when placed in psychiatric units in a psychiatric hospital in the Western Cape.

1.3 Research question

The following research question was posed from the research problem: *What are the undergraduate student nurses lived experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape?*

1.4 Aim of the study

The aim of the study was to explore and describe the lived experiences of undergraduate student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.



1.5 Research objectives

The objective for this study was to explore undergraduate student nurses lived experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.

1.6 Significance of the study

The significance of the study is to explore rich data of undergraduate student nurses lived experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. The results of this study could add to the insight and understanding around preceptorship relationships with students. Such understanding may possibly influence the

curriculum planning of preceptorship training offered by Higher Education Institutions to influence positive hospital placements of student nurses at psychiatric hospitals. Results and recommendations of this study may further provide heads of nursing schools, nursing educators, and hospital managers with useful and in-depth information which may influence the decisions and policies relating to clinical placement of undergraduate student nurses.

1.7 Definitions of key concepts

Experiences refer to knowledge gained on personal observation or contact; something that affects or influences you in some way (Longman, 2001). In this study, experiences refer to the impact that preceptorship have brought to student nurses, challenges and support that undergraduate student nurses encountered during preceptorship at a psychiatric hospital.

Undergraduate refers to a student at a university who has not yet completed a first degree (Oxford Dictionary & Thesaurus, 2009).

A **student nurse** is a person undergoing a four-year integrated diploma programme leading to registration as a nurse (general, psychiatry, community) and midwife (SANC, 2005). In this study, a student is a learner from a university in the Western Cape acquiring knowledge and skills in the practice of psychiatric nursing during their fourth year of training.

Clinical placement is a period spent by a learner in clinical and other experiential learning sites to ensure that the purpose of the programme is achieved (SANC, 2005).

Psychiatric hospital refers to a health establishment that provides care, treatment and rehabilitation services only for users with mental illness (South Africa, 2002:6).

A **preceptor** is a professional nurse with a minimum of two years' clinical experience who acts like a facilitator, counsellor, mentor, supervisor and resource person for one or more students (preceptees) (Monareng, Jooste & Dube, 2009:116).

Preceptorship refers to the relationship between the preceptor and a student (Happell, 2009).

1.8 Research methodology

The research methodology of the study incorporates the overall structure of the study and the techniques used for choosing the design, selection of participants, data collection and analysis (Polit & Beck, 2010:257). This study adopted a qualitative, descriptive, phenomenological approach. According to Polit and Beck (2008:236), a descriptive research approach is an investigation that observes and describes. The descriptive design was employed in the study to get the accurate and full description of undergraduate student nurses lived experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. Bracketing was used to suspend the researcher experience on the topic. *Bracketing* is the process in which the researcher puts aside his pre-conceived ideas about the phenomenon under investigation to allow data to convey undistorted information (Brink, 2006:198).

1.8.1 Population

According to Brink (2006:520), the research population refers to individuals who possess specific characteristics that match the research topic. The research population of the study was all undergraduate student nurses from the selected HEI at fourth year level of study who have been in preceptorship relationship with preceptor. The students were doing clinical placement at

a psychiatric hospital. During the development of this research study, there were about twenty student nurses that were in preceptorship relationship with preceptors at the selected psychiatric hospital.

1.8.2 *Sampling method*

For this study purpose, a purposive sampling method was employed. The researcher consciously selected participants who met the selection criteria. Brink (2006:133) states that purposive sampling is based on the judgment of the researcher. The researcher continued interviewing participants until no new themes were reported; he thus interviewed eleven participants from the selected hospital. Participants were undergraduate student nurses who were at fourth year level in terms of Regulation R425, as amended, placed at a psychiatric hospital by a higher education institution in the Western Cape. These students were assigned to preceptors and were in a preceptorship relationship with a preceptor at a psychiatric hospital.

1.9 Data collection

The data of this study was collected using individual unstructured interviews in a private room to ensure the privacy at a psychiatric hospital. Prior to the interviews, the researcher obtained the written consent from the participants for conducting the interviews, and an audio digital recorder was used to record the interviews. An unstructured interview provided the opportunity for greater latitude in the answers provided (Streubert & Carpenter, 2011:34). Field notes were kept by the researcher during the individual interviews (Plano-Clark & Creswell, 2010:260).

1.10 Data analysis

Data analysis is when the researcher reduces, organises, and gives meaning to data (Burns & Grove, 2005:733). According to Brink (2006:184), data in qualitative research is non-numerical, usually in the form of written words or video tapes, audiotapes, and photographs. Burns and Grove (2011:290) state that, in qualitative research, data collection and data analysis occur simultaneously with redirection of the research as new insights emerge from the analysis. This study adopted Collaizi's seven step methods as set out in Streubert-Speziale and Carpenter (2007:83) (also described in Chapter 2):

- Read all participants' description of the phenomenon.
- Returned to the original transcripts and extract significant statements.
- Tried to spell out the meaning of each significant statement.
- Organised the aggregate formalised meanings into cluster of themes.
- Wrote an exhaustive description.
- Returned to the participants for validation of the description. This is called member check. No new data was revealed during the validation, and new data was not further incorporate into the description.

1.11 Trustworthiness

The study applied Guba's model as stated by Krefting (1991:215) to assess the trustworthiness of the qualitative data. It is attained through strict attention to detail, adhering to procedures and through consistency and accuracy throughout the research process (Burns & Grove, 2011), each

of which the researcher considered at all times. For the purpose of increasing credibility, the researcher engaged with participants of the study and prepared the research field to build a relationship of trust. The supervisor as a research expert served as auditor to ensure dependability of the study. Confirmability of the study was increased by keeping field notes. Transferability could be demonstrated by evaluating the findings of this study in a similar environment.

1.12 Ethical considerations

Nursing upholds ethical principles (Mahamba, 2009:8), also in conducting research. To ensure that the study adhered to ethical standards, ethical approval was obtained from the Higher Degrees Committee at a university in the Western Cape for conducting the study (Appendix F). The researcher also sent a letter of request to the Research Ethics Committee of the selected psychiatric hospital committee requesting permission to conduct the study (Appendix C). The Research Ethics Committee of the selected psychiatric hospital granted permission to the researcher to conduct the study (see Appendix D). Furthermore, the researcher also requested permission from the Provincial Department of Health's Research and Ethics Committee, which was granted (Appendix E).

Informed consent: The participants were fully informed about the nature of the study and they were informed that participation in the study was voluntary and they were free to withdraw from the study at any time if they wished. Before participating in the study, participants were asked to sign a written informed consent form (Appendix B).

Harm to participants: The researcher explained to the participants that they would not be harmed in any manner. In cases where participants would feel distressed psychologically or emotionally, they would have been referred to relevant counseling services which were available within the hospital context (see Appendix A). A compact disc was used to store the recorded information for two years after the research findings are published.

Autonomy: The participants were given an information sheet which spelled out the purpose and objectives of the study, benefits and any risks which would arise from participating in the study; and methods and processes of data collection and analysis.

Privacy, confidentiality and anonymity: The researcher ensured that the names of the participants involved in the study could not be linked to the original interviews as interviews were numbered. The researcher further ensured that the audio tape records and field notes were properly locked in a separate filing cabinet that could not be accessed by anyone. This data will be kept locked for a specified period of time (usually two years) after which it will be destroyed. Codes were used to protect participants' identities when results are published. No participant's personal information was given to anyone who was not part of the research (see Appendix A).

Justice: The researcher only collected the data that was within the scope of the intended study and treated participants in an impartial manner.

1.13 The chapter outline of the study

Chapter 1: This chapter presents the introduction and background of the study, problem statement, research question, aim, objectives, and significance of the study. It further outlines a background on the topic and an overview of the research methodology of the study.

Chapter 2: This chapter describes the research methodology of the study.

Chapter 3: A discussion of the findings are presented in this chapter. The profile picture of the participants is presented. This chapter presents the themes and categories obtained from the data analysis that was guided by the Collaizi's (1978:48) seven steps.

Chapter 4: This chapter focuses on the conclusion, limitations of the study and offers recommendations based on the findings of the study.

1.14 Conclusion

In this chapter, the researcher presented the introduction and background to the study. This chapter furthermore described the problem statement, aim, objectives and the significance of the study. The research question and a brief overview of the research methodology employed in this study were presented in this chapter. The next chapter focuses on the research methodology that was followed in this study.

CHAPTER 2

RESEARCH METHODOLOGY

2.1 Introduction

This chapter presents the research methodology that was employed in this study. The study design, setting, sampling strategy, data collection method, data analysis, trustworthiness are discussed in this chapter.

2.2 Research design

The study followed a descriptive, phenomenological research approach. A study done by Connelly (2010) states that phenomenology focuses on the nature of the experience from the viewpoints of those who have experienced the phenomena of the researcher's interests. Hence a descriptive design was employed in the study to get the accurate and full description of undergraduate student nurses lived experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. This study adhered to the most important aspects of the descriptive phenomenological approach during the investigation process in this study, which were, bracketing, intuiting, analysing and describing the phenomenon (Brink, Van der Walt & Van Rensburg, 2012). Furthermore, the selected research design was suitable for the study because it had the ability to answer the overall research question.

2.3 Research setting

The research study was conducted at a psychiatric hospital in the Western Cape. This hospital is under the Cape Town Metropolitan region and also forms part of the Associated Psychiatric Hospitals (APH). According to Doodhnath (2013:15), this hospital is the largest psychiatric

hospital in the southern hemisphere, with about 740 employees and 940 usable beds. It accommodates chronic mental, acute mental and mentally handicapped patients. This hospital functions as a teaching hospital, and accommodates undergraduate student nurses who are at fourth year level from a HEI in the Western Cape. It also accommodates the largest number of the fourth year undergraduate student nurses for psychiatric placement in the Western Cape.

2.4 Research population and sampling

2.4.1 Study population

According to Jooste (2010:302), a research population refers to the whole group of individuals who are of interest to the researcher. The research population of this study comprised all undergraduate student nurses from the selected HEI at fourth year level of study who have been in a preceptorship relationship with a preceptor. These student nurses were doing clinical placement at a psychiatric hospital.

2.4.2 Sampling method

Brink (2006:124) defines sampling as the researcher's process of selecting the sample from a in order to obtain information regarding a phenomenon in a way that represents the population of interest. A purposive sampling method was used to draw participants from the population. Burns and Grove (2009:291) state that purposive sampling is also known as judgmental sampling. The researcher consciously selected participants who met the criteria of the study. The researcher continued interviewing new participants until no new themes emerged. Eleven (n=11) participants were interviewed till data saturation occurred. Bowen (2008:137) defines data

saturation as the situation in which the participants are giving the same or similar information or answers which lead to no need to continue interviewing people.

Inclusion criteria

All undergraduate student nurses who were at fourth year level of study in terms of Regulation R425, as amended, that were placed at psychiatric hospital from selected HEI formed the accessible population. These student nurses were assigned with preceptors and have been in a preceptorship relationship with a preceptor at a psychiatric hospital for at least two weeks.

Exclusion criteria

This study was limited to student nurses who were from the selected HEI. All student nurses that have not previously been in a preceptorship relationship were excluded from the study.

2.5 Data collection process

Burns, Gray and Grove (2013:523) define data collection as a process of selecting subjects and gathering data from them.

2.5.1 Preparation of the field

The researcher was granted permission to conduct research on the topic by the Ethics Committee of a university in the Western Cape on 09 March 2015 (Appendix F). The permission to conduct the study was granted by the research ethics committee of the selected psychiatric hospital on 15 May 2015 as well as from the Western Cape Provincial Research Committee (Appendix E). The researcher obtained permission to access the database of the names of those students placed at the selected psychiatric hospital from the head of a school of nursing at a university in the

Western Cape. The researcher gave consent forms and information sheets to participants prior to the interviews. During an initial meeting, the researcher arranged together with the interviewees, a suitable day for conducting the interviews.

2.5.2 Method

The researcher conducted individual, unstructured interviews with the participants after written informed consent was obtained. The scheduled interviews were conducted in a private, quiet room, free from noise or distractions at the selected psychiatric hospital. Interviews lasted between 30 and 45 minutes each. At this stage the researcher explained the purpose of the study and clarified any uncertainty that had arisen from participants. During the interviews, field notes were taken by the researcher while probing the lived experiences shared by the participants. Participants seemed relaxed and the researcher observed freedom of expression in narrating their experiences on the topic investigated. An audio recorder, in full working order, was used to record and store the information collected with the permission of participants.

Privacy and confidentiality were ensured at all times. The following question was asked to the participants: *“How was it for you to work with a preceptor at a psychiatric hospital?”* The main research question was followed by probing. The researcher probed to get more clarity and more meaningful information from the participants. The researcher probed until no new themes arose.

2.6 Pilot interview

Burns and Grove (2007) describe a pilot study as a small study conducted prior to a larger piece of the research in order to determine whether the e.g. methodology is appropriate. The researcher

conducted two interviews prior to the actual study in a similar environment. The aim of the pilot interviews was to see if the participants understood the research question, and that experiences shared with the researcher would answer the research question. The audio recorder enabled the researcher to capture the field notes while listening to the participants. The participants understood the research question posed to them and the findings of the two pilot interviews could be included in the analysis of the final results.

2.7 Data analysis

Polit and Beck (2008:751) describe data analysis as the systematic organisation and synthesis of research data. A seven steps process analysis discussed by Collaizzi (1978) cited in Polit and Beck (2012) guided the researcher to discover and produce a description of the lived experiences of the undergraduate student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. *Step 1* focused on reading all transcripts of the interviews of all the participant in order to acquire a feeling around their experiences as a whole, and to make sense out of them. During *Step 2*, all participants' descriptions were relooked with the intention to extract from them significant statements and phrases which pertained to the investigated phenomenon. *Step 3* involved the efforts to formulate a meaning of each significant statement. The formulated meanings were then organised into clusters of themes, which are presented in Chapter 4. *Step 4* aimed at validating these themes by referring them back to the original transcripts. *Step 5* involved consolidating everything into an exhaustive description of the experiences. In *Step 6*, the researcher checked with participants on their experiences descriptions. Finally, for validation, the independent coder who was familiar with qualitative

data, assisted to evaluate the results and incorporated any new data towards an exhaustive description of the situation.

2.8 Trustworthiness

Polit and Beck (2012:584) define trustworthiness as “the degree of confidence qualitative researchers have in their data, through using the criteria of credibility, transferability, dependability and confirmability.” The researcher safeguarded the trustworthiness of this study by utilising Lincoln and Guba’s model (De Vos, Strydom, Fouche & Delpont, 2011:419).

2.8.1 Credibility

Polit and Beck (2012:724) assert that credibility is the confidence in the truth of data and interpretation thereof. Credibility in this study was enhanced by preparing the field and information given to participants, and validating transcribed data with participants after the interviews. The researcher met the participants days before the actual interviews to form a trusting relationship and explain the importance of the study to them. The participants had freedom to express their points of view with regard to the investigated phenomenon through the use of unstructured interviews. The researcher also used multiple sources such as field notes and confirmation of literature to draw conclusions (Brink, 2006). The researcher bracketed his past experiences aside. In addition, the researcher constantly consulted with his supervisor to follow the necessary research steps.

2.8.2 Dependability

Dependability refers to consistent and stable evidence (Polit & Beck, 2008:196). The allocated supervisor and independent coder were used as auditors which enhanced the dependability of the study. This was achieved by a process of thorough checking, with the independent coder and the supervisor, on the transcripts, categories and theme formations.

2.8.3 Confirmability

The researcher kept the field notes and recorded data. Brink *et al.* (2012), maintain that confirmability entails proving that the data represent the information provided by the participants, not the researcher's biases or imagination. The verbatim quotes from individual interviews were included in the study. The researcher used an audit trail and consulting with the supervisor regularly on the research process followed. Furthermore, the researcher consulted an independent coder and compared notes with him on how themes and categories had been constructed.

2.8.4 Transferability

According to Polit and Beck (2012:539), transferability is the extent to which findings can be transferred to or be applied in other settings. In this study, transferability was enhanced by providing a dense description of the research methodology and demographic data of the participants and a rich description of the results with supporting direct quotations from the participants. The study can at a later stage be repeated in another setting.

2.9 Conclusion

In this chapter, the researcher described the methodology that was employed in this study. This entailed clear steps concerning the means by which data was collected and also the analysis of the data that was collected. This chapter concluded with a discussion of the trustworthiness of the study. In the next chapter, the findings from the study are presented.



CHAPTER 3

FINDINGS OF THE STUDY

3.1 Introduction

This chapter presents the analysis and discussion of the results of the data that was collected by means of unstructured interviews and field notes. The main objective of the study was to explore the experiences of undergraduate student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.

3.2 The demographic profile of the participants

As outlined in the previous chapters, this research employed purposive sampling to gather the sample of the study. Unstructured individual interviews were conducted and data saturation achieved after conducting eleven interviews. The sample included males (n=3) and females (n=8), all undergraduate student nurses who were placed for clinical experience in psychiatric units. These participants were placed in the units where there was a preceptor allocated to them. Participants were between the ages of 21-24 years. Table 3.1 illustrates the profile picture of the study sample.

Table 3.1: Participants in the study

Participants	Age (in years)	Gender
Participant 1 (pilot)	24	Male
Participant 2 (pilot)	23	Female
Participant 3	22	Female
Participant 4	23	Male
Participant 5	23	Male
Participant 6	24	Female
Participant 7	24	Female
Participant 8	22	Female
Participant 9	22	Female
Participant 10	21	Female
Participant 11	22	Female

3.3 Data analysis – Themes and categories

Three themes emerged after data analysis with categories that fall under each of the three themes. The findings of the study, which was aimed at exploring the experiences of undergraduate student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape will be presented below. A detailed description of the themes and categories will follow with direct quotations that were extracted from participants' interview transcripts to provide an accurate description of their experiences. The themes and categories are presented in Table 3.2.

Table 3.2 Themes and categories

Themes	Categories
1. The supportive role of a preceptor	<p>Preceptors are open to answer questions</p> <p>Preceptors treat student nurses as professionals</p> <p>Preceptor is helpful towards students</p> <p>Addressing problems with preceptors</p> <p>Easier to work with Professional nurses that attended the preceptorship training</p>
2. Students experiences internal and external challenges with in practice	<p>Students are fearful of the psychiatric practical setting</p> <p>Female students had challenges when working with male patients</p> <p>Preceptors should be more lenient towards students</p> <p>Students had limited learning situations in practice</p>
3. A comprehensive learning environment is needed for student training	<p>Guiding students through a journey in practice</p> <p>Conducting ward rounds as a positive learning opportunity</p> <p>Viewing psychiatry through new lenses</p> <p>Reflecting on good memories</p> <p>Enthusiasm in linking theory with the real world of – practice</p> <p>Objectives were SMART (Specific,Measurable, Achieved, Realistic, Time framed)</p> <p>Learning through a variety of possibilities</p> <p>Discharging patients as part of the learning experience</p> <p>Learning how to give medication as part of learning opportunity</p> <p>Acknowledging the special characteristics of the preceptor</p>

3.4 Theme 1: The supportive role of a preceptor

The role of preceptors are related to the preceptor functions, which requires access to resources, information and supplies, and the ability to meet organisational goals when these resources are mobilized (Cloete & Jeggels, 2014:2). The results of this study revealed that undergraduate student nurses had positive experiences with preceptors at a psychiatric hospital. A participant expressed a positive experience with the preceptor:

“But I haven’t experienced any bad – anything that I didn’t feel, that I didn’t feel was fair or that I was feeling, I had been scared here or I had been inferior or they don’t want me to achieve my objectives or my input is not being taking into consideration, nothing like that. So no bad challenges only good ones”. (P5)

Student nurses felt welcomed and included in a multidisciplinary team. The results also uncovered that student nurses felt more stress-free when working with professional nurses who attended a preceptorship programme.

3.4.1 Category: Preceptors are open to answer questions

Preceptors should be engaged in addressing ongoing learning needs of students by e.g. answering their questions during troubleshooting sessions in the clinical setting (Martin, Brewer & Barr, 2011:4). The participants highlighted that preceptors gave them an opportunity to ask questions and hereby made them feel part of the team within the unit:

“Because I was given the opportunity to... to ask questions, I was given the opportunity to go and find out, go and look at this, go and look at that, what is this, what is that? I was made part of it”. (P5)

A comfortable environment was created to pose questions. A participant said:

“I will be like, for, in order to learn you have to be comfortable in a place and he was like, mhm how can I say, he made the environment more comfortable so that you can feel comfortable to ask question”. (P4)

The participants also articulated that preceptors gave them some form of independence to practice skills alone and that they were able to consult and pose questions with preceptors when they encounter any difficulties:

“Mmh, sometimes she will supervise us, sometimes she won’t supervise us, for example, when we do activity group with the patients, we can do it alone, so she didn’t supervise that, eeheh by sitting there with us, she will sit in her office, and then if have a questions we will ask her”. (P9)

Students could be viewed as more relaxed and able to learn when the attitudes, behaviour and support of a preceptor show that students are welcomed and nurtured (Charleston & Happell, 2006:41).

3.4.2 Category: Preceptors treat students as professionals

A study by Matua, Seshan, Savithri and Froda (2014:535) found that building professional relationships during preceptorship is vital and both preceptors and students should be adequately prepared for the experience. In this study participants described their relationship and experiences with preceptors as very worthy.

Results of this research also revealed that students were prepared for being a professional nurse. The participants highlighted that they were being involved in many activities and duties that they thought they would be doing the following year, when they would become community service nurses. The following participant stated:

“Eeeh I had good, very good experience, eeeh on the eeeh they learn me a lot, eeeh I got involved, but they involved me with the staff that I would like need to start doing next year”. (P10)

Participants experienced that students were welcomed in units and treated as adults:

“Thank you very much, mhm actually eeeh my experience in this ward in particular very, it’s very good so far from my first day that I started to work here, we were all welcome from our first day here and the sister took our hand and they treated us, they really treated us as adults, as future professionals, so, so far, we really having a good relationship with our preceptors in the ward”. (P3)

“The staff they treat us, we are fourth year students and what I like about the staff is they treat us students as sisters already so I like...”. (P6)

The above findings are in line with the study done by Turner (2007:7) which concluded that the preceptor is a key component in learning, and that the qualities and characteristics they possess are critical to ensuring a successful relationship with a preceptee that enhance professional learning.

Student nurses were fondly welcomed in the psychiatric units. Preceptors created a positive, respectful, team environment for the student that enhanced becoming a professional:

“Mmm it’s a very like professional relationship mm I respect a person of what she does and also she, she respects me, due giving me, having opportunities but also if she sees like where I can improve, she will advise me on staff that I can do”. (P10)

“Mmh she didn’t see us maybe as eeeh maybe as a threat, or some people to keep away from. She, she invited us mhm to do many things with her”. (P9)

“Ja, it is very good experience ja. It is kind of, it’s actually both and two sides. With staff side preceptors I mean and even the students as well, because if student we have to push hard to get to know what we have to know and the staff also we have to try hard to help the student to know what they need you see, because at the end of the day you also becoming part of the team in the ward, then the patients are there, looking at us and they expect better for us better”. (P3)

According to Brathwaite and Lemonde (2011:3), a team environment is important because it creates an environment in which the learning responsibility is shared among all members of the team, which includes a preceptor and a student nurse.

3.4.3 Category: Preceptor is helpful towards student nurses

The participants indicated that preceptors were helpful. Support from preceptors enables student nurses to apply knowledge, skills and attributes in the clinical setting to facilitate the move from a novice to a more experienced student (Jeggels *et al.*, 2013:1). A participant described preceptors as friendly and willing to offer information to students and gave the right direction:

“I mentioned we basically quite you know eeeh easy approachable they want to give you information you ask a question from them, they give you answers, they want to show you how things are actually done, so good question”.(P1)

Some participants articulated that preceptors were available to answer what they did not understand in the ward rounds or multidisciplinary meetings. It was clear that participants were new in the psychiatric environment, and were initially ill-equipped with some psychiatric terminology, therefore the preceptor was consulted by students, after multidisciplinary team ward rounds:

“And get then experience in the ward rounds and then if there is something that we don’t understand in the ward rounds he can come back me. Maybe if they talking about those words (laughing). Then people don’t ask, we will write those words down and the he will explain to you”. (P2)

A study done by Loghmani, Borhani and Abbaszadeh (2014:67) indicated that communication impacts on patient well-being as well as the quality and outcome of nursing care.

It was highlighted that preceptors contributed a lot in terms of teaching undergraduate student nurses through orientation, as the particular psychiatry unit was a new environment to them:

“I think it really contributes significant, significantly mhm to us, what we, we actually mhm, they are really contributing because when we are here, we don’t exactly know everything that is going on in the ward”. (P3)

Worrall (2007:31) discovered that orientation to clinical placements can enhance learning by helping students to feel fit, reduce their anxiety and increase their motivation to learn. One

participant acknowledged that the preceptors taught them new skills and activities through optimal planning for teaching moments:

“Mhm like, for example, last week we had to learn about seclusion and he explained the whole business to us and everything he organised for us to see the room for seclusion”.

(P4)

It seemed that preceptors planned well for student nurses to practice and observe some learning opportunities. Preparation and planning are key components to a successful experience of all students (Burns, Beauchesne, Ryan- Krause & Sawin, 2006:176).

3.4.4 Category: Addressing problems with preceptors

Kim, Lee, Eudey and Dea (2014:188) revealed that preceptors are overall caring, competent and emphatic also in solving problems. The overwhelming responses from the participants highlighted that they did not encounter serious problems or negative challenges with preceptors:

“So actually I haven’t found any, any things that are uncertainly, so I am still fine, we just, we going on very well, I don’t have problems with the preceptors”.(P1)

“No challenges”. (P2)

“That I am placed here at Lentegueur I didn’t face any challenges there was nothing, there was...”. (P5)

Participants were of the opinion that they did their work and therefore did not get into challenges or problems with preceptors:

“It is just because I am doing what is expected from me and there is no problem”. (P6)

It could be interpreted that preceptors are experienced as competent and committed in their role. This relates to Cloete and Jeggels (2014:1) who discovered that nurse preceptors were committed to their role.

3.4.5 Category: *Easier to work with professional nurses that attended the preceptorship training*

The findings in this study indicated that training in preceptorship was valuable for nursing practice. Preceptors are prepared through various training programmes, including workshops ranging in duration from 1 day to 3 days to 2 weeks, whilst other training programmes are provided within a period of 6 to 12 months and include formal training, preparation and continuing support (Raines, 2012:76).

One student appreciated the preceptorship course that is being offered to professional nurses and further recommended that the course should continue to focus on creating a warm, safe and learning environment for students:

“I will say, like preceptorship, must continue to go on because like sometimes you find it difficult to work with sisters, they also need guidance on how to approach the students, so sisters who did the preceptorship, I find them more approachable and eeeh we learn from them”. (P9)

It seemed as if the training of preceptors was seen as a benefit to the student:

“Yes and mhm we gain a lot from the sisters who did the preceptorship”. (P9)

The students were pleased to work with professional nurses who attended the preceptorship training. Effective clinical preceptorship is needed to encourage students' socialisation process (Houghton, 2014:2370), and it allowed students to develop critical thinking (Foley, Myrick &Yonge, 2012:1).

The following participant argued that he was not aware of trained preceptors, despite being placed with a professional nurse who had undergone preceptorship. However, the participant acknowledged that the preceptor was able to set clear objectives for his learning experience:

“Mhm I was, I wasn’t aware that there were sisters here that actually went to the course for two weeks to actually get knowledge and skills on how to deal with students, at UWC students, but they were fairly mhm, mhm, mhm, when, when we came here, they were – they wanted to know what is our objectives”. (P5)

Preceptors requested the students' objectives upon arrival to the units and aligned the available learning opportunities in the wards with their objectives. Burns *et al.* (2006:176) support the view that preceptors need to be familiar with the university curriculum as well as the university's objectives for providing specific clinical experiences. It is important that students understand the purpose of the preceptorship experience, how to make the best use of their clinical time and that they develop social competency skills (Sedgwick & Harris (2012:4) as cited in Conway and McMillan (2006).

3.5 Theme 2: Students experience internal and external challenges within practice

Participants highlighted some challenges they came across while being placed with preceptors at a psychiatric hospital. It is within a challenging and at times daunting work environment that two complete strangers must strive to accommodate one another within a professional capacity (Younge, Myrick & Haase, 2002:84). Theme 2, addressed the experiences that a preceptorship relationship between a preceptor and student, was not only a smooth one, but also accompanied by some challenges at certain times.

3.5.1 Category: *Students era fearful of the psychiatric practical setting*

The responses from some participants revealed that students were afraid of psychiatric patients in particular at the beginning of their placement at a psychiatric hospital. This may be due to different frightening stories about psychiatric patients they hear beforehand from others. Charleston and Happell (2006:39) emphasised that mental health nursing placement, is often perceived by student nurses as a stark contrast to the general nursing settings. However, the presence of preceptors at the psychiatric units enabled student nurses to be more confident, and removed the fear of being placed at a psychiatric unit:

“Ja, especially when it comes to psych most of the students they are afraid of the psych, at practical, especially when they come for the first time”. (P3)

“From this, every Tuesday so and this is something that I like, but now these are psych patients, you may be busy drawing blood from them, then they kick you, then they pull out, so there is a you know...”. (P3)

Students should be orientated well in advance on psychiatric placements, so that they feel comfortable. In a study done by Oywer (2011:97) it was discovered that preparation for student nurses is very important for being placed in mental health nursing.

3.5.2 Category: Female students had challenges when working with male patients

In a study conducted by Haitana and Bland (2011:9) it was established that the preceptors could not allow students to provide care if they were not confident that the student's practice was safe. It was clear that preceptors were not only focusing on students learning needs, but were also concerned and observant of the safety of these nurses. This was particular in psychiatric male bedded units where some student nurses were placed. One female participant shared that it was a challenge on its own to be placed in a male psychiatric unit, being a female. This participant further highlighted that at some point there was a slight challenge to learn, because as a female one could not be really alone with certain psychiatric patients. As female students they needed to be accompanied by a preceptor or someone:

“And I am a female and then they told us that, you actually just do medications and some administration work but you do not have really much to do with the patients themselves like why you see but then we come to understand, ja because this, these people are not really hundred percent normal and then they... normally behave to you as a female, ja so that was kind of a challenge, so and especially we as a female standing it's not that really easy to interact with the patient like independently you see, because I am afraid that the patient can misbehave, you see”. (P3)

It appeared that student nurses who were placed at male bedded units, needed to be accompanied by preceptors when they were amongst some patients where they felt uncomfortable. Students often experience heightened anxiety when interacting with patients in psychiatric settings (Robinson-Smith, Bradley & Meakim, 2009).

3.5.3 Category: Preceptors should be more lenient towards students

Clinical settings should be based on students' individual abilities and subject to faculty approval (Kim *et al.*, 2014:190). This is due to the fact that student nurses are focused on their learning objectives when in placement, but also having schools responsibilities to do, such as assignments and preparing for tests.

A male participant contends that the time was not enough for student nurses to do all expected tasks given by lecturers:

“Mhm If exp..., if more preceptors were to be included within this year or two-week course, or whatever, I think, I think it would be, for an example, how to reassure a student, because for us it is very stressful when you had to, when we had to write an exam and be in place with it, so they still expect you to do what is expected of a student”. (P5)

One of the participants recommended that he would like preceptors to be more lenient. This participant felt that leniency should be one of the skills that the preceptor should be equipped with:

“So I think in that sense leniency would be – not lenient in the fact that we need to neglect our, our duties as students but from their side as preceptors is, maybe if this were

to be included in whatever they are being taught there then, these are the things these students are going to be, besides the only objectives”. (P5)

The preceptor should manage students according to their needs and generation. Preceptors are urgently needed to prepare the next generation of clinicians. Preceptors on the other hand obtain satisfaction from meeting a professional obligation (Burns *et al.*, 2006:182).

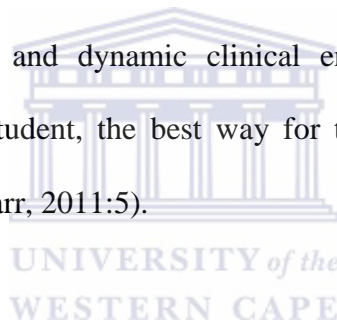
3.5.4 Category: Students had limited learning situations in practice

According to Halter (2008:21), psychiatric nursing is least preferred by student nurses for placement. While most participants from this study reflected to have acquired many skills while working with preceptors, one participant pointed out that she did not think she learned anything from her placement at a psychiatric hospital. She however pointed out that she does not like a psychiatric hospital. She felt that there was lack of activities or learning environment. She stated:

“So okay, for example, in midwifery when I was doing midwifery I knew even going to hospital to high risk or low risk, I can learn okay this is what you must do to induce the patient but in psychiatry and when I am writing a test I can, even if I didn’t study, I can remember what I was doing with the doctor or nurse. But in psychiatry I don’t, I’m not exposed to those things. It is just like I have to sit with the children, okay the medication, everybody knows medications now, how to order, how to do this thing, but in terms of in depth what is psychiatry all about I didn’t learn anything”. (P7)

“It was a nice experience. It was short and nice but I didn’t learn nothing I won’t lie so I didn’t even feel like I am a fourth year student, it felt like I am permanent (laughing) like I didn’t, but this is nice it’s a very nice, but I didn’t learn nothing”. (P7)

It was however the responsibility of preceptors to ensure that students were occupied with tasks and skills according to the curriculum. It seemed that the participant was bored to be in the mental health surroundings and that more stimulation in learning and teaching opportunities should have been addressed by preceptors. Botma, Jeggels and Uys (2012:1) discovered that students did complaining of limited support and teaching while they were in clinical settings with preceptors. Furthermore these authors contended that preceptors should be well trained to facilitate learning in a complex and dynamic clinical environment. Preceptors should be interested in knowing from the student, the best way for the student to learn in the clinical environment (Martin, Brewer & Barr, 2011:5).



3.6 Theme 3: A comprehensive learning environment is needed for student training

The clinical learning environment is important not just for clinical skill development, but for students to also learn about the ‘norms’ of practice that is, processes in care delivery (Henderson, Cooke, Creedy & Walker, 2012:300). Participants experienced that the preceptors made the environment very conducive to learning and to perform their expected activities. Undergraduate student nurses need to learn many skills and activities during their placement with preceptors at a psychiatric hospital.

3.6.1 Category: Guiding students through a journey in practice

Guiding is a part of the didactic and pedagogic discipline of caring science and, as a guide; one is a carrier of a personalized paradigm of caring science (Aasen & Naden, 2008:7). Preceptors should assist the students in achieving their specific learning outcomes whether these apply to knowledge generation, the development of psychomotor skills or integration of theory and practice (Omansky, 2010:698). Participants defined preceptors as coaches and instructors, as from the beginning of the first day of clinical placement. The following participant articulated:

“Like I said, I think it is a good thing to help students, to remind students, to guide them”. (P2)

Participants further extolled the comprehensive orientation that was given to them by preceptors at the psychiatric hospital, to guide them:

“Actually we, we had a kind of introduction about psych, psychiatry, regarding all the aspects that were, where we have to be placed in, such as long term, short term, and intellectual disabled, things like that in hospitals, clinic services, so ja we were actually introduced to the things that we will face”. (P3)

“They do, they support us, they do, they support us like my first day when we came here, although we work at other hospitals, they were from the beginning they were like this and this is how we do it here, and you have to do it like this, and I like it because the orientation they gave us, so the next day, the first day was kind of like, but the second day it was much better”. (P6)

One of the participants valued the kind of reassurance and support they received from preceptors:

“They also give us the – not the power but also that, that also that because I am afraid of next year. I think everyone is afraid of next year because we don’t know, it is like all the students, everyone will come ask us questions and whatever so I am kind of and they kind of just boost that because we are in control”. (P6)

It could be interpreted that the students’ self-esteem was boosted and more confidence was instilled. Literature assert that a good self-esteem is needed by all persons. People with high self-esteem are capable of finding solutions to the problems at hand, thereby resulting in having a sense of accomplishment and contentment (Cha & Sok, 2013:114). The support provided by preceptors enabled students to correct their mistakes, be prepared not only as a student, but as well as for the following year when they would become community service professional nurses.

The findings in this study revealed that many students were afraid of community service year, however, after being in a relationship with a preceptor felt much better due to the kind of learning and support they received from the preceptors. These findings coincide with that of Kim *et al.* (2014:204), where it was discovered that students became competent at the end of a preceptorship relationship.

A participant stated that she was allowed to practice tasks and the preceptor was always available to supervise and gave direction in cases of mistakes. Another participant stated that she was allowed to practice tasks and the preceptor was always available to guide in cases of mistakes. Preceptors furthermore comprehensively exposed students in different ways of handling psychiatric patients:

“Yes, yes she will allocate us to do like and maybe for example in the morning she will allocate us to do things and then she will supervise and then if she can see that ok maybe here and there you are still lacking she will call you, and then you have to do that thing with her”. (P9)

Preceptorship is particularly beneficial to students in correcting mistakes that could help to build their confidence and self-esteem as a professional (Wieland, Altmiller, Dorr & Wolf, 2007:320).

Preceptors furthermore comprehensively supported students in handling different scenarios with psychiatric patients:

“Yes, yes she will allocate us to do like and maybe for example in the morning she will allocate us to do things and then she will supervise and then if she can see that ok maybe here and there you are still lacking she will call you, and then you have to do that thing with her”. (P9)

“Ok some patients are difficult in psychiatry for example, oh you said I mustn’t call out names, there was a patient who was very difficult and then she will give us support as how to deal with the patient like eeh physical and emotional because sometimes you feel like ha a you can’t do this anymore, and she will tell you how to deal with the patient”. (P9)

Students were shown different ways of managing psychiatric patients. A study by Kim *et al.* (2014:198) also discovered that the students were more confident in managing patients after being involved in a preceptorship relationship.

One of the participants had an outstanding experience with a preceptor. She pointed out that since her first year as a student, she never had an opportunity to be taught, advised and shown direction, in the way it was done by a preceptor at the psychiatric hospital:

“Mmm I have never like had somebody guide me in that way, mmm before in other ward not only in psychiatry but medical, but I think it’s because medical wards sometimes it’s too busy”. (P10)

“Because of that..., but I just feel sometimes the environment of psychiatric hospital specifically this ward, you should have that opportunity for somebody to teach you in that way”. (P10)

Higgins and McCarthy (2005) state that preceptorship are models of support that can be used to enable students to gain maximum benefits from practice placements. In another study done by Zilembo and Monterosso (2008:92) it stated that, when a preceptee is matched with a nurse preceptor who is willing and able to demonstrate leadership behaviours, the student directly benefits in terms of being exposed to learning opportunities, socialisation and orientation to the culture of nursing and guidance from an experienced nurse.

3.6.2 Category: Conducting ward rounds as a positive learning opportunity

Participants appreciated the learning opportunity of doing and being included in the multidisciplinary team ward rounds. This appeared to have led to growth in professionalism within the students. This interpretation is seconded by Flynn and Stack (2006), who discovered

that students felt a sense of inclusion in the unit and became more actively involved in communicating with other members of the health care team. One participant said:

“We are supposed to do transfers; we supposed to do the application. (Laughing) more like mhm, he knows that we are supposed to, to go to ward round. And then is always there telling us you guys must attend ward rounds so that you can get your book signed”.

(P2)

In addition, another participant indicated that they were not only observing in the units, but were also tasked to present some patients at the multidisciplinary ward rounds. This was a huge learning opportunity for them because it required them to go and dig more and more information to prepare their case. He further applauded that such opportunities gave them the real practical exposure that enabled them to integrate theory and practice:

“So like I said, he was taken there, we were given the folders to present the patient, feedback about this patient. Now there they discuss everything, they discuss all of these things so I believe that it helped me to under..., to grasp the concept in terms of what is the difference between an adolescent and an adult in terms of these various psychological disorders. So I think it contributed to my clinical experience greatly. It contributed greatly to my clinical experience and then also in terms of my, my mhm mental assessment, there is various ways in terms of how do you get asked questions, specific questions that actually goes and looks at specific things. So “I think I was given, I was exposed to the more detail, you know version of where to go dig for what, what to ask where, unlike this the whole, you know GAPTOMJIV unlike the whole thing. I was given you know exposure of, ja, ja in terms of admissions they allowed me to admit the patient also, you go and do the first, you go and do the first part in admitting the patient. Now sit

down with the patient, talk with the patient. I was given that opportunity, so, but before I was given that opportunity I was exposed to certain things before I was, I was, I was equipped not only with, with, with the realistic clinical skills, because what you do in theory and what happens here its different things, so I think ja, they – that also contributed so they also have the ability to or they also, they are there as clinical supervisors”. (P5)

Another participant indicated that preceptors allowed them to practice as per their scope of practice:

“According to our scope of practice”. (P8)

It seemed that the preceptorship relationship had a good impact on learning. The preceptor has to create an environment conducive to learning by introducing the student to the clinical working environment, and supporting them to make optimum use of this environment for their own learning (Botma *et al.*, 2012:1).

3.6.3 Category: Viewing psychiatry through new lenses

Participants had positive experiences with preceptors working in a psychiatric hospital. It is clear that many students had a negative assumption of a psychiatric unit prior to their clinical placement at a psychiatric hospital. This correspond to the findings of Charleston and Happell (2005:307) that revealed, that the more positive clinical placements influenced by preceptorship, the more likely student nurses will develop more positive attitudes towards people, experiencing a mental illness.

The following participant described how he learned about a mental health care user before he had a therapeutic group session:

“Let me, let me for instance say now, let me make an example, make a realistic example. There was this one patient, I, when I came here or when I, when I was here the patient came here and the patient, I didn’t know what is wrong with this patient, because he was, you know there was something, there is nothing wrong with this patient he should go home, you know but then I went to this group and I saw a different person”. (P5)

During clinical placement, the participant had an opportunity to be exposed to different psychiatric illnesses and their management. The participant further said:

“Then I asked why, why did doctor changed the medication and she explained and so I understood why this person is like this, so when say I was exposed to different things that is the one great example”. (P5)

Participants were also taught psychotropic medications and their indications. The following participant added that she enjoyed being placed at this psychiatric particular unit because the preceptor made the place warm and conducive for learning purposes:

I enjoyed psychiatry so...; I enjoy working in this ward because it is different from where I was placed at Stikland, because I used to work at Stikland”. (P6)

Another participant said:

“It was a very good experience”. (P10)

Participants from this study reflected positive experiences with preceptors at a psychiatric hospital. It was thus evident from the findings of this study that preceptors were compassionate

to student nurses. This view is supported by Hilli, Melender, Salmu and Jonsen (2014:1420) that affirmed that, to be effective, a caring relationship is essential for the basis of student learning.

A participant added that being placed at a psychiatric hospital was very good for learning purposes. Moreover, she admired the availability of time for learning opportunities that was made available by the preceptors to them as students. The participant said:

“We have been so; I find general hospital to be very busy right! There is not a lot of time to be taught the admin so here we have been given a lot of time, so I have been, here I learned how to do hand overs, in terms of writing day and night report, how to mhm... consult with doctors...by the example from the sister or the professional nurse that I have observed, mhm... getting more involved with ordering of medication and collecting medications”. (P11)

The study results revealed that student nurses had more time to grasp skills and knowledge as compared to their previous clinical experiences at general hospitals. This is similar to the findings by Charleston and Happell (2005) which affirm that both preceptors and student nurses experienced differences between general and mental health settings, which impacted on the attitudes of students and their ability to gain knowledge and clinical confidence.

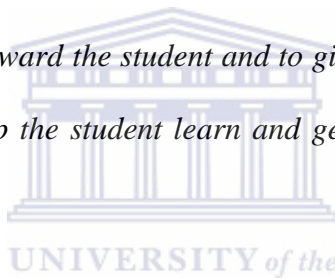
3.6.4 Category: Reflecting on good memories

Gibbs (1988) model of reflection argues that reflection help in making sense of the experiences.

The following participant voiced her feelings of being asked to reflect on her experiences. It was argued that it pushed the students to talk about their feelings and contributed towards a good relationship between the students and preceptors:

“Mhm actually I do really appreciate that you ask us about the experience because when you get to talk about your feelings, your views to someone then this makes you really feel more comfortable and confident and feel – it also helps you actually to see what you like, what you need more”. (P3)

“If you find out that some student or senior students they will through this kind of projects, they have like a reflection about us and it also like kind of pushing the staff also to try hard to be friendly toward the student and to give them, the student what they need from them, which is to help the student learn and get what they need to have as future professionals”. (P3)



There was a reflection of positive improvements in patients' illnesses in the units where there were preceptors allocated to students:

“So for instance working here at, what I can see working in this ward especially it's nice to see that patients, is getting better. So at the other placement I was still asking myself, are these patients getting better, but in this ward I can see there is some patients really gets better and that's for me, it is nice, it is a good because our help here, I am also myself part of staff although I am student”. (P6)

Students valued and learned from each and every experience, positive or negative, as these experiences assisted them to accept nursing as their career (Buthelezi, 2014).

3.6.5 Category: Enthusiasm in linking theory with the real world of practice

Many participants maintained that being placed at a psychiatric unit helped them to integrate theory in practice. This was also discovered in Raines (2012) who maintained that the nurse preceptors can be used as a bridge between theoretical education and actual experiences for student nurses who are preparing to enter the clinical (practice) environment. A participant said:

“Ja, it is just that now that we are here we physically see and really interesting and amazing to actually interact with the patients themselves. You see, work we are taught in class, about usually psychiatric disorders then we get to see the real patient who got those disorders and then we interact with them, so actually we, we actually, it actually helps to really understand what you studied theoretically and then you put it in practicals and then you can actually get the inside. Ja, it is where you can actually interview a patient and then you look at the patient you observe what the patient is doing then you reason with the patient, is talking to you and then you interlink with the disorders that you know psychiatry and psychiatric then you can actually, ja it helps. Of psychiatry because firstly I was placed in intellectual disabled great difference between intellectual disabled people this psychiatric patients, because these are the real psychiatry, psychiatric conditions that you meet in real then you have to manage them you see. Ja, so it has helped me to grow mentally and ja, and the experience as well”. (P3)

It could be interpreted that the nurse preceptors had played an immense role in helping the students in linking theory to practice. This corresponds to the findings of Mabuda, Potgieter and Alberts (2008:19) who reported that preceptors are able to ease the correlation of theory and practice.

Another participant unveiled her gratefulness of being given a chance to do things and this enabled her to be confident in practice to practice many skills:

“To be interested in learning new things or like they give you an opportunity to maybe to try something or to manage something, so it makes you confident in what you are learning”. (P4)

After being exposed and given many opportunities to practice skills, students were more confident at a psychiatric setting:

“If there was eeeh medication to be handed out, we needed to deal with it, so there were more, they were, they were more in-depth in terms of providing us with the opportunity of actually, not only achieving our objectives but learning what psychiatry is all about. So I think in that sense, I would say it was, it was, it was not only rewarding to me, but also it was, it was – I found it very, very useful also. So it actually mhm enabled me to become more confident in psychiatry”. (P5)

It appeared that student nurses had suitable experiences during their placement at a psychiatric hospital. This is confirmed by Oywer (2011:99), stating that student nurses experiences at mental health settings were constructive.

Furthermore, the participant pointed out that he could see that there was “something extra” about the preceptor:

“So for me it was in terms of gaining, gaining, gaining quality, mhm mhm... good quality mhm experience of psychiatry and, it was provided because I can insist, she is a preceptor. Yes at Stikland they also give us guidance in terms of patients will present with this, this is this is that but like I said, we were never given proper opportunity to go and

actually achieve our objectives like in here, we standing there in front of the, on your own delivering this child so it was all on you, so I think what, what they did is what they were able to explain, there was exactly this is what this, how you do this, and this is the proper way to do it, now do it". (P5)

Based on the findings of this study it was evident that the preceptor offered students more thoroughly orientated education; moreover, the preceptors were always available at all times for students concerns and guidance as compared to other professional nurses that did not attend preceptorship training. During the preceptorship, experienced nurses develop working relationships with students and facilitated their orientation and integration into their new roles and responsibilities in the professional practice environments (Swihart, 2007).

The arrangement was made by preceptors in advanced for some skills that were not available within the units to be practice at other units by preceptors:

"They help them so we gave our books to the sisters and the sisters like says whatever like for instance we need to admissions and in this particular ward there is no, there is not a lot of admissions so when there will be admissions they will, they won't help us, but they will like, here is an admission, they will like before in advance they will tell us, okay that day and that day are, you working that day, because there is admission coming and you need admission so we are just telling you now that there is admission coming so be ready for that. There is a discharge because that is the type of thing that we need to do. We don't get in this ward there is nothing, not nothing, but it is very minimal so they are like, so I think they are doing like their part towards us, it is like, it is just us that have to

do the work, because they already tell us, that time and that, this and this will happen so". (P6)

"Mhm I have experienced a lot in the ward because mhm they, they, they, they give us a chance to practice". (P8)

Participants were informed and prepared for doing certain tasks prior to doing the actual task. They were given enough time to be ready and to ask questions before time. Moreover, they were exposed to several learning opportunities such as admissions and discharges of mental health care users. Furthermore, preceptors instilled self-independency to students to practice skills and activities on their own.

The research results of the study further uncovered that nurse preceptors were able to observe and to attend to nursing student's uncertainties:

"And when you do prac... like, for, sometimes when, you know sometimes you never did before, it's, you find it difficult to do it, it's like you might think know but you don't know, but throughout practical's, she was able to, like recognise when we are unable to do things". (P9)

A participant applauded the preceptor for leading by example. The following participant aired her experience with a preceptor as follows:

"So things that need to be done, the TB sister was contacted, the TB and HIV sister was contacted, she came it eeheh you guys have a box with mask and staff, more masks was ordered, a lady also came in to show us on how to properly fit the masks. Mmm she showed us exactly how to do it also like how to take care of anything that comes to contact with the patient". (P10)

This understanding is shared by Kim *et al.* (2014:187) who asserted that preceptors serving as role models to students must facilitate their teaching learning process and socialisation. This study further found that a positive professional relationship enabled the students to better socialize and learn clinical skills.

Student nurses were additionally exposed by nurse preceptors to mental health care users' management strategies:

“Being more involved in the patients treatments, and understanding their treatment and how to then explain this to the doctor like the things that we observed, how to like,... how can I say like transfer the information to the doctor so that”. (P11)

“Yes with like with the patient that has been recently ill, the sister allowed me the opportunity to, oh the was just one patient he was ill one needing like fast observations, she allowed me to be the one doing the vital signs every thirty minutes recording everything every thirty, to transfer the patient to the clinic, to hand over to the sister, oh there was just one patient where I also had to hospital there like all the patients are that ill, sister has time to like you know teach you how to do chart”. (P11)

It appeared that the preceptor allowed the student nurses to act as sister in charge and be responsible for transferring very sick patients to the general hospital. Preceptorship has shown to help the student build the confidence and ease their transition from being a student to a nurse (Kim *et al.*, 2014:189).

3.6.6 Category: Objectives were SMART

Objectives clearly detail exactly what is required of the students from both the university and the clinical supervisor sides (Smith & Armstrong, 2001:549). During the preceptorship relationship it was noted that the student's objectives were met. A participant indicated that the preceptor ensured that the student's objectives were met within the unit, and that the preceptor explained and ensured that everything was understood by students (realistic), before he would sign off on students' practical books:

"We do actually because all this that are done here is work we need to achieve our objectives especially him things to get signed in our books and they are there to assist us, they explain us and they, they ensure that they sign for us something that they know that we know". (P3)

It was evident that the preceptors were able to link the student objectives to actual practice. In addition to the above, the findings indicated that at some units the nursing staff would not allow students to achieve their objectives or were not willing to help them; however, preceptors enabled them to be exposed to learning opportunities that were in line with their required objectives (could be achieved). A participant said:

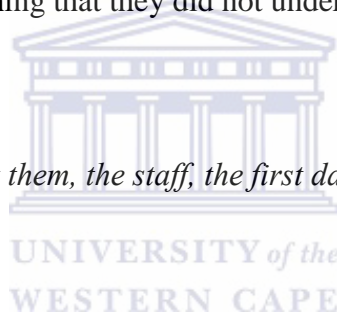
"I enjoyed my experience here because everybody is, actually has been very helpful in like completing our objectives and a lot of times like some staff they want, they don't really show interest in what you supposed to be doing, but here they gave us an opportunity to ask questions and do MSE's and also to, like because we are fourth year students so we also have that responsibility to be in charge of certain things so they gave us that". (P4)

Furthermore, a participant indicated that the preceptor did not only focus on their required objectives in the practical book, but created many more specific learning opportunities within the psychiatric unit:

“So I don’t know it is, compared to Stikland they also wanted to know what, what our objectives but then here they actually created an opportunity for us to achieve these objectives, so for example when we, there would be a ward around, at least one of us would go to be there”. (P5)

Student nurses were invited by the preceptor to come with their learning objectives and were encouraged to seek clarity on anything that they did not understand. One participant indicated the time frame that was adequate:

“What I like about it, about them, the staff, the first day we came here, they know we have objectives”. (P6)



Others stated:

“And they were, if there is anything we can do to help you with your objectives, you must just come to us and so we told them, what were our objectives. So they, they, I won’t say they guide us, but they help us. For instance, the other hospitals, some sisters, some nurses won’t do that because that, that is already like an open policy, it is like I can, whatever question I have, whatever something that I need to, that I don’t understand, I can go to the sister freely and the sister will explain to me this is how it is done, okay come let’s make a plan, that time and that time, then we can do that and then we can do that. So I really did from the first year from like the beginning of the year, I was psych... I can see how I am growing, and it is thanks to the sisters”. (P6)

Objectives set were measurable:

“Yes she, she at the beginning she asked us in our books are there any objectives that we still haven’t met, that still maybe need to do, that she can help us with mmm for example the medication how many times do we still have to, how many signatures do we still owe. She will give you an opportunity to stand with her to do medication a lot of times. So she was very open to that she asked us, she was able to like help us. We had also to a group one day and she told us where maybe it would be the best to do it, station in the ward to do it. She guided us in that way as well”. (P10)

Student nurses unique learning opportunities and their objectives appeared to have been met by preceptors. Establishing individual learning needs is the responsibility of the preceptor and has to be established in consultation with the student (Siganga, 2013:71). Another participant said they were closely guided that measured their progress:

“Well what I can I say is that, actually we, we are enjoying it, we are enjoying it, we are working with staff and we are, because they really hold our hand and show us what we can do they read us, they do supervise us, we ask questions, they answer us, answer about what we need, ja”. (P3)

It could be interpreted that student nurses were assured to consult with preceptors should they come across with any difficulties. Preceptorship entails clinicians to create a supportive learning and working climate where students or newcomers are given opportunities to develop professional competence (Bengtsson & Carlson, 2015:1)

3.6.7 Category: Learning through a variety of possibilities

Furthermore, participants also appreciated the opportunity of learning and being able to follow the ward programme through the presence and help of the preceptors. Orientating the student to the daily routine of the unit reduces anxiety and students are better able to learn (Botma *et al.*, 2012:3).

“Well like I mentioned what they did that I done here, those medications and in the morning actually we, we, we, wake the patients up and they can go shower, help them, give them the towels, those that don’t have towels, soaps, we give them body lotions mhm, mhm. Toothpaste to brush mhm clothes. So mhm... the ward programme is actually you know mhm I’m, I’m actually learning”. (P1)

“I just want to comment (laughs) I just want to say that you guys are doing the good thing teaching these preceptors”. (P2)

“To help us with the work, I think it is going to help a lot of students”. (P2)

“It’s a good thing”. (P2)

“Of course there is a difference because now before I came here I didn’t know what is going in this particular ward, but now I know what is going on, so it is kind of, it is like I have got insight actually”. (P3)

The study results indicated that undergraduate student nurses were honored to have been working with preceptors. This category relates to the findings of Shepard (2014:83), who studied the student perceptions of preceptorship learning outcomes in undergraduate nursing

programmes in the United States of America. This study correspondingly indicated that student nurses perceived the preceptorship to be an invaluable learning.

One participant pointed out that he was taught how to conduct climate meetings and ward rounds:

“I remember when I had to do my mhm order... for me, for me, for me working with adolescents it’s new it’s a new thing and I didn’t know young children are doing drugs or also could be, or could end up being psychotic suffer with all of these mental, so for me to grasp the concept was difficult, was difficult because I only thought this thing was in adults and you see that this thing can be so easily happen to young ones also, so in terms of that they actually explained to us, we were sat down, we were explained this happens, this is the difference between the adolescents and the adults and I learn that was being part of the, the, the climate meeting, the climate meeting, the multidisciplinary team meeting”. (P5)

A participant mentioned that they were taught how to handle emergency situations as sisters in charge and would be able to write daily reports for the wards. This prepared them for the following year when they would become community service nurses:

“They showed me like report I would need to fill in mmm if something happened eeheh like protocols that, like let’s say patient get sick what do I need to do, eeheh an emergency situation”. (P10)

“To have to be able to do it next year as a sister”. (P10)

“So the staff is very good, it’s very positive experience, I really enjoyed it”. (P10)

It seemed that students had a good relationship with preceptors who offered many learning opportunities within the wards which resulted in competency in skills. This is in line with Shepard (2014:83) who discovered that students perceive preceptorship experience to be beneficial for enhancing clinical competence.

3.6.8 Category: Discharging patients as part of the learning experience

It seemed that preceptors were able to demonstrate to student nurses how to discharge patients. According to Botma *et al.* (2012:4), a demonstration occurs when the preceptor demonstrates clinical competencies while the students observe the application. The following participant indicated that they were taught many procedures within the unit by preceptors:

“And discharging mhm patients to home now... so they actually show you how to do all of those procedures, so they are actually very much helpful”. (P1)

In addition, a participant described how she was taught many procedures as follows:

“I did work in the intellectual disability ward so this was my first time to work in pre-discharge ward so new procedures that you need to do here, which is different from the ward I used to intellectual disability so they really are so kind and so helpful, they do show us how to admit the patients with criteria for admissions, they show us the procedures to be followed to discharge the patients to give them the leave of absence, things like that and this whole process of following other patients course of medications like we had to draw blood every week”. (P3)

From this study finding, it could be interpreted that preceptors were trained to be competent in many clinical e.g. discharging skills. This confirms findings from two other studies that a one-to-one relationship in the preceptorship experience fostered a rich and successful learning environment, and has implications for nursing education, practice and research (Luhanga, Billay, Grundy, Myrick & Yonge, 2010); and that an one-to-one preceptorship relationship increases a positive preceptorship experience (Willemsen-McBride, 2010).

3.6.9 Category: Learning how to give medication as part of learning opportunity

The majority of the participants overwhelmingly highlighted that preceptors went into detail in explaining to them about psychotropic medication and its indications. Preceptors and students should assess the student's progress based on meeting objectives set for each week of the programme planning for opportunities to meet these objectives, carrying out the objectives, and evaluating the effectiveness in meeting the objectives (Kim *et al.*, 2014:187). The medication procedure being part of the students' objectives, was thoroughly covered in this regard. The participants had the following to say:

“What you must do in terms of... things like giving the medications...ordering medication for, for, for patients that are actually you know, they due for weekend leave or discharge they show you how to mhm take the – sort of admitting the patient or transfers maybe from other wards”. (P1)

“We, we, we go for, like I just mentioned for now that we – they actually help us to, they show us how to administer medications to the patients. I mean all of that stuff that actually done in the unit”. (P1)

“Tuesday to check up how the medications is mhm kind of medication and process of the patient bodies, these are things that I didn’t know where I used to work before, so you are they teach us that, they explain us what is done and why it is done and the way it has to be done so actually they increase, they make us grow with the knowledge ja, which is very grateful”. (P3)

“So when, in terms of psychotropic medication it is also an objective for us. Yes you can stand with the prescription chart there and I would stand the medication tell you this and this and this much of this. I would put it in but I don’t think that is, I am actually gaining skill because I am not practicing independently”. (P5)

Handling medication, as one of the students’ objectives, was comprehensively covered by preceptors during the placement of students. Preceptors were doing on the spot teaching and the students were included in all medication tasks. The results indicated that the clinical preceptorship programme increased the overall perceived competency skills of senior student nurses (Kim *et al.*, 2014:203). It was stated:

“I will be confident in future, I will not hesitate whenever I am with a prescription, is this this medication, am I doing this so what I was able to do here for the preceptors, from their side, I was, we were supervised, yes we were supervised but we did it hands on. We were doing it; we were taking the prescriptions down after being – he explained specifically how the prescription charts works”. (P5)

Preceptors delegated tasks to student nurses so that if the students were allocated to do medication they would know it and would prepare the morning, day and afternoon medication.

This is corroborated by Biagioli and Chappelle (2010:21), who argued that expanding students' responsibilities can make them more valuable to the practice and enrich their learning experience. Participants said:

"So what I like about this is that they delegate and we do it. It is not like they always, so I like it because I know I have to do it, like for instance medication. If in the morning I must give medication I will come to medication, we as students we will come to medication because that is how they learned us". (P6)

"I will come to medication afterwards if everything is it is correct, then I would start administrating the medication to the patients. Then I know, okay twelve o'clock I must give it again, so they don't need to tell me, twelve o'clock, okay twelve o'clock we mustn't give medication, I know I mustn't give medication that is why I have the key". (P6)

"Now I can order medication, last time I did not know how to order medication, but they teach you how to do it". (P8)

The preceptor played a crucial role in teaching students medication productively. Furthermore, the preceptor was the supervisor to students when giving medication she would stand alongside to double check with students. This resulted in a smooth relationship between a preceptor and a student nurse, which is likely to add in patients care improvement. Zilembo and Monterosso (2008:90) similarly observed that when a preceptor was willing and able to demonstrate leadership behaviours, it in turn led to positive outcomes for patients and the organisation or system.

The following participant mentioned being taught some medication management skills by a preceptor:

“Mmm oh yes that is was the medication I think the one that got, that was the auditing, ordering day”. (P10)

“Ja, eeeh she showed me how that, she just have a constructive way”. (P10)

“Yes mhm as in medication I must do it alone the chart in front of me, I have to read the chart, but she, but the person would like stand behind me whether as ...just to say look or look here yes double check”. (P10)

The study results further revealed that students were accommodated to do leadership activities and to practice skills. Furthermore, students were equipped to handle very sick mental health care users and shown how to follow the correct protocols:

“Ok opportunities that we had in the ward mhm..., we have never been told like there is no time do things, so we have been able to have opportunity to do medication every day, like the day and night report every day, mhm... the... the handling of two patients that were transferred from the ward to general, clinic were very ill”. (P11)

It could be interpreted that the preceptors had played the vital role by allowing student nurses to practice many leading related learning opportunities. A study done by Brathwaite and Lemonde (2011) correspondingly discovered that the preceptor provided a supportive learning environment for students that encouraged leadership.

3.6.10 Category: Acknowledging the special characteristics of the preceptor

Participants reportedly learned many skills while being placed with preceptors in a psychiatric hospital. Shepard (2014:83) indicated that student nurses perceived the preceptorship to be an invaluable learning experience that enhanced their competence in the clinical setting. A participant shared:

“Mhm... as a student I don’t, I don’t, I don’t have anything that I would like to add, I don’t think they, they show off any... mhm thing, however, maybe like eeh... let’s say mhm there is one angle maybe they, they still need to push”.

“To get us forward on, on, on, on, on – educating us and all of that, I think they are actually meeting each and every mhm angle that we actually need as students for me so far actually. I don’t, I don’t have any issues”.

“I can just say, with, with more practice just because you know, ja, we do feel great that, that you actually had an opportunity to achieve, just even if it’s what – a few times oportuni..., opportunity that you actually do something but you know we feel quite you know that at least you are doing something, so it’s a great feeling”.

“I would just say the preceptors are very nice to us, I would like to just mhm, I would like them to continue with their, with the way that they are even to other students maybe the students that are actually coming over the next coming years, so ja they, they are very helpful”. (P1)

Participants described the nurse preceptors as individuals with approachable personality. This view is backed by Zilembo and Monterosso (2008) who suggested that effective preceptors are those who exhibit characteristics that include being approachable with strong personality.

The participant further recommended that they should continue with their approach and method of teaching students to future students as well. It was evident in the findings of this study that student nurses were impressed by the teaching style of a preceptor and saw role modeling.

The findings indicated that preceptors covered many learning aspects and knew their objectives as fourth year students, serving as a role model. Furthermore, preceptors consulted student nurses on how to meet their needs showing a transparent environment. Martin *et al.* (2011:5) correspondingly established that preceptors were interested in knowing from the student, the best way for the student to learn in the clinical environment. They further indicated that preceptors recognised certain aspects of their role, and reflected, by wanting to know how best to meet the learning needs of the student under their tutelage:

“It is very nice working with him. He teaches us a lot”. (P2)

“On the first day we didn’t have..., we didn’t have to ask eeheh, to ask him to help us when we came”. (P2)

“Well what I can I say is that, actually we, we are enjoying it, we are enjoying it, we are working with staff and we are, because they really hold our hand and show us what we can do they read us they do supervise us we ask questions they answer us answer about what we need, ja”. (P3)

Students captured the intellectual benefits being placed in the ward that was occupied by a nurse preceptor:

“I think it really contributes significant, significantly mhm to us, what we, we actually mhm, they are really contributing because when we are here, we don’t exactly know

everything that is going on in the ward, because for example, I did work in the intellectual disability ward so this was my first time to work in pre-discharge ward so new procedures that you need to do here, which is different from the ward I used to intellectual disability so they really are so kind and so helpful, they do show us how to admit the patients with criteria for admissions, they show us the procedures to be followed to discharge the patients to give them the leave of absence, things like that and this whole process of following other patients course of medications like we had to draw blood every Tuesday to check up how the medications is mhm kind of medication and process of the patient bodies, these are things that I didn't know where I used to work before, so you are – they teach us that, they explain us what is done and why it is done and the way it has to be done so actually they increase, they make us grow with the knowledge, ja, which is very grateful". (P3)

It appears that preceptors contributed significantly towards the uniqueness of the learning of the undergraduate student nurses. This view is backed by Brathwaite and Lemonde (2011:2) whom in their study correspondingly discovered that preceptors provided a compassionate learning environment for students.

The following participant appeared to be comparing the level of help she received from both preceptors, working opposite shifts:

"The other one Mr... we didn't have like one-on-one session or when I am working with him like..., and then the other one he knows a lot of things and he teaches me a lot of things the things I didn't know". (P7)

“They didn’t contribute like I can’t say that they did a lot like in my clinical placement here but what I can say is I learned a lot about how to treat the patients but other than that, in terms of what I have to say like what I had to know nothing”. (P7)

The following participant had a growing relationship with a preceptor and other nurses. She stated that such a relationship made her to feel competent:

“I gained knowledge, lot of knowledge there... mhm”. (P8)

“Mhm ok I would say that a relationship between me and the operational manager, and me and two sisters at work mhm, made me to be like act as sister myself in the ward, because they show us how to do things”. (P8)

The participant was equipped with a useful knowledge at a psychiatric hospital. Shepard (2014:83) affirmed that students believed their experience had a positive impact on their professional growth in the area of general professionalism, communication skills, and performance of clinical nursing skills.

One participant stated that the preceptor corrected students’ mistakes on a continuous basis that enhanced professionalism. After doing an activity or task the preceptor would give a comprehensive feedback to student nurses on performances that made students sensitive to the things they learned:

“Ok, for example, there was a patient in my ward eeeh I think she, she had a, he had mhm schizophrenia, then we did MSE with him”. (P9)

“Ja, the sister after the patient was gone, and then she told us more, like we did MSE then she taught us how to do the MSE”. (P9)

“Yes but she teach us, she teaches us many things like many different kinds of things...”

(P9)

The participants of this study experienced that they were exposed to different types of opportunities during their placement with preceptors at a psychiatric hospital. This is agreed by Shepard (2014:73) who affirmed that preceptorship enhance the use of blended learning with student nurses.

3.7 Conclusion

The research findings of this study were discussed in this chapter. The study results overwhelming indicated that undergraduate student nurses had positive learning experiences with preceptors. The research findings of the study were explored under three themes and nineteenth categories as outlined in Table 3.2. The following chapter will discuss the research study's conclusions, limitations and recommendations.

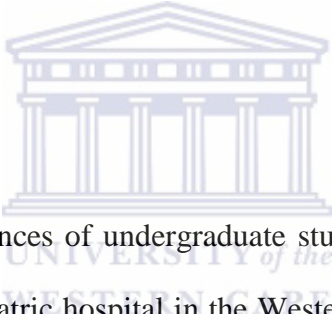
CHAPTER 4

CONCLUSION, LIMITATIONS AND RECOMMENDATIONS

4.1 Introduction

The research findings were discussed in the previous chapter. In the discussion of the findings, verbatim quotations from the unstructured interviews were used as evidence to support the results findings and literature was used to confirm the findings of the study. This chapter will focuses on the conclusion, limitations and recommendations which are guided by the research study findings.

4.2 Conclusion



This research explored the experiences of undergraduate student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. In the data analysis, three themes with nineteen categories emerged. The research results of the study indicated that undergraduate student nurses had positive experiences with preceptors during their placement at a psychiatric hospital. Participants described their experience with preceptors as beneficial as it played an enormous role in their learning. The results further indicated that preceptors treated student nurses in a professional manner and it was easier to work with professional nurses who did a preceptorship course. This is similar to a study that was conducted at the University of Zululand by Cele, Gumede and Kubheka (2002:50). Their study uncovered that clinical instruction was mostly done by nurse preceptors rather than other professional nurses. Furthermore, it was also revealed that nurse preceptors are playing the most essential role in student accompaniment as compared to other nurses who did not attend preceptorship course. In

addition, the results indicated that many student nurses did not encounter any problems while working with preceptors. They were properly orientated to the units and mostly their objectives were met in relation to the nursing undergraduate curriculum. This is backed by Turner (2007:93) who affirmed that the preceptor is able to settle students quickly into their new working environment.

Moreover, they felt that the environment was a learning environment to learn different skills. The results also indicated that some student nurses had negative preconceived ideas prior to being placed in a psychiatric hospital. Participants indicated that they were afraid of psychiatric patients. However, the presence of a preceptor in the units made the environment friendlier. The results of this study furthermore uncovered that the nurse preceptors played an enormous role in minimising the negative experiences usually experienced by student nurses at psychiatric hospitals. Being placed at a male psychiatric unit as a female was also a challenge.

The study results indicated that many preceptors were committed on their roles as preceptors. They revealed that preceptors did not only prepare student nurses for the specific activities, but also prepared them for their community service year.

The research findings of the study addressed the research study objective and delivered answers to the research question. The recommendations in this study are grounded on the three emerged themes of the study and the use of the literature is use to validate the findings of the study.

4.3 Recommendations

The following recommendations were formulated by the researcher based on the research findings of the study.

4.3.1 *The role of the preceptors*

Results found that students find it easier to work with sisters that were trained in preceptorship. This view is supported by Hilli, Salmu and Jonse (2014), who discovered that preceptors are caregiving, creating an atmosphere that breathes the idea of possibilities and engagement, a place where the students can flourish. The hospital management should send as many professional nurses to attend preceptorship training to minimise negative experiences of student nurses at psychiatric hospitals. There are still a few preceptors at psychiatric hospitals and many students are placed in the units where there are no preceptors and are not assigned to preceptors at all.

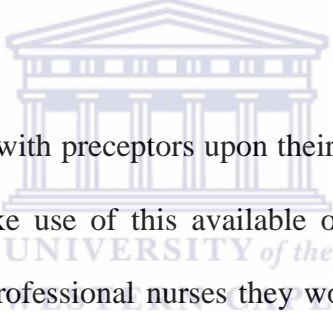
In literature review, many studies have revealed that student nurses tend to hold negative experiences of psychiatric placement. The school of nursing in the Western Cape, offering the preceptor training course, should continue with this positive initiative. This will result in an increase in the number of preceptors. This is supported by Burns *et al.* (2006:182), who contend that preceptors are urgently needed to prepare the next generation of clinicians. These authors further validate that the preceptor needs to be familiar with the university curriculum, the university goals and objectives for a specific clinical experience.

4.3.2 Challenges to be addressed

Nurse preceptors should properly introduce students to psychiatry and render support at all times.

Female student nurses should be supported when working with male ward units.

Croxon and Maginnis (2009:236) proposed that the available placement time should focus on the students' needs rather than service needs and that there must be adequate opportunities for students to develop confidence and competence in their clinical skills with a focus on student learning needs. Preceptors should continuously exercise their roles of being preceptors and be supported by nurse managers in keeping these roles going continuously.



Student nurses should be assigned with preceptors upon their placement and be informed of this happening and encouraged to make use of this available opportunity. It was discovered that students were not aware that the professional nurses they worked with had done preceptorship. The study findings also revealed that students were not aware of the preceptorship or availability of preceptors despite being placed in wards where there was a preceptor. For this reason, it is recommended that student nurse should be all informed of the availability of preceptors. This relates to a qualitative study done by Abubu (2010:70) on experiences of first-year University of the Western Cape student nurses during their first clinical placement in a hospital. She recommended that student nurses must be informed about the availability of these support systems and be encouraged to use them effectively.

There should be a preceptors' hospital forum that will at least meet quarterly within psychiatric hospitals for continually ongoing debate of preceptors to sustain preceptorship and refreshing the preceptor roles. Such a forum will enable preceptors to keep and exercise their roles at all times.

Higher education institutions should also advise and inform student nurses prior to placement that there are preceptors within the hospitals that would cater for their problems or needs at a psychiatric hospital. This opinion is supported by Sedgwick and Harris (2012:6) who argued that student preparation for the preceptorship experience is essential in optimising their learning. In this research, it was evident that student nurses, despite having positive experience with preceptors, were not informed of this opportunity specially designed to cater for their needs. HEIs need to liaise with hospital management on how to assign student nurses with preceptors.



4.3.3 *Creating a learning environment*

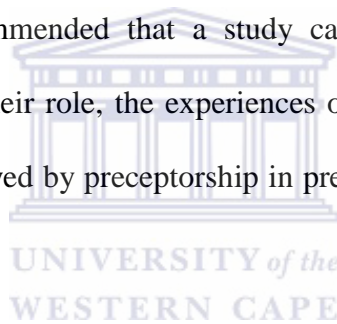
Thorough orientation must be continuously practiced by preceptors to expose students to many learning opportunities. This study revealed that undergraduate student nurses were exposed to different learning skills by preceptors. This study concurs to Hilli *et al.* (2014:572), who observed that a learning environment where the students are cared for is characterised by openness, permissiveness and flexibility. The students should feel safe and secure, ask questions and reflect upon different matters. Preceptors on the other hand also need a supportive environment from their managers to facilitate learning to students. A study done in Ireland by McCarthy and Murphy (2010:234) highlighted that the majority of preceptors described the role as stressful and burdensome, and did not feel adequately supported by their clinical managers. Preceptors need to be acknowledged of their roles by management. This view is supported by

Boyar (2012) in her study on when nurses precept students. This will result in an effective learning environment as preceptors will always exercise their roles.

HEIs should constantly update the hospital nursing management and preceptors of any latest development in student's objectives or curriculum to enable preceptors to be informed and prepared of the current student objectives.

4.3.4 Further research

It is recommended that a quantitative study needs to be carried out on students experiences of preceptorship. It is further recommended that a study can be done on factors influencing preceptors to keep and exercise their role, the experiences of student nurses with preceptors at other institutions, and the role played by preceptorship in preparing final year student nurses for their community service year.



4.4 Limitations of the study

A limitation of the study was the small study sample that partook in the study and was placed at one hospital and registered at one higher education institution. The findings were rich however does not allow for the generalisation of the research study findings to other settings. However, qualitative research focuses on the specific context of each unique individual.

4.5 Conclusion

In this chapter, the research findings of the study were presented and the three themes discussed in Chapter 3 were used to discuss the recommendations. The study results showed the positive

experiences of undergraduate student nurses with preceptors. Recommendations were also discussed and proposals for a further research on the topic were also presented.



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Appendix A: Information sheet



UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592241, Fax: 27 21-9592755

E-mail: kjooste@uwc.ac.za

INFORMATION SHEET

Project Title: Undergraduates student nurses' experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.

What is this study about?

This is a research project conducted by Bhekithemba Vellem, a master's student at the University of the Western Cape. I am inviting you to participate in this research because you will be given the opportunity to describe your experiences with preceptors during their clinical placement at psychiatric. The purpose of this study is to explore and describe undergraduates student nurses experience with preceptors during their clinical placement at a psychiatric hospital in the Western Cape. You will be asked to complete a consent form to participate in the project.

What will I be asked to do if I agree to participate?

The researcher will schedule an interview with you in a private and quiet room at the service unit. One on one interview will be conducted with you by the researcher and it will take not more than an hour. The interviews will be audio-taped with a digital recording device and field notes will also be taken so that the researcher can go back and verify what you will share. You will be

asked open-ended questions regarding your experiences with preceptor as an undergraduate student nurse. This will be followed by further questions depending on the answers that you give. There will be no right or wrong answer. The interview transcription and field notes will be stored electronically on multiple hard drives, only the supervisor, an independent coder and the researcher will have access to these recordings. The researcher will take written field notes during the interviews. However, the participants' names will not be recorded in these notes.

Would my participation in this study be kept confidential?

We will keep your personal information confidential. To help your confidentiality, personal data will be locked in a cabinet for the duration of five years after the date of publication of the results. The computer that will be utilised for storing information is password protected. The researcher will use codes instead of names. Codes will be placed on collected data. By using an identification key, the researcher will be able to link the collected data to your identity.

What are the risks of this research?

There are always minimal risks associated with participating in any research project involving interaction with other human beings and talking about experiences. The risk may be that of psychological or emotional discomfort. However, if any psychological or emotional distress during the course of the interview is experienced, we will stop the interview, you will be referred to appropriate counselling services.

What are the benefits of this research?

This research is not designed to help you personally, but the results may help the researcher to learn more about your experiences with preceptor at a psychiatric hospital. Results and recommendations of this study may provide heads of nursing schools, nursing educators, hospital

managers with useful and in-depth information which may influence the decisions and policies relating to clinical placement of undergraduate student nurses.

Am I obliged to take part in this research project and can I stop participating at any time?

Your participation in this research project is completely free and voluntary. You may choose not to take part at all. If you decide to participate in this research, you may withdraw at any time during the study. If you decide to withdraw from the study, you will not be penalised in any way, neither will you forfeit any benefits to which you otherwise qualify.

How do I get my questions answered?

This research is being conducted by Bhekithemba Vellem from the University of the Western Cape. If you have any question about the research study, please contact him at 0732493453 or e-mail: bhekithemba.v@gmail.com. Should you have any questions about this study and your rights as a research participant or if you wish to report any problems you will be experiencing in relation to the study, please contact:

Bhekithemba Vellem

21 408 Reggie September street

Makhaya

Khayelitsha

7784

Cell Phone: 0732493453

Email: bhekithemba.v@gmail.com

Should you have any questions with regard to this study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

Head of Department/ School

Prof. Karien Jooste

University of the Western Cape

Private bag X17

Bellville, 7535

021 959 2241

Email: kjooste@uwc.ac.za



Dean of the Faculty of Community and Health Sciences:

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Supervisor

Prof Karien Jooste

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This research has been approved by the Senate Research Committee and Ethics Committee of the University of the Western Cape.



Appendix B: Written Informed Consent



UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592241, Fax: 27 21-959 2755

E-mail: kjooste@uwc.ac.za

Project Title: Experiences of undergraduates student nurses with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.

The study has been described to me in a language that I understand and I freely and voluntarily agree to participate. My questions about the study have been answered. I understand that my identity will not be disclosed and that I may withdraw from the study without giving a reason at any time and this will not negatively affect me in any way.

- Participant's name:
- Participant's signature:
- Date:

Should you have any questions regarding this study or wish to report any problems you have experienced related to the study, please contact the researcher:

Study coordinator: Prof K. Jooste

University of the Western Cape

Private Bag X17, Bellville 7535

Telephone: (021) 959- 2741

Cell:

Fax: (021) 959- 22755

Email: kjooste@uwc.ac.za



Appendix C: Letter of request to participating Hospital Research Ethics Committee to conduct the research

21 408 Reggie September street

Makhaya

Khayelitsha

7784

16 March 2015

The Research Ethics Committee

Highland's Drive

Lentegeur

Mitchell's plain

7785



Dear Doctor Smith

Re: Request for permission to a conduct a research project:

Herewith, I wish to request your permission to undertake a research project at this institution as a requirement for the completion of the Masters in Advanced Psychiatric Nursing course at the University of the Western Cape that I am currently undertaking. The title of my study is

“Undergraduates student nurse’s experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape”.

The undergraduates student nurses placed at the hospital will be eligible key informants. Please be assured that anonymity and confidentiality will be safeguarded at all times. The study is expected to provide valuable information on experiences of undergraduates student nurses with preceptors during clinical placement.

Individual interviews will be conducted with fourth year undergraduate student nurses at conference rooms and arrangement will be prepared prior to the units. Purposive sampling will be employed to select participants and informed consent will be obtained from them prior participation in the interviews. The results will be made available to participants and your institution and thereafter published in an accredited journal or a peer review journal.

Enclosed please find a copy of the written consent form, information sheet, proposal, and ethical clearance letter for your scrutiny.

Yours faithfully

.....

Bhekithemba Vellem (Professional Nurse Ward 1)

Contact Details: Cell: 0732493453

Email: bhekithemba.v@gmail.com.

Appendix D: Letter of approval from the selected psychiatric hospital research ethics Committee



DIRECTORATE: General Specialist and Emergency Services

FACILITY: Lentegeur Hospital

REFERENCE: Research Committee

ENQUIRIES: Dr P. Smith

15 May 2015

Lentegeur Hospital Research Ethics Committee

Lentegeur Hospital
Highlands Drive
Mitchells Plain
7785

To whom it may concern

Re: Research Project – Undergraduate nursing student's experiences with preceptors during their clinical placement at a psychiatric hospital in the Western Cape.

Principal Investigators – Bhekithemba Vellem

This serves to confirm that the above research project has been granted ethical approval by the hospital Research Ethics Committee 15/05/2015. You remain accountable to receive approval from the Provincial Research Committee prior to commencing any research at our Facility.

You would be required to submit progress and the final report to the hospital for our records of research conducted at the facility.

Yours Faithfully

A handwritten signature in black ink, appearing to be "P. Smith", written over a horizontal line.

Dr P. Smith
Chair – Research Ethics Committee
Lentegeur Hospital

Physical Address: Highlands Drive, Mitchells Plain, 7785

Tel: +27 21 370 1111

Postal Address: Private Bag X4, Mitchells Plain, 7785

Fax: +27 21 371 7359

Appendix E: Letter of approval from Western Cape Provincial Department of Health



**Western Cape
Government**

Health

STRATEGY & HEALTH SUPPORT

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REFERENCE: **WC_2015RP44_840**
ENQUIRIES: Ms Charlene Roderick

Robert Sobukwe Rd
Bellville
7535
Cape Town

For attention: **Bhekithemba Vellem**

Re: UNDERGRADUATES NURSING STUDENTS'S EXPERIENCES WITH PRECEPTORS DURING THEIR CLINICAL PLACEMENT AT A PSYCHIATRIC HOSPITAL IN THE WESTERN CAPE.

Thank you for submitting your proposal to undertake the above-mentioned study. We are pleased to inform you that the department has granted you approval for your research.

Please contact the following people to assist you with any further enquiries in accessing the following sites:

Lentegeur Hospital

N Jacobs

Contact No: 021 370 1111

Kindly ensure that the following are adhered to:

1. Arrangements can be made with managers, providing that normal activities at requested facilities are not interrupted.
2. Researchers, in accessing provincial health facilities, are expressing consent to provide the department with an electronic copy of the final feedback (annexure 9) within six months of completion of research. This can be submitted to the provincial Research Co-ordinator (Health.Research@westerncape.gov.za).
3. The reference number above should be quoted in all future correspondence.

Yours sincerely

DR A HAWKRIDGE

DIRECTOR: HEALTH IMPACT ASSESSMENT

DATE: 1/07/2015

CC

Appendix F: University of the Western Cape Research Ethics Committee approval



UNIVERSITY of the
WESTERN CAPE

OFFICE OF THE DEAN DEPARTMENT OF RESEARCH DEVELOPMENT

09 March 2015

To Whom It May Concern

I hereby certify that the Senate Research Committee of the University of the Western Cape approved the methodology and ethics of the following research project by:
Mr B Vellem (School of Nursing)

Research Project: Undergraduate nursing students' experiences with preceptors during their placement at psychiatric hospitals in the Western Cape.

Registration no: 14/9/36

Any amendments, extension or other modifications to the protocol must be submitted to the Ethics Committee for approval.

The Committee must be informed of any serious adverse event and/or termination of the study.

*Ms Patricia Josias
Research Ethics Committee Officer
University of the Western Cape*

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E: pjosias@uwc.ac.za
www.uwc.ac.za

A place of quality,
a place to grow, from hope
to action through knowledge

Appendix G: Interview guide (unstructured)

How was it for you to work with a preceptor at a psychiatric hospital?

or

How did you experience working with a preceptor at a psychiatric hospital?

Followed by probing.

