

The Influence of Preceptorship Learning Method on Caring Behavior of Students at ICU Room

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ABSTRACT

Abstract--- Caring behavior is one of the benchmarks for the quality of nursing services. However, when providing nursing care, not all students can do it in the right way. The results of research conducted by using the Caring Behavior Inventory (CBI) in college students accounted for only 23% of subjects with good caring behaviors. While 54% was in the moderate category and 23% was in the less category. In this study, researchers used a pre-experimental group pre-posttest design. Caring behavior was the dependent variable and preceptorship learning was an independent variable. The total sample was 13 subjects conducted by nonprobability sampling. The data collection tool used is the Caring Behavior Inventory (CBI). Data were analyzed using a paired t-test with a significance level of 0.05. The results showed a significance value of 0.071. P value > 0.05 indicates that there is no influence of preceptorship learning on the caring behavior of a student in the ICU. This indicates the need for further research on preceptorship learning programs and their influence on the caring behavior of nursing students.

Keywords: caring, ICU, nurse students, preceptorship

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INTRODUCTION

Caring is a behavior in providing holistic nursing care. Caring has an essential role in determining the quality of nursing services which is an indicator of the quality of health services and one of the determinants of the image of health service institutions in the eyes of the community [1], [2]. Sudarma in 2008 believes that accreditation of a hospital is largely determined by the quality of nursing [3]. Therefore, improving the quality of hospital services is identical to improving nursing services [4]. However, a fundamental problem in the nursing profession in Indonesia is that the caring behavior of nursing students has not been implemented when providing nursing care [2]. This is following the research of Phillips et al. in 2015 and Ardinata, Karota Bukit, & Arruum in 2018 who found that the majority of nursing students have not been able to interpret professionally about caring behavior, their opinions only focus on completing nurses' tasks in the context of caring for the physical needs of patients [5], [6].

The preceptorship learning method is a learning method with a system of assistance by a preceptor (nurse) to the preceptee (nursing student) when performing nursing actions [7]. The number of ICU room nurses was 18 people (1 head of the room and 17 implementing nurses). Sixteen nurses with Ners bachelor educational qualifications and 2 nurses with vocational education qualifications, of which 2 nurses are currently studying at bachelor level. Fifteen nurses with undergraduate nurse's qualifications are preceptor for nursing students who practice in the ICU. Among the 15 preceptors, three of them have received ICU training certificates. During 14 days of learning, each nursing student gets 10 days of learning, where there are 4-6 meetings with preceptors who evaluate their caring behavior.

Based on Murphy et al. in 2009 study, the higher abilities and skills possessed by a nursing student are,

the less caring behavior displayed in carrying out the nursing care process produce [8]. In contrast to Yulianti's study in 2012 proved that there is a significant correlation between the experience factor and someone caring attitude [9].

Motivation has a significant influence on the caring behavior of nursing students [10]. Someone who has achievement motivation and a high attitude of power has a high caring behavior [11]. In addition to learning motivation from students, caring behavior is also influenced by the success or failure of the learning methods provided. Students who are satisfied with the learning method given better caring behavior than students who are dissatisfied [12]. Lack of guidance or instruction and cultural competence in learning caring behavior is also inhibiting factors for learning [13].

The absolute facilities in the Hospital include professional nurses as clinical mentors or those who will accompany the nurse students while practicing in the field. As a result, after finishing this learning process, it is hoped that nursing students can increase caring behavior, nevertheless, the preceptorship learning method in hospitals has never been evaluated for effectiveness. This study aimed to examine the achievement of caring behavior of students in the learning process of nursing in the Intensive Room.

METHODS

This study used an experimental research design with a pre-experimental method of one-group pre-posttest design. This study used a nonprobability sampling technique, which saturated sampling. Affordable population in this study was nursing profession students who did practice in the ICU Room in July totaling 13 students. Caring behavior was as the dependent variable and preceptorship learning was as an independent variable. The instrument used was

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preceptorship and questionnaire learning modules from the CBI (Caring Behavior Inventory) Wolf [14]. Data were analyzed using a paired t-test with a significance level of 0.05.

RESULTS

Based on table 1, the caring behavior of nursing students with a good category has increased the number of each parameter except the parameters of professional knowledge and skills from 3 (23%) to 2 (15%) students and the parameter of attention to the experience of others from 2 (15%) to 1 (7%) student. In the caring behavior of nursing students with sufficient categories, almost all parameters have increased except the parameters recognizing the existence of humans

who have a fixed number of 8 (62%) students. A significant increase occurred in the parameters creating a positive relationship from 5 (38%) students increased to 9 (69%) students. In the caring behavior of nursing students with less categories, all parameters decreased in number. On parameters responding with respect and creating a positive relationship, decreasing the number up to reaches the point of 0 (0%), meaning that there are no nursing students who behave caring less on the parameters.

Table 1. The frequency distribution of caring behavior of nursing students based on 5 Wolf caring parameters before and after the preceptorship learning method was given.

Wolf caring parameters	Good				Sufficient				Less			
	Before		After		Before		After		Before		After	
	n	%	n	%	n	%	n	%	n	%	n	%
Recognize human existence	2	15%	4	31%	8	62%	8	62%	3	23%	1	7%
Respond with respect	2	15%	4	31%	8	62%	9	69%	3	23%	0	0%
Professional knowledge and skills	3	23%	2	15%	7	54%	9	69%	3	23%	2	15%
Creating positive relationships	3	23%	4	31%	5	38,5%	9	69%	5	38,5%	0	0%
Attention to the experiences of others	2	15%	1	7%	8	62%	11	86%	3	23%	1	7%

Table 2. The calculation tabulation of caring behavior of nursing students before and after the preceptorship clinical learning method given in the ICU Room in July 2017

Respondent number	Before given the preceptorship learning method		After being given the preceptorship learning method		Deviation
	Score	Category	Score	Category	
1.	121	Sufficient	128	Good	7
2.	133	Good	135	Good	2
3.	114	Sufficient	135	Good	21
4.	118	Sufficient	123	Sufficient	5
5.	123	Sufficient	115	Sufficient	-8
6.	72	Less	96	Sufficient	24
7.	50	Less	113	Sufficient	63
8.	138	Good	123	Sufficient	-15
9.	128	Good	112	Sufficient	-16
10.	62	Sufficient	121	Sufficient	59
11.	100	Sufficient	112	Sufficient	12
12.	98	Sufficient	105	Sufficient	7
13.	116	Sufficient	129	Sufficient	13
Average Score	102,62		122		

Table 2 showed that there was an increase in the average score of caring behavior by 20.62 points with an increase in caring behavior of students from the moderate to good category by 2 students and from the less to the moderate category by 3 students. Whereas

there were 6 students in the caring behavior category. Based on the score, 3 students experienced a decrease, however, when viewed in the form of categories, 2 students experienced a decrease in caring behavior from good to sufficient.

Table 3. Tabulation the average scores of caring behavior of student based on Wolf's caring parameters

Parameter of Caring Wolf	Average score before intervention	The average score after intervention	Deviation
Recognizing overcoming humans	32,17	36,58	4,41
Respond with respect	32,84	37,17	4,33
Professional knowledge and skills	36,2	37,2	1
Creating positive relationships	32,12	37,23	5,11
Attention to the experiences of others	30,75	35,25	5,50

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Based on table 3, the average caring behavior of students has increased. In the parameter of attention to the experience of others have the highest deviation of 5.50

and the sub-variables of knowledge and skills have the lowest deviation of 1.

Table 4. Paired Samples Test

		Paired Differences				T	Df	Sig. (2-tailed)	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of Difference				
					Lower				Upper
Pair 1	Pre-Test-Post Test	-13.38462	24.36370	6.75727	-28.10745	1.33822	1.981	12	.071

Based on table 4, the results of the Paired T-Test showed a significance value of $p = 0.071$. This shows that the significance value ($p > 0.05$) means nothing influences of

the preceptorship learning method on the caring behavior of nursing students in the ICU.

DISCUSSION

Based on the analysis of the caring behavior of nursing students perceived by nurses (preceptor), it showed that there is no effect of the preceptorship learning method on the caring behavior of nursing students. This contradicts the research conducted by Mamhidir et al. in 2016 states that the preceptorship learning method involved the preceptor in learning builds a positive learning environment for nursing students who carry out clinical practice [15]. This research-proven that nursing students were more confident and competent in clinical practice. Learning preceptorship is inseparable from the role of the preceptor. Preceptors have a big hand in learning success. According to Syahreni & Waluyanti in 2007 preceptors are needed to facilitate and prepare students well, determine goals, learning methods, and evaluation methods to increase the ability and capacity of the subject in showing caring behavior [16].

The preceptor who was responsible for nursing students in learning preceptorship in the ICU Room is a nursing staff with a registered nursing educational qualification, whose each preceptor is responsible for one nursing student. Based on the research of Omer, Suliman, Thomas, & Joseph in 2013, the preceptorship model which involves mentoring with the preceptor intensively produced more satisfaction for the preceptee than the preceptorship model which aimed to increase the independence and self-directed learning of students [17]. The preceptorship model involved the preceptor intensively is a preceptorship with the preceptor appointed by the nursing education institution as a Clinical Teaching Assistant (CTA), in which the CTA has worked with clinical nurses for three months before coaching to students. CTA will select two patients to serve as cases for students, taking patients from primary care to be treated by four students with full assistance from CTA. Patients will be transferred back to primary care after the learning process is complete. Whereas the preceptorship model which aims to increase the independence and self-directed learning of students is the preceptorship model used in the ICU Room, where the preceptor is part of the nursing staff within the intended health service institution. Nurses in this preceptorship model have a large role in providing teaching to students while providing holistic services to patients. Each preceptor is responsible for 6-7 patients and one nursing student. Preceptors help students following the requirements needed.

The results of this study are in line with the research of Omer et al. in 2013 which stated that preceptorship models such as those aimed at increasing the independence and self-directed learning of students did not provide a positive learning environment for nursing

students [17]. However, from the data obtained on average, there was an increase in student caring behavior in most caring behavioral parameters Wolf. This might impact other factors that influence the caring behavior of nursing students.

The results showed that nurses' perceptions of caring behavioral components, namely attention to the experiences of others, were the highest caring parameters of deviation before and after the preceptorship learning method, which were 5.50. It can be seen that preceptorship learning increases the awareness of nursing students caring behavior in meeting the basic needs and spiritual needs of patients. Nevertheless, when viewed from the results of the post-test, the parameter of attention to the experience of others has the lowest mean among others. The findings from Respati in 2012 using the Linkert scale 4, showing a similar thing as the lowest value of caring parameters on the attention and experience of others [18]. This parameter is related to the intervention of Watson's ten karative factors, namely, assistance with the gratification of human needs and allowance for existential-phenomenological spiritual forces where the fulfillment of basic needs with caring awareness has the potential to maintain the harmony of the soul, mind, and body as well as unity in all aspects of care [19]. The karative factor provides a mental, physical, sociocultural, and spiritual environment that supports, protects, and improves. There is a high positive relationship between nurses and patients will reduce the level of work stress nurses [4], [18], [20].

Research showed that nurses' perceptions in the ICU Room on the parameters of student caring behavior which is recognizing human presence gave results in a high deviation of scores and mean post-tests, however, there was one nursing student whose caring behavior scores fall into this category lacking. This parameter represented the caring behavior of nursing students on the 3 Watson charative factors, namely the formation of a humanistic-altruistic value system, the formation of hopes and beliefs, as well as the development and sensitivity to self and others. The results of this study contradict with Respati in 2012 study which found that overall nurses have a high value of caring behavior on this parameter [18]. The ability of nursing students to care in this aspect showed a high appreciation of nursing students towards others.

The results showed that nurses' perceptions of caring behavioral parameters of student's namely professional knowledge and skills were the lowest parameters of deviation, however, the mean post-test score was ranked second after the parameter created a positive relationship. Findings from Respati in 2012 show that

this caring parameter occupies the highest position than other caring parameters [18]. This caring component is illustrated in the hospital's mission to hold integrated education and training in the fields of medicine and other health to produce graduates or health workers who are competent in their fields [21]. The finding of this study indicated that although two nursing students had less caring behavior on this parameter, using a hospital program that supports the implementation of integrated education and training can have an impact on improving the quality of health education in hospitals.

CONCLUSION

The preceptorship learning method does not affect all caring behavioral parameters of nursing students. The preceptorship method gave a big influence on the nursing behavior of nursing students on the parameters of attention to the experience of others and at least gave influence on the parameters of professional knowledge and skills. This showed the preceptorship learning method does not have a significant impact on the parameters of professional knowledge and skills, while the effective preceptorship learning method was used to increase the caring behavior of nursing students in the awareness of meeting basic needs and spiritual needs.

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