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Effective Clinical Teaching Behaviors as Perceived by Associate and Baccalaureate Degree Nursing Students

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**EFFECTIVE CLINICAL TEACHING BEHAVIORS
AS PERCEIVED BY ASSOCIATE AND BACCALAUREATE
DEGREE NURSING STUDENTS**

**By
Karyn L. Abrahamson**

A THESIS

**Submitted to
Grand Valley State University
in partial fulfillment of the
requirements for the degree of**

MASTER OF SCIENCE IN NURSING

Kirkhof School of Nursing

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ABSTRACT

EFFECTIVE CLINICAL TEACHING BEHAVIORS AS PERCEIVED BY ASSOCIATE AND BACCALAUREATE DEGREE NURSING STUDENTS

By

Karyn L. Abrahamson

The purpose of this study was to identify the most effective clinical teaching behaviors (ECTB) perceived by Associate Degree Nursing (ADN) and Baccalaureate Degree Nursing (BSN) students. An exploratory, descriptive design was implemented. ADN and BSN students (N=55) were surveyed using the Clinical Teaching Evaluation (CTE) instrument designed by Fong (1991). The CTE consists of 25 teaching behaviors that are ranked on a five point Likert-type scale according to importance. The collected data were analyzed using descriptive statistics. Significant differences in perceptions of ECTB between the two groups were identified by a Mann Whitney U procedure.

The study findings indicate ADN and BSN students hold similar perceptions of ECTB, but perceive the ordered rank of importance differently. ADN students ranked highest the clinical teaching behavior “demonstrates skills, attitudes, and values that are to be developed by the student” BSN students ranked this behavior fifth most important. BSN students ranked the instructor behavior “shows genuine interest in patients and their care” highest, the ADN students ranked this behavior second highest.

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CHAPTER I

INTRODUCTION

Nursing education has a major goal to produce competent, motivated, caring professional nurses. Nursing educators are the key facilitators in the transformation of nursing students to the professional nursing role. One critical aspect of nursing education is clinical teaching. Clinical teaching encompasses the responsibilities of a classroom instructor blended with the clinical nursing role. Effective clinical teaching is defined by O'Shea & Parsons (1979) "as those actions, activities and verbalizations of the clinical instructor which facilitate student learning in the clinical setting" (p. 411).

Positive student perceptions of effective clinical teaching behaviors is the most important influence in learning. "Usually students are in the best position to judge the effectiveness of their clinical instructors" (Fong and McCauley, 1993, p. 327). How nursing students perceive their instructors behavior may enhance or deter the learning process of the students. "Effective learning in a clinical setting is influenced, to a great extent, by competent clinical faculty" (Wong & Wong, 1987, p. 512).

"The purposes of nursing education are to prepare people to become professional practitioners and to 'assist them to acquire knowledge in the practice of nursing" (King, 1986, p. 63). Unfortunately clinical instructors are not always experienced or effective in their teaching roles. King also stated "students must be able to be 'active participants in the [educational] experiences and learn how to think, make decisions, and act consistently and reasonably as members of a profession and of a democratic society" (p. 72).

Over the past four decades numerous studies have focused heavily on the subject of comparing effective and ineffective clinical teaching behaviors (Jacobson, 1966; Kiker 1973; O'Shea & Parsons, 1979; Brown, 1981; Knox & Mogan 1985; Mogan & Knox, 1987; Wong & Wong, 1987; Bergman & Gaitskill, 1990; Nehring, 1990; Fong & McCauley, 1993; Sieh & Bell, 1994). The majority of these studies focused on both the faculty and student perceptions of effective and ineffective teaching behaviors.

Purpose

The purposes of this study are: (1) to identify the most effective clinical teaching behaviors perceived by Associate Degree Nursing (ADN) and Baccalaureate of Science in Nursing (BSN) Degree students, (2) to identify similarities in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors, (3) to identify differences in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors, (4) to further the existing research involving effective clinical teaching behaviors, and, (5) to meet the requirements of Grand Valley State University to earn a Master's of Science and Nursing Degree.

Problem statement

Are their similarities or differences in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors?

Justification for the Study

Previous literature indicates effective clinical teaching behaviors are crucial to the production of competent, secure, proficient nursing students. The addition of the ADN student sample in comparison with the BSN student sample in this study, will add to the existing research related to effective clinical teaching behaviors as perceived by nursing students.

Nursing students' perception of effective and ineffective clinical teaching behaviors are key indicators of positive learned behavior outcomes. "Teaching evaluations provide an instructor and the organization with feedback on performance. Evaluations help instructors to delineate effective vs ineffective teaching techniques" (Fong and McCauley, p. 325). If effective clinical teaching behaviors are identified by students and implemented by instructors, nursing educators and nursing education will benefit.

CHAPTER II

CONCEPTUAL FRAMEWORK AND LITERATURE REVIEW

Conceptual Framework

This study is based on Imogene King's General Systems Framework (1981 retitled 1992). The General Systems Framework incorporates an open system model as well as an interactive systems framework. The General Systems Framework represents the concept of person as an individual entity who interacts with in three dynamic open systems. The three open and interacting systems consist of the personal systems, interpersonal systems, and social systems (see figure 1). The personal system involves an individual, the interpersonal system involves two or more individuals interacting together, and the social system represents a formulation of groups of individuals to carry on social activities and goals. Specific concepts are included with each system and aid in further describing each system dimension in the General Systems Framework. The three interacting systems and the concepts of perception and learning will be identified and elaborated on as the conceptual basis of this study (see figure 2).

King's conceptual framework (1981), identifies a major concept of the personal system as individual perception. "Perception is a major concept because it influences behavior" (p. 47). Individual perception of nursing students is the basis of this particular study. King (1981), defined perception as "a process of organizing, interpreting and transforming information from sense data and memory. It is a process of human transactions with the environment. It gives meaning to one's experience, represents one's image of reality, and influences one's behavior" p. 24.

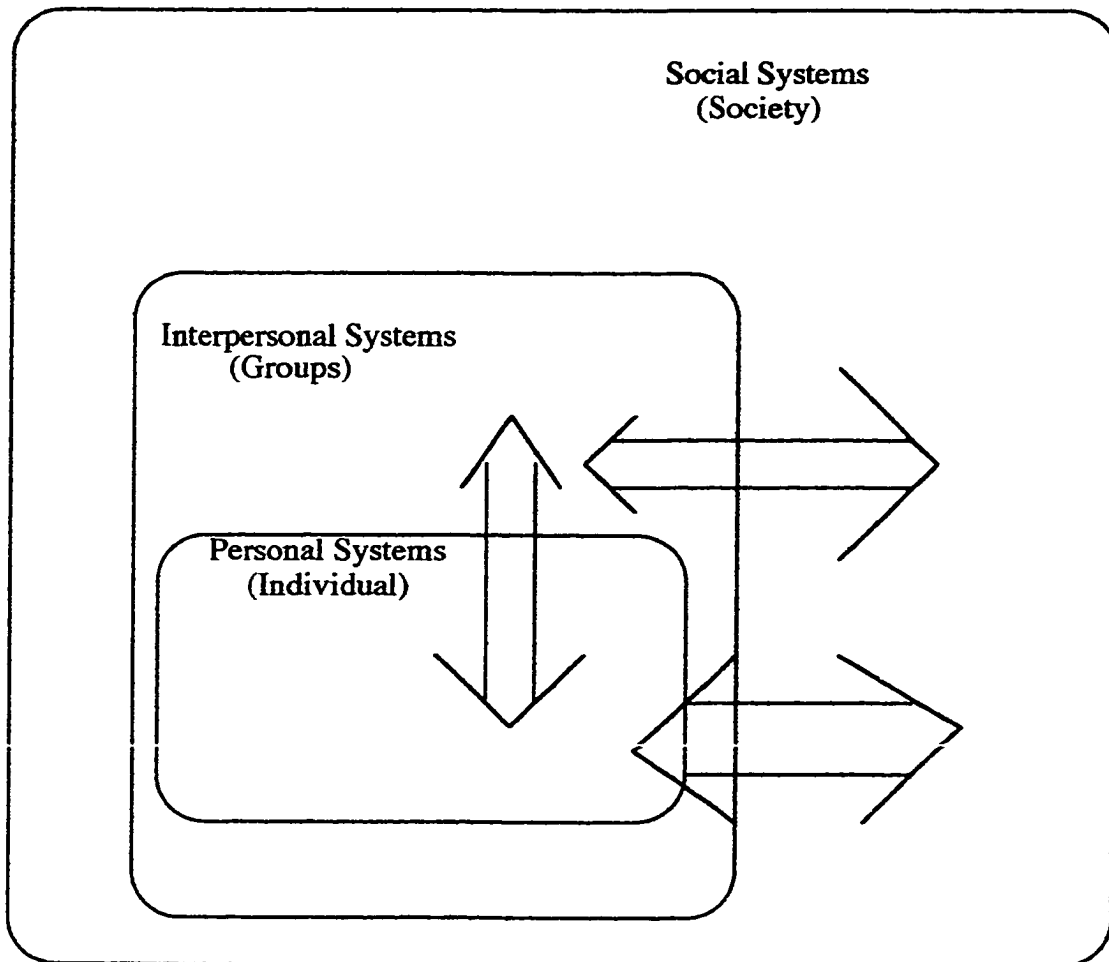


Figure 1. A conceptual framework for nursing: dynamic interacting systems. (Adapted from I.M. King, Toward a Theory For Nursing, New York, John Wiley & Sons, 1971, p. 20)

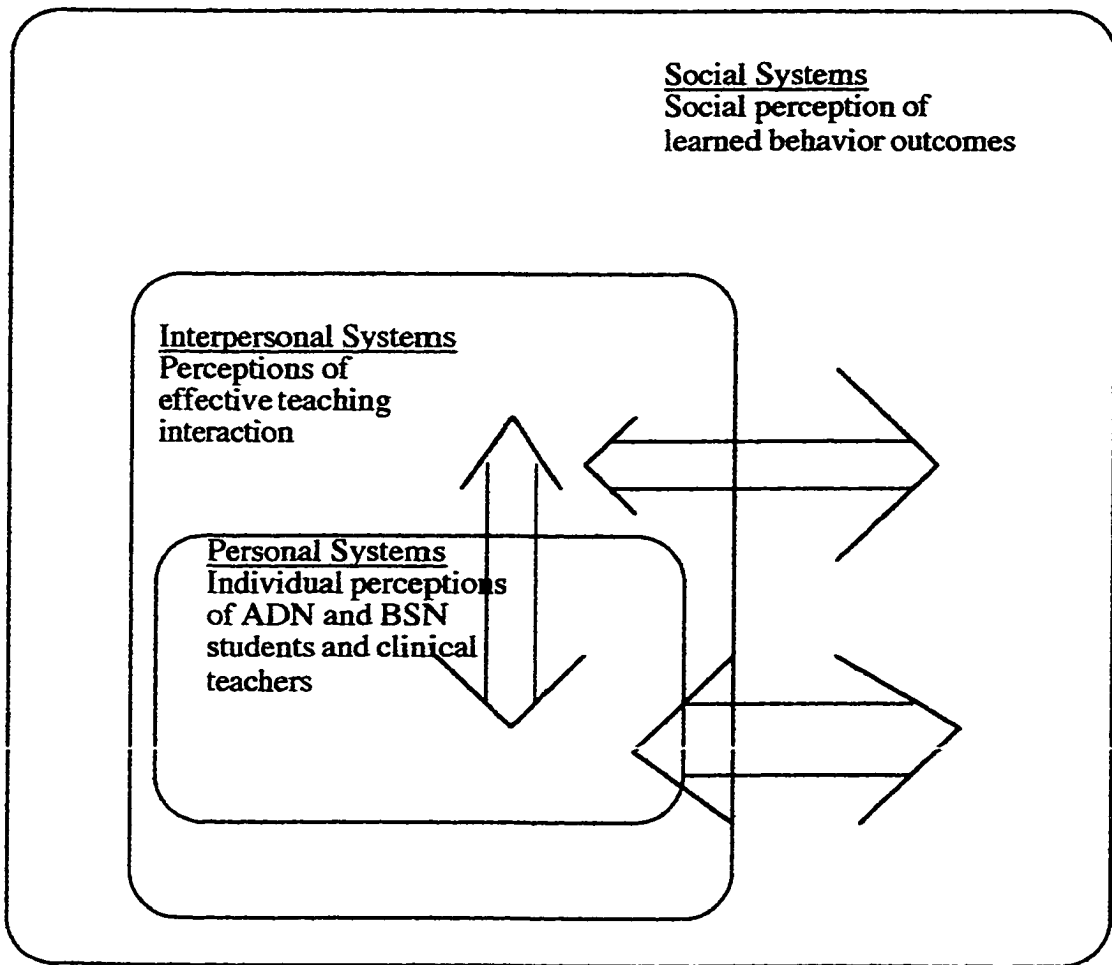


Figure 2.
 Relationship among study variables and concepts included in King's conceptual framework.

Learning is another key sub concept involved in the personal system identified by King (1986). Learning is a positive result from the identification and utilization of effective clinical teaching behaviors.

The personal perceptions of nursing students involve their self image, experiences as individuals, students, and other personal roles they possess. Clinical instructors personal system include experiences as a person, nursing student, nurse, and nursing instructor.

The student's perception of effective clinical teaching interaction can be classified within the interpersonal system. Factors effecting the interaction in this system can be related to the amount of stress and coping, positive or negative communication and or transactions and role modeling of either the clinical instructor or nursing students. Interaction is an important concept of the interpersonal system. King, (1981) defines interaction as "the acts of two or more persons in mutual presence. Interactions can reveal how one person thinks and feels about another person, how each perceives the other and what the other does to him, what his expectations are of the other, and how each reacts to the actions of the other" (p. 85).

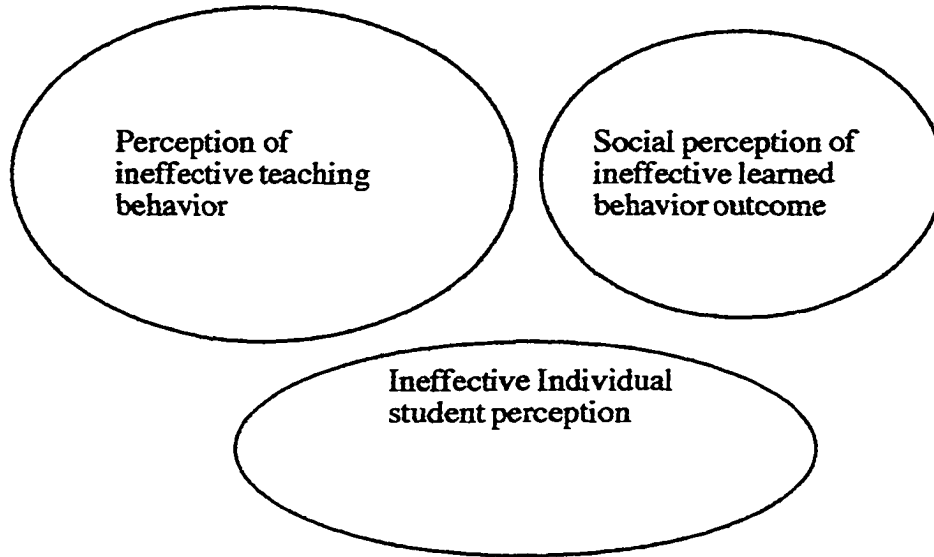
The social system dominates the social perceptions and could include: families, education systems such as nursing student bodies, nursing faculty, clinical staff or any other large authoritative organization with decision making power, status and control (King, 1981). The social system is defined by King as "an organized boundary system of social roles, behaviors, and practices developed to maintain values and mechanisms to regulate the practices and rules" (p. 115). Members of the social system are the major evaluators of the student nurse performance within the social system.

The three interacting systems previously identified in the General Systems Framework (see figure 1), with the concepts of effective clinical teaching behaviors and positive student and social perceptions (see figure 2) will create a positive open interactive learning dimension. It is also proposed that the three interacting systems in the General Systems Framework can become disengaged and individualized with ineffective clinical teaching behaviors perceived by students which lead to ineffective learned behavior outcomes perceived by the social system (see figure 3).

The major premise of incorporating this framework is based on the key concepts of positive perception and effective clinical teaching behaviors which precipitate effective learned behavior outcomes of nursing students. The personal student perception of clinical teaching behaviors can be positive or negative, and cause effective or ineffective learned behavior outcomes. The students learned behavior outcome is determined to be either effective or ineffective by interpersonal and social perceptions.

In summary the concepts involved in King's General Systems Framework formulates an effective conceptualization of the variables involved with in this study. King's concepts of the personal system: perception and learning are essential in validating the importance of effective clinical teaching behaviors. A positive personal perception and individual attainment of effective clinical learning is directly related to effective clinical teaching behaviors. Retainment of positive clinical interactions are the direct result of effective clinical learning. Individual maintenance and utilization of effective clinical learning creates a positive social perception and enhances nursing practice (see figure 4). The production of effective practicing nurses is the optimal outcome of nursing education and the key to maintaining quality nursing practice.

Negative Relationship



Positive Relationship

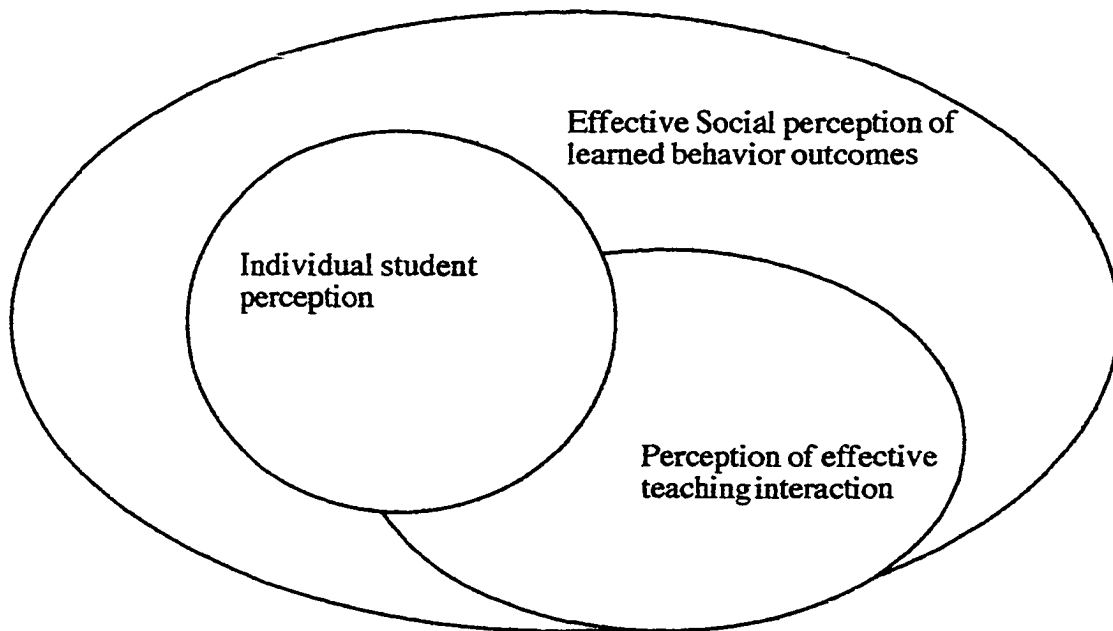


Figure 3. Positive and Negative relationship between perceptions.

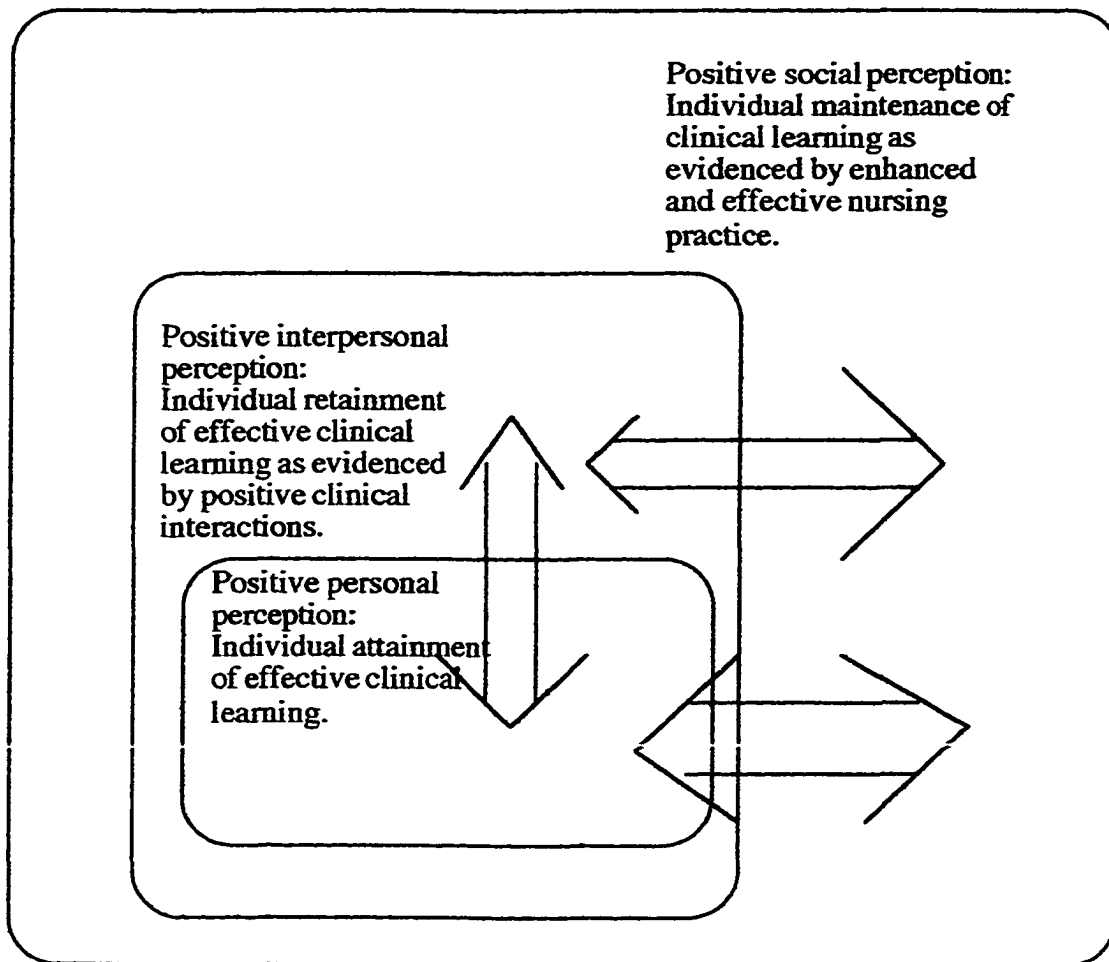


Figure 4.
Identification and
utilization of
positive
perceptions of
result in effective
clinical learning,
effective clinical
nurses and
enhanced nursing
practice.

Review of Literature

Numerous studies have focused on varying aspects of clinical teaching in nursing education. All of the literature reviewed involves the evaluation of clinical teaching characteristics or behaviors, that are perceived as effective in learning by professional nurses, nursing students and faculty. Study populations found in the literature include education students, nursing students of ADN and BSN and graduate programs, nursing faculty as well as graduate and practicing nurses. This literature review will compare and contrast previous research involving the identified variables of interest defined in this study.

Jacobson (1966) conducted one of the early studies, in an attempt to identify effective nursing instructor behaviors as described by nursing students. Jacobson interviewed a sample of 961 undergraduate nursing students from five separate public and private schools in the southern region of the United States. The students involved ranged from freshman to senior level.

Jacobson used a modified Critical incidence technique in group interviews, subjects were asked to provide a description of as many recent effective and ineffective educational incidents as possible in a 80 minute period of time. "The data were analyzed for frequency and percentage and were tested for significance of relationship by use of the chi-square and the Kendall Tau C" p. 220. Content analysis and categorization of the incidents was completed by three judges. Of the 1,182 incidents reported, there were 687 effective educational incidents and 495 ineffective identified. Next, the 1,182 educational incidents were grouped into 58 critical requirements. Finally, the educational incidents were categorized into six major behavioral categories of

effective clinical teaching behaviors. The six categories are: availability to students, professional competence, interpersonal relations, teaching practices, personal characteristics, and evaluation practices.

The findings from this study revealed, there was no increase in the proportion of negative educational incidents as the faculty to student ratio increased for clinical experiences. In addition, the effectiveness classification did not increase based on the educational preparation of the faculty. The most relevant finding of this study involves the identification and development of the six major effective clinical teaching behaviors. A majority of the identified behavior categories are predominate throughout the literature reviewed.

Kiker (1973) conducted a exploratory study using a written questionnaire including twelve characteristics, "...each of which had been mentioned as desirable in two or more studies of previously cited evaluations of instructors by students" p. 722. A non-random sample of thirty undergraduate junior level education students and thirty-seven junior level nursing students and thirty-six graduate nurses enrolled in education courses, from two Texas Universities were used.

Effective teaching characteristics were grouped into three categories using twelve identified behaviors. The categories included "professional competence, relationships with students, and personal attributes" (p. 722). Percentage tabulation of the three student samples were conducted for each identified behavior. The study concluded that graduate students rank creativity or personal attributes of their instructors highest (39%) and the undergraduate education students (26.4%) and nursing students (51.3%) maintain professional competence of the instructor highest. The significance of these findings are both undergraduate students ranked professional

competence and organizational skills highest and personal attributes lowest. The graduate students ranked creativity and stimulation characteristics of the instructor most important (39%). All three sample groups (60%) held similar importance of the characteristic of fair evaluation of the student by the instructor.

These findings could indicate undergraduate students are not as confident or secure in their nursing roles as graduate nursing students and prefer organized and structured instructor behaviors. Graduate nursing students have experience and confidence in their clinical roles and seek stimulation and creativity from their instructors.

O'Shea and Parsons (1979) conducted a study of 205 BSN students and 24 faculty to compare effective and ineffective teaching behaviors. A simple two question format was implemented with instructions to write 3-5 identified teaching behaviors that facilitated and or interfered with learning. Data analysis was completed with tallied key words and phrases that were normalized and expressed in percentages for each group and then sorted into three broad categories. The three categories identified included: evaluation, instructor assistance and personnel characteristics.

A strong relationship between instructor feedback and learning was identified on the returned questionnaires, 37% Juniors, 79% Seniors, 59% of faculty agreed. Faculty rated the behavior of role modeling five times higher than the students. This study also identified specific differences in perception of ranked importance in relation to academic standing. Senior nursing students held a higher priority for effective evaluation behaviors over junior level students. This finding could suggest senior level students prefer instructor behaviors that influence student responsibility and independence. Specific effective behaviors identified by faculty and students involved

instructor interactions that provide positive and honest feedback, faculty who are willing to assist the student and faculty availability. The category of professional competence was not identified by the sample within this study and ranked highest by a proportion of undergraduate students in Kiker (1973). Specific limitations within this study included the deficit of no statistical significance and no demographic information of the sample and a single private institution was used.

Brown (1981) conducted a descriptive study in North Carolina using a sample of eighty two senior nursing students and forty two faculty members to determine if similar perceptions of effective clinical teaching characteristics existed between the two groups. Brown developed The Clinical Teacher Characteristics Instrument (CTCI), which combined “a composite of items found in the literature and included twenty characteristics of teachers” (p. 6). Brown classified the twenty characteristics into three major categories, similar to Kiker (1973) involving professional competence, relationship with students and personal attributes.

Brown’s findings using statistical measures of simple frequency, percentages and a chi square analysis resulted in a difference in ranking of importance of teaching characteristics between the two study groups. The students ranked characteristics involving interpersonal relationships highest, professional competence next and personal attributes lowest. The faculty ranked professional competence highest, relationship with students next and personal attributes last. The findings indicate similarities between the students ranking in Kiker (1973) and the faculty ranking in this study.

Brown’s investigation indicated a statistical significant difference with four of the twenty characteristics between the two samples ($p < .05$ or $p < .005$). These characteristics included: “... relates underlying theory to nursing

practice: supervises and helps in new experiences without taking over; is self-controlled cooperative, and patient; and permits freedom of discussion and venting of feelings” p. 11. Brown’s findings indicate students and faculty do indeed perceive the most effective clinical teaching behaviors differently.

Knox and Mogan (1985) conducted an exploratory study in West Canada involving the provider (49 clinical teachers), consumer (393 student nurses) and the product (45 graduate nurses) to identify important clinical teacher behaviors. A 48 item clinical teaching characteristic survey tool was developed with five main categories of clinical teaching behaviors identified. The identified behavior groups were similar to the findings of Jacobson 1966, O’Shea & Parsons 1979, and Brown, 1981. “Reliability coefficients of the instrument ranged from $\alpha=0.79$ to 0.89 ” (p. 27). “Analysis of variance of the responses of the six groups showed a significant difference for all five categories of teacher behaviors” (p. 29). Mean ratings for the category of teaching, second year students rated highest (6-46), third year lowest (6-12). The mean ratings for the category nursing competence, graduate practicing nurses rated highest (6-46) and was rated lowest by second year students. The evaluation category rated lowest by faculty (6-42) and highest by third year students (6-72). Interpersonal relationship category was rated lowest by faculty (6-17) and highest by third year students (6-67). Personality items rated highest by first year students (6-38) and lowest by second year students (5-9). Interpersonal relationship and personality categories showed the greatest difference between ratings (Knox & Mogan, 1985). All sample groups studied rated evaluation most important “(93%)” and personality characteristics as least important “(87-6%)” which reflect some of the findings by Brown (1981).

Mogan and Knox (1987) continued to refine their clinical teaching characteristic tool by identifying and comparing the “best” and “worst” characteristics of clinical teachers using the Nursing Clinical Teacher Effectiveness Inventory (NCTEI). A study of 173 students (52 fourth year, 62 third year and 59 second year students) and 28 faculty determined similar findings. Both groups ranked being a good role model highest on the best teaching characteristics. The worst teaching characteristics had differing results between faculty and students in all categories. The characteristics included: “teaching ability, nursing competence, interpersonal relationships, evaluation and personality” (p. 335)

Nehring (1990) replicated the 1987 study of Mogan and Knox, using the NCTEI in eleven nursing schools located in Ohio. Sixty three BSN faculty and one hundred and one BSN students completed the NCTEI mailing survey. A two sample t-test was completed with an overall alpha =0.05. Concluding students and faculty have differing perceptions of the best and worst characteristics of clinical teachers. “Both groups agreed that being a good role model, encouraging mutual respect and providing support and encouragement were the three most critical characteristics differentiating the ‘best’ and ‘worst’ clinical teacher”. (p. 939). These findings are consistent with O’Shea & Parsons (1979).

Bergman and Gaitskill (1990) replicated and expanded Brown’s (1981) study with differing results. Sample consisted of 23 faculty, 77 junior and 46 senior nursing students. This replication implemented the CTCTI developed by Brown, data analysis and statistical measures included: simple frequency, percentage, and chi-square test for significant differences. Brown found, “faculty members ranked professional competence above relationships with students, which agrees with the findings of Knox and Mogan (1985) and Mogan

& Knox (1987)” (p. 38). Bergman and Gaitskill found the students and faculty ranked as the most important characteristic “1) relationship with students; 2) professional competence; 3) personal attributes. This result differs from Brown’s findings” (p. 38).

Sieh and Bell (1994) completed a descriptive study of 199 ADN students and 22 faculty using the Nursing Clinical Teacher Effectiveness Inventory which was developed by Knox and Mogan (1985). This study was the first to include the ADN students perceptions, and was conducted at two south west community college settings. Results indicated by mean rank of the ADN students the highest rated characteristics of effective clinical teaching is “corrects students’ mistakes without belittling them (mean= 4.85)” (p. 392). Other identified similarities between Mogan and Knox (1987) exist in six of the top ten rated ADN characteristics: “takes responsibility for own actions, demonstrates clinical skill and judgment, is approachable, is well prepared for teaching, and is a good role model” (p. 392). These findings are consistent with previous studies at the BSN level with the exception of a lower rating at the ADN level for the importance of role modeling. The ADN students decreased ranking of the role modeling characteristic, may be reflective of the novice students’ priority to master the technical and clinical skills with preferred non threatening, supportive instructor characteristics.

The faculty results of this study indicated the highest ranked teaching characteristics include: “encourages a climate of mutual respect (mean= 4.77), makes specific suggestions for improvement and provides constructive feedback on students performance (mean=4.77)” (p. 392). No significant differences were found in the perceptions of the ADN students or the faculty in relation to the five characteristic categories of the NCTEI as evidenced by computed T tests.

Sieh and Bell (1994) also compared the ADN student and faculty perception of effective clinical teaching characteristics in relation to similarities that may exist as the students' level of education increases, using an analysis of variance. Results of the analysis of variance indicated two of the five characteristics had a statistically significant difference "... teaching ability ($F=3.324$, $p=.021$) and nursing competence ($F=3.476$, $p=.017$)" (p. 392). Further analysis was conducted using a Student-Newman-Keuls procedure to determine which groups were different at the $p<.05$ level. "Results indicated students' perceptions did not become more similar to faculty's perception as the students' level of education increased. Level I/second semester students perceptions were most similar to faculty's in the subsets of teaching ability and nursing competence" (p. 392). Additional differences in the perceptions of effective clinical teaching behaviors were found between faculty and students in Brown (1981) proving her hypothesis incorrect, O'Shea and Parsons (1979) Knox and Mogan (1985) and Mogan and Knox (1987) and Nehring (1990).

Fong and McCauley (1993) conclude prior research studies identify effective clinical teaching behaviors that fall into five categories: "teaching ability, nursing competence, ability to evaluate, interpersonal relationship, and personality" p. 325. Similar to the characteristics identified by Mogan & Knox (1987). This study involved the development and testing of the Clinical Teaching Evaluation (CTE) Instrument containing twenty five items measured on a five point Likert-type scale ranging from "outstanding" to "poor" (p. 326).

The instrument proved favorable in measuring three major factors: "nursing expertise, consideration for students, and teaching competency" (p. 327). The CTE instrument was administered to 384 BSN students and 27

faculty members, to assess the instruments content and construct validity, internal consistency, reliability, and test retest reliability. Instrumentation reliability of the CTE established by Fong & McCauley (1993) internal consistency reliability “A Cronbach’s coefficient alpha of 0.965... A Pearson correlation coefficient of .85 indicated a high correlation between test and retests, with significance at the $p < .001$ level” (p. 327). All reliability and validity proved favorable in relation to the CTE instrument.

The CTE instrument involves 25 items in comparison to the NCTEI developed by Mogan and Knox involving 48 items. The CTE involves instructor behaviors and the NCTEI identifies teaching characteristics to be evaluated. Both the CTE and the NCTEI involve a five point Likert type scale and ranked data. The CTE involves limitations in relation to the behavior of effective role modeling, found predominately in prior literature, is not officially categorized or defined among the 25 behaviors listed. The CTE instrument incorporates three behavior categories which involve a blending of the previous five categories of identified effective teaching characteristics.

The unpublished thesis by Anjanette Toth (1995) included the perceptions of 55 practicing nurses only. This study implemented the CTE instrument developed by Fong & McCauley (1993) finding similar results as Knox & Mogan (1985) with the evaluation behaviors ranking of most importance in effective clinical teaching behaviors. Simple frequencies and percentages were implemented to analyze the collected data. Results indicated more than 30 participants indicated the highest importance for the behaviors : “ (a) demonstrates skills, attitudes, and values that are to be developed, (b) gives constructive evaluation without embarrassing student, (c) shows genuine interest in patients and their care, and (d) is objective and fair in the evaluation of the student” (p. 27). Limitations found in this study included no

statistical reliability or validity of collected data and a single, small sample.

Summary and Implications for Study

The previously discussed studies Brown (1981), Mogan and Knox (1985), Bergman and Gaitskill (1990), O'Shea and Parsons (1987), examined both nursing faculty and BSN student perceptions of effective clinical teaching behaviors all with varying results. Kiker (1973) studied graduate nursing, BSN and other college students in classroom and clinical settings.

Knox and Mogan (1987) and Toth (1995 unpublished study) included graduate and or practicing nurses perceptions of effective teaching characteristics. Only the study conducted by Sieh and Bell (1994) included the ADN student perspective.

Consistent similarities in review of the literature involve, Knox and Mogan (1985), Kiker (1973) and Brown (1981) finding the teaching behaviors of professional competence before relationships with students and least important personal attributes. Bergman and Gaitskill (1990) found conflicting results with faculty and BSN students ranking the teaching behavior involving relationship with students most important, followed by the behavior of professional competence and least important the behaviors involving personal attributes.

The level of nursing experience or student academic level is also consistent in similar findings of rated effective clinical teaching behavior categories. The majority of first and second year nursing students rank effective teaching behaviors highest in relation to personal attributes. This category is consistently ranked lowest among practicing nurses, faculty and third and fourth year students. This phenomenon could be explained using the conceptual framework of King with the lower level students preoccupied by their personal perceptions and not secure enough to perceive the benefits of

interpersonal relationships. It is unfortunate that faculty is not consistent in rating behaviors involving relationship with students as most important. In reflection of the interpersonal system concept of Kings conceptual framework a positive student instructor relationships is essential in producing an effective learned outcome. The practicing nurses and faculty usually rate professional competence and evaluation behaviors highest. The social system concept involved in Kings framework represents an evaluation system. The perceptions of the practicing nurses and faculty could be the result of their achieved status in the social system. Practicing nurses and faculty are secure in their professional roles and have successfully integrating the personal, interpersonal and social system concepts previously explained and based on King (1981).

The professional characteristic of being a good role model is consistently mentioned within the literature. The sole characteristic of being a good role model is repeatedly evident in a majority of studies, Mogan and Knox (1987), Nehring (1990) and Sieh and Bell (1994). The predominance of this characteristic could be explained, if being a good role model encompasses positive and effective integration of all behavior categories.

In the majority of reviewed literature, site limitations included small sample selections from single institutions and the use of BSN students only. Geographical differences were not explored. Demographic issues included: diverse Instructor experience and academic preparation. Assorted instrumentation development and use was noted with limited validity. Data collection was not proven to be consistent over time intervals with no quantitative research or test retest reliability noted. Limited psychometric data analysis was provided on instruments that were developed and used in the reviewed studies.

Therefore, using the Clinical Teaching Evaluation Instrument, this study will survey the perceptions of both ADN and BSN students regarding effective clinical teaching behaviors. This study will expand on previous descriptive studies, but use a combination of ADN and BSN subject sampling. Fong & McCauley (1993) found “the focus of nursing researchers has been on designing studies to identify the behaviors that students felt were important for clinical instructors to possess” (p. 325).

Research Question

What are the most effective clinical teaching behaviors perceived by ADN students?

What are the most effective clinical teaching behaviors perceived by BSN students?

What are the similarities in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors?

What are the differences in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors?

Definition of Terms

Perceptions “King (1981) maintained perception is a comprehensive concept in personal systems...”. She defined perception as “a process of organizing, interpreting, and transforming information from sense data and memory. It is a process of human transactions with the environment. It gives meaning to one’s experiences, represents one’s image of reality, and influences one’s behavior” (p. 24).

Perceptions of ADN students- are based on experiences as an individual person and an Associate degree nursing student.

Perceptions of BSN students- are based on experiences as an individual person and a Baccalaureate of Science in nursing student.

Perceptions of clinical teachers- are based on experiences as an individual person and a nursing student and clinical instructor.

Interpersonal relationship- “a state or reciprocal interest or communication between two or more people excluding specific therapeutic communications between nurse and patient” (Knox & Mogan, 1985, p. 26).

Clinical teaching- “instruction which occurs in settings and situations in which the student is giving direct care to real clients as part of a planned learning activity” (O’Shea and Parsons, 1979, p. 411).

Effective clinical teaching behaviors- “those actions, activities, and verbalizations of the clinical instructor which facilitate student learning in the clinical setting” (O’Shea & Parsons, 1979, p. 411)

Learning- “an enormously intricate and complex process, reflects a change or modification in behavior which persists over time as the result of interaction with the environment” (Griffith & Bakanauskas, 1983, p. 105).

CHAPTER III METHODOLOGY

Design

The personal perception of individuals, who observe the same behavior are subjective in nature. Therefore, the research method employed for this study was an exploratory descriptive design. More specifically, this study compared the effective clinical teaching behaviors as perceived by BSN and ADN students.

Sample

A non random convenience sample of eighteen ADN and thirty seven generic BSN students were selected. The sample subjects were all senior level students completing the last semester of their respective ADN or BSN programs. The inclusion of subjects from two different nursing degree levels adds to the existing research.

All subjects admitted into this study met the following criteria:

1. Were enrolled into an accredited BSN or ADN program.
2. Were currently in their last clinical nursing course of their respective programs.

Setting

Data collection was completed on two separate dates, within a fifteen minute period of class at Grand Valley State University and at West Shore Community College. Permission was obtained from the faculty teaching in the last semester of each respective program to accesses a prescheduled fifteen minute period of class to administer the CTE instrument.

Instrument

The instrument used in this study, was adapted from the Clinical Teaching Evaluation instrument. The CTE was developed by Dr. Carolyn Fong at San Francisco State University in San Francisco, CA. Written permission to use the instrument was obtained (see Appendix C). This instrument was selected for use in relation to the content it encompassed. The CTE consists of the most prevalent behavior categories (nursing competence, teaching competence and consideration of students) found repeatedly in prior studies involving effective clinical teaching behaviors.

The CTE instrument consists of 25 clinical teaching behaviors in section I in which the subjects rated the importance of each behavior using a 5-point Likert-type scale ranging from 5-very important to 1-of no importance. Additional ranking of important teaching behaviors found in section I were then listed in order of importance in section II. Section II requests the students to rank the top five most important teaching behaviors listed on the instrument in order of importance. A brief demographic survey of the sample was included to determine student status (ADN or BSN) and sex. The CTE has three specific categories of behaviors that accumulate the (25) individual behaviors in section I which include: teaching competence (7), nursing competence (9), consideration of students (9).

Validity and reliability have previously been established by review of fourteen expert faculty and sufficient statistical outcomes. Instrumentation reliability of the CTE was previously established by Fong & McCauley (1993) internal consistency reliability "A Cronbach's coefficient alpha of 0.965... A Pearson correlation coefficient of .85 indicated a high correlation between test and retests, with significance at the $p < .001$ level" (p. 327).

The CTE instrument internal consistency alpha coefficient of the overall convenience sample of 55, ADN and BSN students in this study was sufficient with a Cronbach's coefficient alpha of .930. The reliability coefficient of the two individual student samples, were determined to be ADN alpha of .959 and BSN alpha of .879. The reliability coefficients of 0.70 or greater are determined to be sufficient in making grouped comparisons (Polit & Hungler, 1991). The level of measurement of variables is determined to be ordinal for the data analysis involving the CTE instrument.

Procedure

Five preliminary steps were involved in the development of this study. These included:

1. Step 1 - Adaptation of the CTE instrument.
2. Step 2 - Approval of Nursing Deans at each institution to administer the instrument.
3. Step 3 - Approval by Human Research Review Committee
4. Step 4 - Approval by faculty committees at each respective institution to administer the instrument.
5. Step 5 - Approval of Nursing Faculty to administer the instrument during class, from each respective institution.

Step 1, adaptation of the CTE instrument included changing the five letters on the Likert type scale to numbers 1-5 for ease in the statistical analysis. Further adaptation included omitting the final section of the CTE involving an additional comment section of behaviors not included in section I. A demographic survey of the sample was added to the CTE, which provided sample information concerning sex and clarification of student status (see Appendix E).

Step 2, Nursing Deans at both nursing institutions were supplied with copies of the instrument along with specific cover letters explaining the research protocols. In addition, each Dean received a request asking permission to conduct the study at their respective institution. Permission for the research was granted and validated with return of the original request letters from each Dean (see Appendix B).

Step 3, involved obtaining permission from the Human Research Review Committee at Grand Valley State University. The Human Research Review Committee received copies of the CTE instrument along with specific documentation explaining the research purpose and protocol. In addition, the following information regarding protection of human subjects was included:

1. All CTE instruments were coded with a two digit number to differentiate ADN from BSN and male from female students.
2. All subjects were ensured that all data would be reported in terms of group analysis. No data would be individually reported.
3. All students participating were ensured that information would be kept confidential and that their responses would in no way effect their grades or their relationship with the nursing faculty or institution.
4. Participation in this research study was voluntary. A GVSU Human Resource Committee Representatives name and contact number was included for further questions or concerns of participants.
5. Subjects were informed that anyone refusing to participate in the study would be excused from the class. Further, students who refused were also assured that refusal to participate would in no way effect their grade or their relationship with the nursing faculty or institution. No students refused to participate.

6. Prospective subjects were told the researcher's name and school of graduate study and phone number.
7. The purpose of the research study was explained, and a question and answer period was provided.
8. A cover letter was distributed to all subjects explaining in detail the instrument and procedure of completion. The cover letter stated that informed consent was granted with completion of the instrument. In addition the above information related to anonymity, confidentiality and data reporting was included.
9. Data collection was conducted during 15 minutes of class. Data was solely collected by the nurse researcher. Completed surveys were individually placed into a box on a table, near the exit of each classroom. On the table where the surveys were placed upon completion, there was a thank you note for each participant and a snack in appreciation of their time.
10. There were no risks to the subjects involved in this study.

The Human Research Committee approval was granted with the recommendation to include within the information regarding protection of human subjects the researcher's phone number and the Committee representatives name and contact number (see Appendix A).

Steps 4: The researcher next followed the procedures at each institution that enabled access to the study population. The personnel committee at Grand Valley State University received a cover letter requesting permission to access senior level nursing students in class. The research purpose and protocol was also included with a copy of the CTE instrument and written instruction to forward research approval by the personnel department, to the chairperson of this thesis (see Appendix B).

Approval was obtained with verbal validation received from Thesis Chairman on April 23, 1999.

Step 5: Faculty members involved in teaching the course to the potential student subjects, received a copy of the CTE instrument along with a cover letter that explained the research purpose and protocol. In addition the letter contained a request to access the particular nursing students and confirm a set date and time to administer the CTE instrument. Faculty agreed to allow the nurse researcher to conduct the study in their class with a signed permission to access class form and returned it to the nurse researcher in a self addressed stamped envelope (see Appendix B).

Threats to external and internal validity:

Personal variables which could have impacted the proposed descriptive study include: noncompliance, fatigue, biased attitude related to specific instructors, stress, poor health, time (just prior to lunch or end of scheduled day).

Situational variables which could have impacted the proposed descriptive study: misunderstanding of stated survey instructions, time compliance, environmental negative aspects (temperature, noise level, interruptions, foul odor, congested area poor ventilation).

CHAPTER IV

DATA ANALYSIS AND RESULTS

The purpose of this study was to compare perceptions of effective clinical teaching behaviors held by both ADN and BSN students. The independent variable of clinical teaching behaviors were compared with the dependent variables of ADN and BSN student perceptions. The specific research questions studied involved identification of the most effective clinical teaching behaviors perceived by the two study samples and subsequently revealing similarities and differences in the student perceptions.

Subject Characteristics

A total of 55 participants were involved in this study, representing 18 (32.7%) ADN senior level students and 37 (67.3%) BSN senior level students. Of the 55 participants 49 (89.1%) were females and 6 (10.9%) were males. The data for this study was collected by the nurse researcher on two separate scheduled dates at each nursing institution. The CTE instrument was distributed to the BSN sample first at Grand Valley State University. The ADN sample participated in the study two weeks later at West Shore Community College.

All 55 (100%) of the participants completed the first section of the CTE instrument. This section of the CTE instrument involved rating 25 clinical teaching behaviors on a 5 point Likert-type scale from 5 (of most important) to 1 (of no importance). 54 (98.2%) of the sample participants completed the second section of the CTE instrument. The second section of the CTE instrument

involved additional ranking of the 25 behaviors. In this section, participants were asked to rank the top five most effective clinical teaching behaviors in descending order from 1 to 5, with 1 indicating the most effective clinical teaching behavior as perceived by the student.

Data Analysis

The data analysis for this study were conducted using the Statistical Package for the Social Sciences (SPSS). Data from the CTE instrument involved ranked item scores of the 25 clinical teaching behaviors obtained from the ADN and BSN student samples. The data were analyzed using descriptive statistics (see Appendix F). The initial rank ordering of the clinical teaching behaviors were based on the median item responses, the final rank order of perceived effectiveness was determined by using the statistical mean for each clinical teaching behavior. A Mann Whitney-U analysis was the statistical method used to identify significant differences in the mean item responses from the ADN and BSN student perceptions. An alpha level of 0.05 was set to determine significance for analysis of the statistical data. The statistical results will be presented in the following discussion as they relate to the four research questions formulated for this study.

Research Question I

What are the most effective clinical teaching behaviors as perceived by ADN students? In order of mean item rank the ADN student sample perceive the most effective clinical teaching behavior of “demonstrates skills, attitudes, and values that are to be developed by the student” (mean 4.39 S.D. =.78). In addition the ADN students ranked the clinical behavior of “shows genuine interest in patients and their care”, second with a mean item rank of 4.28, (S.D.=1.02). The third most effective clinical teaching behavior ranked by the ADN sample involved evaluation characteristics, “is objective and fair in the

evaluation of the student” (mean 4.17, S.D.=.99). The fourth ranked ADN student sample behavior was “demonstrates technical skills in nursing activities where required” (mean 4.17, S.D.= .79) and finally the fifth ranked behavior “credits students for progress and improvement” (mean 4.06, S.D.=1.11).

The ADN sample data was computed as previously stated. The statistical ranking of data resulted in the identification of the ten most effective behaviors perceived by the ADN sample. These ten highest ranked behaviors from the ADN sample are presented in Table 1 by mean item ranked score.

These findings indicate ADN students prefer instructor behaviors which demonstrate skills, values and attitudes that are to be developed by the student and instructors who demonstrate technical skills and maintain an interest in patients and their care. In addition, the ADN student requires instructors to exhibit behaviors which emphasize the students’ responsibilities and technical skills involved in clinical patient care. ADN students prefer instructor behaviors involving objective and fair evaluation and desire consistent credit for improvement and progress.

Research Question II

What are the most effective clinical teaching behaviors as perceived by BSN students? The most effective clinical teaching behavior as perceived by BSN students is “shows genuine interest in patients and their care” (mean 4.81, S.D.=.46). Second the BSN students rank a behavior involving evaluation characteristics, “is objective and fair in the evaluation of the student” (mean 4.68, S.D.=.58). Third the BSN sample ranks the behavior “credits students for progress and improvement” (mean 4.49, S.D.=.61). The fourth ranked most effective teaching behavior as perceived by the BSN student sample involved evaluation characteristics once again “gives constructive evaluation without embarrassing student” (mean 4.49, S.D.=.61). The fifth most important

behavior ranked by the BSN students is “demonstrates skills, attitudes, and values that are to be developed by the student” (mean 4.38, S.D.=.68). The results of the top ten behaviors ranked by mean item score of the BSN sample are presented in Table 2.

These findings reveal BSN students prioritize instructor behaviors involving an interest in patients and their care. BSN students perceive effective clinical teaching behaviors involving evaluation with an increased emphasis of importance, in relation to three evaluation behaviors present in the top five most effective behaviors ranked. BSN students also perceive instructors who demonstrate skills, values and attitudes that are to be developed by the student as important.

Table 1

10 Most Effective Clinical Teaching Behaviors Ranked by ADN Students

Behavior	ADN Mean Item Rank	Standard Deviation
1. Demonstrates Skills	4.39	0.78
2. Interest in Patient Care	4.28	1.02
3. Objective and Fair	4.17	0.99
4. Technical Skill	4.17	0.79
5. Credits Students	4.06	1.11
6. Professional Responsibilities	4.06	0.87
7. Constructive Evaluation	4.00	1.03
8. Helps Without Taking Over	3.94	1.00
9. Relates Theory	3.94	0.80
10. Clinical Assignments	3.89	0.90

Note.

n=18.

Table 2

10 Most Effective Clinical Teaching Behaviors Ranked by BSN Students

Behavior	BSN Mean Item Rank	Standard Deviation
1. Interest in Patient Care	4.81	.46
2. Objective and Fair	4.68	.58
3. Credits Students	4.49	.61
4. Constructive Evaluation	4.49	.61
5. Demonstrates Skills	4.38	.68
6. Confidence	4.35	.68
7. Respects Confidentiality	4.30	.70
8. Professional Responsibilities	4.24	.68
9. Practice before Evaluation	4.24	.64
10. Helps without taking over	4.24	.68

Note.

n=37.

Research Question III

What are the similarities in the perceptions of ADN and BSN students regarding effective clinical teaching behaviors? The ADN and BSN students have demonstrated similar perceptions of the most effective clinical teaching behaviors as illustrated in Tables 1 and 2. The BSN students identified the behavior “shows genuine interest in patients and their care”, as the most effective in comparison, the ADN students rank this behavior second highest. The BSN students perceive the behavior “is objective and fair in the evaluation of the student” second highest, where as the ADN students identify this behavior third most effective. The behavior “credits students for progress and improvement” was identified as third most effective by BSN students and fifth most effective by ADN students. The behavior “demonstrates skills, attitudes, and values that are to be developed by the student” again ranked highest by ADN students was also ranked fifth most effective by the BSN students. One other behavior ranked by the ADN and the BSN students in the top ten most effective behaviors was “makes students aware of professional responsibilities” this behavior was ranked sixth by ADN students and eighth by BSN students.

Similarities of perceived effective clinical teaching behaviors were identified, based on the percentage of item response by both samples to show similarity on the item rank. The specific behaviors with similar ranked perceptions of the most effective clinical teaching behaviors between the ADN and BSN samples are presented in Table 3. The behaviors that both student samples ranked similarly involved all but nine, of the twenty-five behaviors that resulted in a significant difference ($p < 0.05$). The behavior “demonstrates skills, attitudes, and values that are to be developed by the student” exhibited the highest similarity in ranking.

Table 3

Identified Behaviors with Similarities in Ranking

Behavior	Mean Item Rank		z	p
	ADN	BSN		
Demonstrates Skill	28.58	27.72	-0.21	.84
Admits Limitations	27.60	28.46	-0.32	.75
Relates Theory	29.03	27.50	-0.35	.73
Reviews	29.39	27.32	-0.49	.62
Clinical Assignments	26.50	28.73	-0.51	.61
Technical Skills	29.47	27.28	-0.52	.60
Additional Resources	26.22	28.86	-0.69	.54
Professional Responsibilities	25.89	29.03	-0.73	.46
Helps Without Taking Over	25.25	29.34	-0.97	.33
Credits Students	24.36	29.77	-1.30	.19
Sense of Humor	23.75	30.07	-1.42	.16
Shows Interest	23.89	30.00	-1.41	.16
Shows Recognition	23.94	29.97	-1.39	.16
Respects Confidentiality	23.61	30.14	-1.52	.13
Constructive Evaluation	22.89	30.49	-1.82	.07
Flexibility	22.67	30.59	-1.88	.06

Note.

N=55.

The behaviors “admits limitations of function in clinical situation” and “stresses or reviews important material from theory classes”, maintained similarities in behavior ranking, but were not identified in the most effective behaviors by either sample. Other behaviors that were present in the top ten most effective clinical teaching behaviors by the ADN and BSN students and showed no significant difference in ranking include: “relates underlying theory to clinical nursing situation”, “respects the confidentiality of student relationship”, “gives constructive evaluation without embarrassing student”, “credits students for progress and improvement”, “demonstrates technical skills in nursing activities where required”, “makes students aware of professional responsibilities”, “helps in new situations without taking over”.

These findings indicate ADN students prefer effective clinical teaching behaviors similar to BSN students but, differ in the perception of ranked importance. It is of interest of the 16 behaviors ranked similarly by both samples, only four behaviors are ranked higher by the ADN students. The behaviors ranked highest by ADN students include: “demonstrates skills, values and attitudes that are to be developed by the student, relates underlying theory to clinical nursing situation, stresses or reviews important material from theory class, demonstrates technical skills in nursing activities where required”. The ADN student behavior ranking exhibits a greater emphasis on instructor behaviors involving attainment of initial technical skills, values and attitudes consistent with learned theory and the availability of the process of review.

Research Question IV

What are the differences in the perceptions of ADN and BSN students in regard to effective clinical teaching behaviors? The results of the Mann Whitney U test identified nine of the 25 clinical teaching behaviors with a significant difference in ranking between BSN and ADN senior level students' perception. The nine behaviors that were significantly different in ranking ($p < 0.05$), are presented in Table 4.

The three behaviors with the most significant difference in ranking based on student perception included: "organizes clinical learning experiences in a meaningful manner for the student" ($p = 0.005$), "shows genuine interest in patients and their care" ($p = 0.008$), and "demonstrates confidence in the student" ($p = 0.01$). It is interesting the behavior "shows genuine interest in patients and their care" was ranked most effective by the BSN students and second most by the ADN students by mean item score.

The six other behaviors identified as significantly different ($p < 0.05$), include: "is objective and fair in the evaluation of the student" ($p = 0.02$) this behavior was also present in the five most effective behaviors ranked second by the BSN students and third by the ADN sample. The behavior "is well prepared for seminars and clinical conferences" ($p = 0.02$) and "conferences include worthwhile and informative material not in text" ($p = 0.03$). The final three behaviors identified with significant differences in perception are "offers student opportunity to practice before evaluation" ($p = 0.04$), "utilizes other resources to augment nursing in planning care" ($p = 0.04$) and "allows expression of diverse points of view" ($p = 0.04$).

It is of interest of the identified behaviors that indicate a significant difference in ranking, all nine behaviors are ranked highest by BSN students. BSN students place a higher emphasis on the effective clinical teaching

behaviors that increase and refine their achieved nursing skills. The nine behaviors involve characteristics of organizational abilities, refinement, independence, objectivity and professionalism, with increased emphasis on expression and utilization of resources.

Table 4

Identified Behaviors with a Significant Difference in Ranking

Behavior	Mean Item Rank		z	p
	ADN	BSN		
Organizes Experience	19.75	32.01	-2.80	.005*
Interest in Patient Care	21.64	31.09	-2.64	.008*
Confidence	20.81	31.50	-2.51	.01*
Objective and Fair	21.69	31.07	-2.38	.02*
Well Prepared	21.17	31.32	-2.35	.02*
Worthwhile Conference	21.58	31.12	-2.19	.03*
Allows Expression	22.17	30.84	-2.02	.04*
Practice before Eval.	22.14	30.85	-2.08	.04*
Utilizes Resources	22.06	30.89	-2.04	.04*

Note.

N=55.

Eval.=Evaluation

*=p<0.05

Additional Findings

Of the top five rated behaviors of the ADN students the most important behavior “demonstrates skills, attitudes, and values that are to be developed by the student”, involves characteristics related to teaching ability. The second, fourth and fifth, highest ranked behaviors “shows genuine interest in patients and their care” and “demonstrates technical skills in nursing activities where required” and “makes students aware of their professional responsibilities” all involve nursing competency characteristics. The third highest ranked behavior “is objective and fair in evaluation of the student” involves the category of consideration of students.

The BSN students top five rated behaviors included most important, “shows genuine interest in patients and their care” involves nursing competency characteristics. The second most important BSN rated behavior, “is objective and fair in the evaluation of the student” and ranked third “credits students for progress and improvement” and fourth, “gives constructive evaluation without embarrassing student” all are behaviors involving consideration of students. The behavior “demonstrates skills, attitudes, and values that are to be developed by the student” ranked of fifth importance among the BSN students involved teaching competency characteristics. The nine behaviors indicating a significant difference in ranking between ADN and BSN students include three behaviors from each of the teaching competency, nursing competency, and consideration for students categories. Category classification of clinical teaching behaviors of the CTE instrument are presented in Table 5.

Table 5

Category Classification of Effective Clinical Teaching Behaviors

Nursing Competency

- #6. Demonstrates flexibility in performing nursing functions
- #9. Admits limitations of function in clinical situations honestly
- #12. Utilizes other resources to augment nursing in planning care
- #15. Makes students aware of their professional responsibilities
- #18. Refers students to additional resource persons and materials
- #20. Offers student opportunity to practice before evaluation
- #21. Shows interest in making a contribution toward the improvement of nursing
- #23. Demonstrates technical skills in nursing activities where required
- #24. Shows genuine interest in patients and their care

Consideration for Students

- #1. Shows recognition of the individuality of the student
- #4. Gives constructive evaluation without embarrassing student
- #7. Respects the confidentiality of student relationship
- #10. Credits students for progress and improvement
- #13. Helps in new situations without taking over
- #16. Allows expression of diverse points of view
- #19. Demonstrates confidence in the student
- #22. Displays a sense of humor
- #25. Is objective and fair in the evaluation of the student

Teaching Competency

- #2. Constructs clinical assignments related to the course objectives
 - #3. Demonstrates skills, attitudes, and values that are to be developed by the student
 - #5. Relates underlying theory to clinical nursing situation
 - #8. Is well prepared for seminars or clinical conferences
 - #11. Stresses or reviews important material from theory class
 - #14. Conferences include worthwhile and informative material not in text
 - #17. Organizes clinical learning experiences in a meaningful manner for the student
-

CHAPTER V

DISCUSSION AND IMPLICATIONS

Discussion of Findings

This study, as did Kiker (1973), Brown (1981), Mogan & Knox (1985), O'Shea & Parsons (1987), Knox & Mogan (1987), Bergman & Gaitskill (1990), Nehring (1990) and Sieh & Bell (1994) identified important or effective clinical teaching behaviors as perceived by nursing students. An additional objective of this study was to identify similarities and differences of ADN and BSN student perceptions of effective clinical teaching behaviors. The General Systems Framework by King was implemented to guide this study. The concepts and interrelating relationships involved in Kings systems framework has provided consistent interpretation of the variables involved within this particular study.

The following discussion will compare and contrast prior study findings in context with the results of this study, based on the four research questions of interest. The study findings are the result of ranked mean item scores based on the percentage response of the 25 item CTE instrument and the results of a Mann Whitney U test conducted from the ADN and BSN student sample data.

Research Question I

The first research question involves the most effective clinical teaching behavior as perceived by the ADN student population. The findings of the ADN student sample in relation to the most effective clinical behavior are parallel to the findings of Kiker (1973), Knox and Mogan (1985) as well as Mogan & Knox (1987).

The ADN sample ranked the most effective clinical teaching behavior as “demonstrates skills, attitudes and values that are to be developed by the student” highest. The behavior “shows genuine interest in patients and their care” ranked second highest by ADN students. The behavior “is objective and fair in the evaluation of the student” ranked third and “demonstrates technical skills in nursing activities where required” ranked fourth, (refer to Table 1). The four highest ranked behaviors of ADN students encompass professional competency characteristics of either nursing or teaching competency characteristics (refer to Table 5).

The highest ranked behavior “demonstrates skills, values and attitudes that are to be developed by the student” is from the “teaching competency category”. The ADN sample ranked two of the top five behaviors from the “nursing competency” category which included the behaviors: “shows genuine interest in patients and their care” and “demonstrates technical skills in nursing activities where required”. The ADN sample included two behavior from the “consideration of students” category the two behaviors are “is objective and fair in the evaluation of the student” and “credits students for progress and improvement”. Of the top five rated behaviors of the ADN participants the majority of three include the “nursing and teaching competency” categories involving patient care, technical skills, values and attitudes. These three of the top five behaviors ranked by the ADN student sample are consistent with the findings of Kiker (1973), Knox & Mogan (1985) and Mogan & Knox (1987) ranking professional competence highest.

Several conclusions can be drawn from the findings involving research question number one. First, a consistent trend is evolving in relation to the second year nursing students, inclusive of the ADN population,

which ranks teaching competency behaviors the highest followed by nursing competency behaviors. These findings strengthen the prospective that the novice nursing student prefers organized, structured, technically skilled instructors. ADN students prefer instructors who are interested in patient care and demonstrate technical skills, values and attitudes that are to be developed by the students. ADN students relate to instructor behaviors that provide positive reinforcement and fair evaluation.

To contrast this finding with Kings General Systems Framework, the ADN students maintain a strong emphasis on the personal system, by preferring interactions that are structured and organized, with an emphasis on expected positive reinforcement and fair evaluation of the student performance. This may be explained by proposing the ADN personal perception is not secure or confident in the nursing role. The interpersonal relationship between the ADN student and the clinical instructor is one in which understanding and achieving the technical skills and professional values and attitude, is based on consistent demonstration and positive interactions from the instructor.

Research Question II

The second research question involves the identification of the most effective clinical teaching behaviors perceived by BSN students. Similarities exist in the findings of Brown (1981) and Bergman and Gaitskill (1990) in relation to the findings of this study. Other similarities involving evaluation characteristics are evident between the BSN sample findings and Knox & Mogan (1985) and Toth (1994).

The ranked results of the BSN sample maintain the most effective clinical teaching behavior is “genuine interest in patients and their care” (refer to Table 2). The second ranked behavior of the BSN sample involves

evaluation characteristics “is objective and fair in the evaluation of students”. The third behavior ranked most effective by the BSN students is “credits students for progress and improvement”. The fourth ranked behavior also involves evaluation characteristics “gives constructive evaluation without embarrassing student” and finally the fifth ranked behavior “demonstrates skills, values and attitudes that are to be developed by the student”.

The top five most effective clinical teaching behaviors ranked by the BSN student sample include a majority of behaviors from the category involving “relationships with students”. The behaviors: “gives constructive evaluation without embarrassing student”, “credits students for progress and improvement”, and “is objective and fair in the evaluation of the student”, are all categorized under “consideration for students”. Two of the three behaviors ranked above also involve evaluation characteristics. In comparison, the third year students in Knox & Mogan (1985) ranked evaluation most important. Toth (1994) also found practicing nurses ranked evaluation characteristics highest of perceived effective clinical teaching behaviors.

Although the highest ranked behavior of the BSN students involves “teaching competency” the majority of behaviors included in the top five are from the “consideration for students” category. Representing similar results to Brown (1981) and Bergman & Gaitskill (1990) findings. Both the student populations studied in Brown and the students and faculty in Bergman & Gaitskill ranked the behaviors involving relationships with students highest.

The identified BSN behaviors that are different from the ADN involve a stronger emphasis on the teacher instructor relationship. To interpret this finding in relation to Kings framework, the BSN students are third and fourth year students. BSN students have developed relationships with instructors and have evolved from the personal to the interpersonal system. The BSN students

desire positive interactions and reinforcement from the instructor to facilitate growth and confidence within the interpersonal system. BSN students prefer instructor behaviors that promote and model, correct and quality nursing care. The importance of relationships among students and clinical nursing instructors is a major aspect within Kings interpersonal system and a key indicator for positive learned outcomes.

Research Question III

The third research question involved in this study, examined similarities found in the perceptions of ADN and BSN students in relation to effective clinical teaching behaviors. In comparison of prior study findings the results of this study exhibited related trends. First, the ranked results of both samples involved in this study, identify four consistent behaviors classified in the top five of each group. The clinical teaching behavior of, “demonstrates skills, attitudes and values that are to be developed by the student”, was ranked number one by ADN students and ranked fifth by BSN students. This behavior in the “teaching competency” category, is the sole effective behavior ranked in this category by both samples. The results of this behavior could be further validated with the findings of Brown (1981) Mogan & Knox (1987) and O’Shea & Parsons (1987) if it indeed represented and was officially defined as the behavior of being a good role model. All three prior studies mentioned above found the most effective teaching behavior was being a good role model.

Of the 16 behaviors that were ranked similarly between the ADN and BSN students, (refer to Table 3), five behaviors were identified in the top ten highest ranked behaviors by both groups. These behaviors include: “demonstrates skills, attitudes and values that are to be developed by the student”, “makes students aware of their professional responsibilities”,

“helps in new situations without taking over”, “credits students for progress and improvement” and “gives constructive evaluation without embarrassing student”.

In summary ADN and BSN students prefer similar instructor behaviors, but differ in the perceived order of importance as evidenced by the mean item rank (refer to Tables 1 & 2). Of the top five rated behaviors, four out of the five are present in each group. These findings indicate both ADN and BSN students perceive the most effective clinical teaching behaviors are behaviors that include: an interest in patients and their care, are objective and fair in evaluations, credits students and develops skills, values and attitude that are to be developed by the students.

In addition, ADN and BSN students were found to perceive effective clinical teaching behaviors similarly with significant differences in ranked importance. Of the behaviors ranked similarly by both samples the ADN students ranked only four of 16 behaviors higher than the BSN students (refer to Table 3). These four behaviors ranked highest by the ADN students are indicative of preferred technical skill and theory oriented behaviors. Which again reflects the ADN students priority to attain the basic nursing interaction and consistent guidance of the instructor.

Research Question IV

The final research question examined in this study involved identification of significant differences in the perceptions of ADN and BSN students concerning effective clinical teaching behaviors. Significant differences in perceptions were identified by computed results of a Mann Whitney U test. Significant differences in ranking between ADN and BSN students were found in relation to the behaviors: “organizes clinical learning experiences in a meaningful manner for the student” ($p=.005$), “demonstrates

confidence in the student" ($p=.01$) and "is well prepared for seminars or clinical conferences" ($p=.02$), "conferences include worthwhile and informative material not in text" ($p=.03$) and "utilizes other resources to augment nursing in planning care" ($p=.04$) (refer to Table 4).

It is of interest the highest ranked behavior by the BSN sample and second highest ranked behavior by the ADN student sample "shows genuine interest in patients and their care", exhibited a significant difference ($p=.008$). In addition, one other behavior of the nine behaviors found to have a significant difference in ranking was ranked second highest by BSN students and third highest by the ADN students "is objective and fair in the evaluation of the student" ($p=.02$).

The final two of the nine behaviors found to have a significant difference in ranking between the ADN and BSN samples are "offers student opportunity to practice before evaluation" ($p=.04$) and "allows expression of diverse points of view" ($p=.04$). These two behaviors are comparable to two of the four characteristics identified by Brown. Brown (1981) found similar statistical significant difference with four of the twenty characteristics used ($p<.05$ or $p<.005$). These characteristics included: "... relates underlying theory to nursing practice: supervises and helps in new experiences without taking over; is self-controlled cooperative, and patient; and permits freedom of discussion and venting of feelings" p. 11. The behavior "relates underlying theory to clinical nursing situation", was found to have no significant difference in ranking among the ADN and BSN sample within this study. The behavior "self controlled, cooperative and patient" was not included on the CTE instrument.

All nine behaviors found to have a statistical significant difference in ranking ($p < .05$), were ranked higher by the BSN students (refer to Table 4). These nine behaviors exhibit characteristics of organization, honesty, confidence, independence, professionalism, and effective utilization of time and resources. These findings suggest BSN students are secure in the attainment of basic nursing skill and knowledge and prefer instructor behaviors that increase their knowledge, experience and independence. BSN students have mastered the basic knowledge and technical skills ADN students perceive as most effective, and therefore pursue instructor behaviors that refine and individualize their desired learning needs.

Application to Nursing Practice, Administration, Education and Research

This study further substantiates the importance of identifying the most important effective clinical teaching behaviors perceived by ADN and BSN students. This is important in the development of knowledgeable proficient nursing students, faculty, and practicing nurses to benefit patient care. If the most effective clinical teaching behaviors are identified and implemented by instructors, nursing students will benefit by advancing their knowledge and skills.

This study as well as the previous literature has resulted in findings which indicate, different levels of nursing students prefer specific clinical teaching behaviors above others at different intervals in their education. This finding could be influential in benefiting nursing clinical curriculums, with enhanced teaching emphasis on the specific behaviors identified as most important to the students at a set time in the curriculum.

This study is beneficial to nursing education by adding to the existing research mentioned concerning the CTE instrument. The CTE instrument is an effective tool to evaluate nursing students perceptions of effective clinical

teaching behaviors. Nursing educational faculty have a responsibility to teach in the most beneficial manner possible. Clinical nursing instructors must strive to form positive relationships with their students to promote positive learning outcomes. If nursing instructors are unknowing of their teaching behaviors or of the most effective teaching behaviors perceived by their nursing students, ineffective clinical experiences could result.

Limitations

The limitations involved in this study include limited variability related to the small non random sample of ADN and BSN students. Disproportioned size of the BSN sample in relation to the ADN sample. The inclusion of the ADN sample in previous studies is also limited. During data collection missing data was obtained by one participant in section II of the CTE and was computed in the data analysis as missing data.

The CTE instrument involves the three main categories of effective teaching behaviors. In previous studies the categories of evaluation and personal attributes were identified as separate categories on previous instrumentation, with various ratings of importance identified. The independent effective clinical teaching behavior of role modeling is not officially defined in any one of the 25 teaching behaviors listed on the CTE instrument. Unfortunately the true emphasis of the behavior involving role modeling which has been identified in numerous previous studies: O'Shea & Parsons, Mogan & Knox, Nehring, Sieh & Bell, could not be explored within this study.

Modifications

Modifications involved in this study included adapting the CTE instrument with the omission of the additional comment section which would have allowed participants to include important behaviors not already included

in section I. The BSN sample was larger than anticipated during data collection, extra instruments were prepared and available.

Recommendations

Recommend to further research the perceptions of ADN students in relation to the lack of consist research involving this population. Replication of this study is strongly recommended with a larger sample involving a number of ADN and BSN accredited programs. The addition of faculty and or graduate students is also recommended in a future replication. Consideration of a longitudinal research study involving changing perceptions of effective clinical teaching behaviors, based on academic student level and or post graduation of sample subjects. Earlier studies such as Knox & Mogan and Kiker identify similar results concerning effective teaching behaviors which are identified at differing nursing educational and practicing levels.

Further recommendation is suggested to investigate and define the clinical teaching behavior predominately found in the previous literature of being a good role model. Strongly suggest continued use of the CTE instrument with permission, by nurse researchers and faculty members to enhance the ability to evaluate perceptions of effective clinical teaching behaviors.

Concluding Statement

The foundation of this study is based on the enhancement of nursing education and the identification of effective clinical teaching behaviors as perceived by nursing students. When the most effective clinical teaching behaviors are identified and implemented effectively by clinical instructors, nursing education will benefit by effective learned outcomes achieved by students. Time, money and educational energy can be conserved if the most effective learning interactions are identified, implemented and evaluated.

APPENDICES

APPENDIX A

Human Research Review Committee Approval



GRAND VALLEY
STATE UNIVERSITY

I CAMPUS DRIVE • ALLENDALE, MICHIGAN 49401-9403 • 616/895-6611

April 26, 1999

Karyn Abrahamson
1484 N. Sherman
Ludington, MI 49431

Dear Karyn:

Your proposed project entitled *Effective Clinical Teaching Behaviors as Perceived by Associate and Baccalaureate Degree Nursing Students* has been reviewed. It has been approved as a study which is exempt from the regulations by section 46.101 of the Federal Register 46(16):8336, January 26, 1981.

Sincerely,



Paul Huizenga, Chair
Human Research Review Committee

APPENDIX B

Institution Permission Letters



**GRAND VALLEY
STATE UNIVERSITY**

I CAMPUS DRIVE • ALLENDALE, MICHIGAN 49401-9403 • 616/895-6611

April 1, 1999

Patricia Collins, RN MSN
Director of School of Nursing
West Shore Community College
3000 N. Stiles
Scottville, MI 49454

Dear Pat:

I am currently a graduate nursing student at Grand Valley State University and would like permission to conduct a survey analysis with twenty second level ADN students. I am requesting this in preparation to fulfill my requirements for the Degree of Masters of Science in Nursing at Kirkhof School of nursing. This research is being conducted as a proposed thesis project entitled "Effectiveness of Clinical Teaching Behaviors as Perceived by Associate Degree and Baccalaureate Degree Nursing Students". This study will identify and compare the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing students in this area. I have enclosed the cover letter and analysis survey for you to review. Please return this letter in the self addressed envelope enclosed with your signature below indicating you approve and grant permission or disapprove of this project.

Thank-you

I approve  _____

I disapprove _____

Sincerely, 

Karyn Abrahamson,
RN BSN
1484 N. Sherman
Ludington, MI 49431

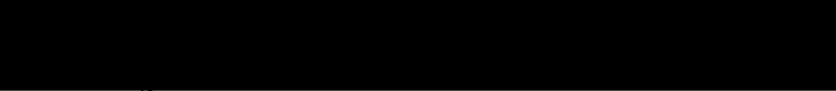
April 1, 1999

Personnel Department
Grand Valley State University
1 Campus Drive
Allendale, MI., 49401

Dear GVSU Personnel Committee:

I am currently a graduate nursing student at Grand Valley State University and would like permission to conduct a survey analysis with twenty BSN students. I am requesting this in preparation to fulfill my requirements for the Degree of Master of Science in Nursing at Kirkhof School of nursing. This research is being conducted as a proposed thesis project entitled "Effectiveness of Clinical Teaching Behaviors as Perceived by Associate Degree and Baccalaureate Degree Nursing Students". This study will identify and compare the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing students in this area. I have enclosed the student cover letter and analysis survey for you to review. In addition approval to conduct this study is pending from the GVSU Human research review committee, both nursing Deans and nursing faculty at GVSU and WSCC. Please contact Dr. Lorraine Rodrigues Fisher Chairperson of this thesis proposal with your decision of approval and or disapproval of this project. Thank-you.

Sincerely,)



Karyn Abrahamson,
RN BSN
1484 N. Sherman
Ludington, MI 49431
(616)843-8789



GRAND VALLEY
STATE UNIVERSITY

1 CAMPUS DRIVE • ALLENDALE, MICHIGAN 49401-9403 • 616/895-6611

To: Steve Merrill
Assistant Professor of Nursing

From: Karyn Abrahamson, BSN, RN
Graduate Nursing Student

RE: Thesis

Date: April 7, 1999

I am currently a graduate nursing student at Grand Valley State University and would like permission to conduct a survey analysis with twenty BSN students. I am requesting this in preparation to fulfill my requirements for the Degree of Master of Science in Nursing at Kirkhof School of Nursing. This research is being conducted as a proposed thesis project entitled: "Effectiveness of Clinical Teaching Behaviors as Perceived by Associate Degree and Baccalaureate Degree Nursing Students."

This study will identify and compare the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing in this area. I have enclosed the student cover letter and analysis survey for you to review. I am requesting 15 minutes of a class period to administer the survey. Your cooperation with this project and permission to access the students is greatly appreciated by this nurse researcher. Please return this letter in the self-addressed stamped envelope enclosed with your signature below indicating you grant permission to access your class. Please indicate a specific date and time that will be convenient to administer the survey.

Thank You, *Karyn Abrahamson (616) 843-8789.*

Permission to access class [redacted]

Date to access class 4/19/99

Time to access class 2 PM - The my class time

left. There will be another BSN student also collect data and other things will be going on as well. SK



GRAND VALLEY
STATE UNIVERSITY

1 CAMPUS DRIVE • ALLENDALE, MICHIGAN 49401-9403 • 616/895-6611

To: Kathy Pangle
Professor of Nursing

From: Karyn Abrahamson, BSN, RN
Graduate Nursing Student

RE: Thesis

Date: April 7, 1999

I am currently a graduate nursing student at Grand Valley State University and would like permission to conduct a survey analysis with twenty ADN students. I am requesting this in preparation to fulfill my requirements for the Degree of Master of Science in Nursing at Kirkhof School of Nursing. This research is being conducted as a proposed thesis project entitled: "Effectiveness of Clinical Teaching Behaviors as Perceived by Associate Degree and Baccalaureate Degree Nursing Students."

This study will identify and compare the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing in this area. I have enclosed the student cover letter and analysis survey for you to review. I am requesting 15 minutes of a class period to administer the survey. Your cooperation with this project and permission to access the students is greatly appreciated by this nurse researcher. Please return this letter in the self-addressed stamped envelope enclosed with your signature below indicating you grant permission to access your class. Please indicate a specific date and time that will be convenient to administer the survey.

Thank You, *Karyn Abrahamson RN BSN (616)843-8789*

Permission to access class _____

Date to access class 31 April 99

Time to access class 0930



GRAND VALLEY
STATE UNIVERSITY

1 CAMPUS DRIVE • ALLENDALE, MICHIGAN 49401-9403 • 616/895-6611

To: Mary Alice Sagen
Professor of Nursing

From: Karyn Abrahamson, BSN, RN
Graduate Nursing Student



(616) 843-8789

RE: Thesis

Date: April 7, 1999

I am currently a graduate nursing student at Grand Valley State University and would like permission to conduct a survey analysis with twenty ADN students. I am requesting this in preparation to fulfill my requirements for the Degree of Master of Science in Nursing at Kirkhof School of Nursing. This research is being conducted as a proposed thesis project entitled: "Effectiveness of Clinical Teaching Behaviors as Perceived by Associate Degree and Baccalaureate Degree Nursing Students."

This study will identify and compare the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing in this area. I have enclosed the student cover letter and analysis survey for you to review. I am requesting 15 minutes of a class period to administer the survey. Your cooperation with this project and permission to access the students is greatly appreciated by this nurse researcher. Please return this letter in the self-addressed stamped envelope enclosed with your signature below indicating you grant permission to access your class. Please indicate a specific date and time that will be convenient to administer the survey.

Thank You

Permission to access class



Date to access class

29 April 99

Time to access class

0930

APPENDIX C

Permission to use Instrument

Appendix C

Permission to use Instrument

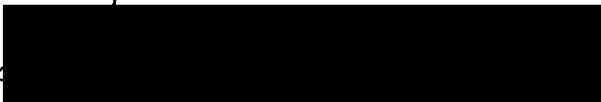
1-10-98

Dr. Carolyn M. Fong
Professor of Nursing
San Francisco State University
1600 Holloway Ave.
San Francisco, CA 94132

Dear Dr. Fong :

I am currently a graduate nursing student at Grand Valley State University in Grand Rapids, Michigan. I am working on a thesis proposal and have read your research related to the clinical teaching evaluation instrument. I would very much like to receive further information concerning the use of the CTE and hopefully implement its use within my thesis with your permission for use of course. I want to do a replication study comparing the different perceptions of effective clinical teaching behaviors held by both ADN and BSN nursing students in this area. Thank-you.

Sincerely, ,


Karyn Abrahamson,
RN BSN
1484 N. Sherman
Ludington, MI 49431



San Francisco State University
1600 Holloway Avenue
San Francisco, CA 94132

School of Nursing
415/338-1801
415/338-0555fax

TO: Karyn Abrahamson

FROM: Carolyn Fong

RE: CTE Use in your research

I am happy to give to you my permission for the use of the CTE for your master's thesis!
If I can be of further help to you, please notify me by email at cmfong@sfsu.edu.

APPENDIX D

Cover Letter to the Instrument

Appendix D
Sample Cover Letter

Dear WSCC and or GVSU Nursing Students,

I am a graduate nursing student at Grand Valley State University and I am conducting a research study concerning the perceptions of both ADN and BSN students regarding effective clinical teaching behaviors. This study is a primary component involved in a Thesis which is one of the requirements involved in receiving a Master of Science in Nursing Degree.

The identification and evaluation of effective clinical teaching behaviors as perceived by both ADN and BSN students will strengthen and increase the body of nursing knowledge regarding effective clinical teaching.

All information will be kept confidential and anonymous and your responses will in no way effect your grades or your relationship with the nursing faculty or institution. The collected data will be reported in terms of group analysis not individual, with the use of a coding system. Please do not include your name on the questionnaire. Informed consent to participate in this study is implied if you complete and return the instrument. You may choose not to participate in this study and may exit the room and be excused from the end of class at this time.

Please take approximately 10 to 15 minutes to complete the attached questionnaire. When finished please place the completed questionnaire into the box on the table in the room. This study has been approved by the GVSU Human Research Review Committee. If you have any questions concerning your rights as a participant in this study please contact Paul Huizenga GVSU , Human Research Review Committee at (616)-895-2472.

Thank-you for your participation and time.

Karyn L. Abrahamson, RN, BSN. (616)-843-8789

APPENDIX E

Instrument

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Appendix E: Instrument

SECTION I

Directions: Please rate the importance of each of the following 25 clinical teaching behaviors according to the following scale:

5= of most importance 2= slightly important
4= very important 1= of no importance
3= important

- _____1. Shows recognition of the individuality of the student
- _____2. Constructs clinical assignments related to the course objectives
- _____3. Demonstrates skills, attitudes, and values that are to be developed by the student
- _____4. Gives constructive evaluation without embarrassing student
- _____5. Relates underlying theory to clinical nursing situation
- _____6. Demonstrates flexibility in performing nursing functions
- _____7. Respects the confidentiality of student relationship
- _____8. Is well prepared for seminars or clinical conferences
- _____9. Admits limitations of function in clinical situations honestly
- _____10. Credits students for progress and improvement
- _____11. Stresses or reviews important material from theory classes
- _____12. Utilizes other resources to augment nursing in planning care
- _____13. Helps in new situations without taking over
- _____14. Conferences include worthwhile and informative material not in text
- _____15. Makes students aware of their professional responsibilities
- _____16. Allows expression of diverse points of view
- _____17. Organizes clinical learning experiences in a meaningful manner for the student
- _____18. Refers students to additional resource persons and materials
- _____19. Demonstrates confidence in the student
- _____20. Offers student opportunity to practice before evaluation
- _____21. Shows interest in making a contribution toward the improvement of nursing
- _____22. Displays a sense of humor
- _____23. Demonstrates technical skills in nursing activities where required
- _____24. Shows genuine interest in patients and their care
- _____25. Is objective and fair in the evaluation of the student

SECTION II

Directions:

Please choose the five teaching behaviors from Section I that you consider to be most important for a clinical teacher to exhibit. Please write the item numbers on the five blanks below.

Item numbers of the five most important teaching behaviors

Next, please write the numbers of the items chosen above in the spaces below ranking them according to your perception of their importance.

Item numbers

_____ the most important
_____ 2nd most important
_____ 3rd most important
_____ 4th most important
_____ 5th most important

Directions:

For each multiple choice question, please circle the letter corresponding to the one response that applies to you.

1. Are you male or female? 1. Male 2. Female

2. What type of program are you enrolled in?
 1. Associate Degree
 2. Baccalaureate Degree

APPENDIX F
Results

Appendix F

Table 6

Rating of Most Effective Clinical Teaching Behaviors (N=55)

Behavior	<u>Percent of Responses for Behavior Importance</u>				
	No (1)	Slight (2)	Important (3)	Very (4)	Most (5)
Shows recognition of the individuality of the student	0.0%	5.5%	32.7%	43.6%	18.2%
Constructs clinical assignments related to the course objective	1.8%	5.5%	20.0%	41.8%	30.9%
Demonstrates skills, attitudes, and values that are to be developed by the student	0.0%	0.0%	12.7%	36.4%	50.9%
Gives constructive evaluation without embarrassing student	1.8%	0.0%	9.1%	41.8%	47.3%
Relates underlying theory to clinical nursing situation	0.0%	3.6%	32.7%	36.7%	27.3%
Demonstrates flexibility in performing nursing functions	0.0%	5.5%	36.4%	49.1%	9.1%
Respects the confidentiality of student relationship	1.8%	0.0%	20.0%	38.2%	40.0%
Is well prepared for seminars or clinical conferences	0.0%	5.5%	25.5%	43.6%	25.5%
Admits limitations of function in clinical situations honestly	1.8%	7.3%	23.6%	41.8%	25.5%
Credits students for progress and improvement	1.8%	0.0%	10.9%	36.4%	50.9%

Behavior	<u>Percent of Responses for Behavior Importance</u>				
	No (1)	Slight (2)	Important (3)	Very (4)	Most (5)
Stresses or reviews important material from theory classes	0.0%	12.7%	21.8%	52.7%	12.7%
Utilizes other resources to augment nursing in planning care	0.0%	9.1%	41.8%	34.5%	14.5%
Helps in new situations without taking over	1.8%	0.0%	14.5%	49.1%	34.5%
Conferences include worthwhile and informative material not in text	1.8%	7.3%	34.5%	38.2%	18.2%
Makes students aware of their professional responsibilities	0.0%	0.0%	20.0%	41.8%	38.2%
Allows expression of diverse points of view	1.8%	3.6%	45.5%	30.9%	18.2%
Organizes clinical learning experiences in a meaningful manner for the student	1.8%	3.6%	29.1%	34.5%	30.9%
Refers students to additional resource persons and materials	1.8%	9.1%	41.8%	40.0%	7.3%
Demonstrates confidence in the student	0.0%	1.8%	16.4%	45.5%	36.4%
Offers student opportunity to practice before evaluation	0.0%	1.8%	16.4%	52.7%	29.1%

Behavior	<u>Percent of Responses for Behavior Importance</u>				
	No (1)	Slight (2)	Important (3)	Very (4)	Most (5)
Shows interest in making a contribution toward the improvement of nursing	0.0%	10.9%	29.1%	43.6%	16.4%
Displays s sense of humor	5.5%	14.5%	30.9%	27.3%	21.8%
Demonstrates technical skills in nursing activities where required	0.0%	5.5%	10.9%	52.7%	30.9%
Shows genuine interest in patients and their care	1.8%	0.0%	3.6%	21.8%	72.7%
Is objective and fair in the evaluation of the student	1.8%	0.0%	5.5%	30.9%	61.8%

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