



Evaluating the Impact of Clinical Placements on Nursing Students' Readiness for Professional Practice: A Comprehensive Review

¹- Afaf Idris Ahmed Abiri,²- Amany Yahia Sood Hatan,³-Amal Ibrahim Agil Tomehi,⁴-Neamah Ali Yahia Magarashi,⁵-Sultan Omar Ahmed Hakami,⁶- Adel Bashir Mohammad Alanazi,⁷- Roaa Mohammed Jabali,⁸-Dawshah Ghalfan Ateah Absi,⁹-Dawshah Ghalfan Ateah Absi,¹⁰- Aljazi Sueaylih Awdh Alanazi,¹¹- Tamam Jazim Nahar Alrwelay,¹²-Abuod Joneed Abuieisha

¹ Ksa, Ministry Of Health, Jazan General Hospital

² Ksa, Ministry Of Health, Jazan General Hospital

³ Ksa, Ministry Of Health, Sabia General Hospital

⁴ Ksa, Ministry Of Health, Al Ardha Primary Health Care

⁵ Ksa, Ministry Of Health, Erada Hospital For Mental Health

⁶ Ksa, Ministry Of Health, Eradah Complex And Mental Health- Riyadh

⁷ Ksa, Ministry Of Health, Abu Arush General Hospital

⁸ Ksa, Ministry Of Health, Aledabi General Hospital

⁹ Ksa, Ministry Of Health, Aledabi General Hospital

¹⁰ Ksa, Ministry Of Health, Hafar Albatin

¹¹ Ksa, Ministry Of Health, Heart Center At King Abdulaziz Specialist Hospital Al-Jouf

¹² Ksa, Ministry Of Health, Forensic Medical Services Center In Jazan Region

Abstract

Background: The gap between theoretical knowledge acquired in nursing education and practical skills required in clinical settings has become a significant concern, potentially undermining the preparedness of nursing graduates for professional practice. This discrepancy, often termed the theory-practice gap, can adversely affect healthcare delivery and contribute to the nursing shortage.

Methods: This review employed a scoping methodology to analyze literature from 1980 to 2023, focusing on the impact of clinical placements on nursing students' readiness for practice. A systematic search was conducted across databases including CINAHL, PubMed, and Embase, utilizing keywords related to clinical readiness, nursing education, and graduate competencies. Key studies were evaluated for their findings regarding the effectiveness of clinical placements in enhancing nursing students' practical skills and confidence.

Results: The review identified a range of factors influencing clinical readiness, including the quality of clinical placements, the support provided during training, and the integration of theoretical knowledge with practical experiences. While many studies reported improvements in clinical competencies and confidence levels among nursing graduates, significant variations were noted in the effectiveness of different placement models.

Conclusion: The findings underscore the critical role of clinical placements in preparing nursing students for professional practice. To enhance readiness, nursing programs must prioritize high-quality clinical experiences, implement supportive structures, and foster integration between theoretical and practical learning. Further research is needed to establish standardized measures for assessing clinical readiness among nursing students.

Keywords: Clinical Placements, Nursing Education, Readiness for Practice, Theory-Practice Gap, Nursing Competencies.

Received: 16 October 2023 **Revised:** 29 November 2023 **Accepted:** 13 December 2023

1. Introduction

A disparity exists between the clinical setting and the theoretical instruction provided in the classroom, which may adversely affect professional practice and lead to a deficiency of healthcare workers [1]. The professional practice of nurses requires a meticulous and effective integration of clinical and theoretical information, often acquired via academic instruction. When nurses possess these two abilities, they are more likely to demonstrate enhanced practice and efficiency, therefore fulfilling the actual needs of the profession; hence, they may be considered prepared for practice [2]. Consequently, clinical preparation for practice is fundamental given the complexities inherent in the nursing profession [2]. Recent studies conducted in Ohio, the United States; Victoria, Australia; and Shiraz, Iran, revealed that graduating nurses had a deficiency in clinical skills, with only a minor fraction demonstrating entry-level competencies and preparedness for clinical practice [3].

Nursing schools are anticipated to generate nurses who, despite their inexperience, are clinically prepared to address the growing healthcare needs of an older population and to alleviate the impending nursing shortage [4]. The capacity of graduate nurses to seamlessly integrate into clinical practice relies on their ability to acclimate to the social environment of their workplace, particularly during training or shortly thereafter, cultivate robust emotional intelligence, and secure substantial stress-free access to employment and transition opportunities [5-8]. Nonetheless, some nursing graduates who successfully complete the state license examination may lack preparedness for employment in intricate clinical domains [2,3]. The belief that graduates lack readiness for clinical practice, known as the theory-practice gap, is shaped by multiple factors, including the disparity between educational institutions and clinical environments, the quality of training and support during undergraduate clinical placements, and the process of socialization into the nursing profession [2,3,9]. Thus, nurses' transition to clinical or professional practice may be arduous due to insufficient clinical preparedness [10]. Consequently, some newly certified nurses may experience emotional exhaustion and burnout, resulting in disillusionment or diminished willingness to provide professional services [11-14].

The notion of preparation for practice has been elucidated in recent years, hence reducing ambiguity [15-17]. Nevertheless, these descriptions mostly focused on novice nurses and the preparedness for evidence-based practice [18-20]. As a result, several academics included these principles into their writings [21-25]. However, there is growing ambiguity and doubt around the idea of clinical preparedness for student nurses among academics and researchers. This may be linked to the unexamined clinical preparedness for practice, coupled with a lack of empirical data on its use among academics and clinicians. Therefore, it is essential to do a concept analysis to accurately define clinical preparation for practice among nursing students, as this will clarify its meaning and application, and provide a foundation for empirical references about its operationalization. This concept analysis seeks to provide a precise and succinct description of clinical preparedness for practice among nursing students.

2. Methods

The search terms were based on the population, concept, and context (PCC) paradigm. The objective was to get all qualifying studies via a scoping search approach. The keywords were used as particular terms, synonyms, or medical subject headings (MeSH) when suitable, and were interconnected utilizing the proper Boolean operators, wildcards, and truncation. The search was conducted using appropriate Boolean operators with the terms "readiness," "for clinical practice," "clinical readiness," "nursing," "graduate nurses," "trainees," and "students." The search was limited to the years 1980–2023 and conducted in the English language. The inquiry included three databases: the Cumulative Index for Nursing and Allied Health Literature (CINAHL), PubMed, and Embase.

3. Clinical Preparation for Nursing Students

The notion of clinical preparation for nursing students is inadequately defined. The notion denotes the instant ability to handle clinical situations anticipated by more seasoned specialists in a certain field [26,27]. This topic has been used diversely and mostly in distinct ways. Some studies noted a deficiency in confidence while communicating with doctors, patients, and family members as perceived shortcomings in clinical preparedness [9,28]. Furthermore, several and numerous ideas have been used as synonyms for clinical preparedness for practice, presenting the significant difficulty that these constructions are distinct [29]. It is referred to as transition shock, or acute stress related to navigating new professional connections, responsibilities, and work-life balance, while adapting to the physical demands of clinical practice, which is connected with the integration of new nurses into the workforce [29].

Understanding that clinical preparation for practice is a vital aspect of nursing and a significant factor influencing access to and usage of healthcare services and patient outcomes, doing a concept analysis will be beneficial for advancing nursing practice research and education. Although the ready to practice among freshly trained graduate nurses has undergone concept analysis, resulting in a degree of standardization in terminology, the clinical readiness to practice among student nurses has not been explicitly examined, leading to some uncertainty. The objective of this concept analysis was to provide a clear definition and consistency in the comprehension and application of the idea of clinical preparedness among nursing students by identifying its qualities, antecedents, and consequences, and exemplifying with relevant situations.

The ambiguity and variety around the idea of clinical preparedness in nursing practice necessitated a concept analysis. The main objective of this concept analysis was to delineate and elucidate the use and significance of the idea of clinical readiness to practice, as well as to define its key traits, antecedents, and consequences, and to formulate relevant scenarios. Although several experts define clinical fitness for practice, various definitions and interpretations continue to exist among them. Candella and Bowles [30] defined clinical preparedness as the management of a substantial patient caseload and the provision of care for critically sick patients [30]. Clinical preparedness in nursing is characterized as the capability to execute a task, operation, method, or activity [31]. Clinical practice preparation pertains to the implementation of industry-specific competencies, including collaboration, time management, communication abilities, interpersonal skills, and emotional intelligence [5]. Furthermore, clinical practice preparedness was characterized by a satisfactory proficiency in fundamental nursing competencies among graduate nurses [3].

A study of the aforementioned indicates that clinical preparedness for nursing students remains inherently ambiguous in application. Clinical readiness for practice is defined in the literature as the acquisition of a competent level of fundamental nursing skills; the capability to execute tasks, procedures, techniques, or activities; possessing adequate confidence in interactions with physicians, patients, and family members; exhibiting essential knowledge; and effectively assimilating into the healthcare industry (hospitals/communities) with enhanced relevant skills.

Walker and Avant characterized attributes as "qualities or characteristics that are commonly linked to a concept, offering further understanding of its significance" [15]. Furthermore, defining features delineate the essential properties necessary for the identification and differentiation of the idea from analogous concepts [15]. This research discovered qualities by integrating associated aspects using qualitative thematic data analysis. The notion of clinical preparation for practice among nursing students encompasses three interconnected criteria. The traits included professional competencies, communication abilities, self-regulation skills, and self-assurance. The first three have been recognized as traits linked to preparedness for practice [13], while self-confidence is seen as an essential element for clinical readiness among student nurses. Furthermore, the characteristic of graduate students' clinical preparedness for practice revealed a degree of self-assurance (behavior) in clinical nursing services, manifested in a novice nurse's conduct regarding the effective application of knowledge, skills, communication, and self-management in clinical

environments. Figure 1 illustrates the essential characteristics of nursing students' clinical preparedness for practice.

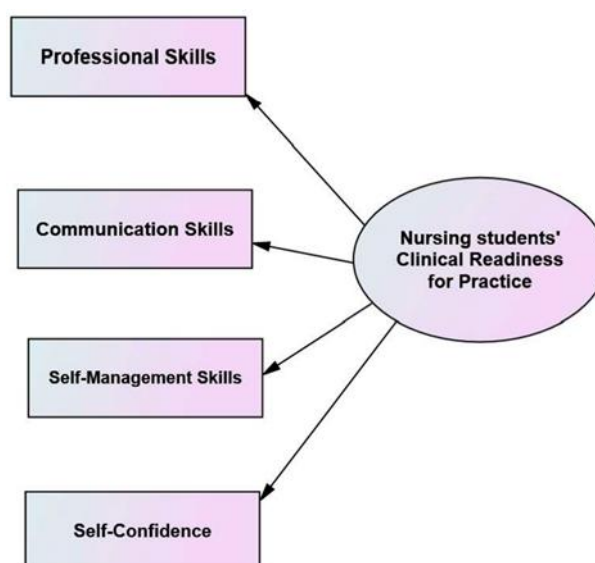


Figure 1. The essential characteristics of nursing students' preparedness for clinical practice.

This concept analysis assessed a significant aspect concerning the outcomes of nursing student training through a systematic review following Prisma guidelines, synthesizing defining attributes, antecedents, and consequences via integrative thematic data analysis. The final outcomes guaranteed the development of essential models to effectively delineate and elucidate such traits. The concept of "clinical readiness for nursing students" encompasses defining attributes (personal factors such as demographic characteristics and prior health experience; and educational factors including clinical learning environment, clinical internship program, learning course, and teaching strategy), antecedents (self-confidence, professional skills, communication skills, and self-management skills), and consequences (personal outcomes such as job satisfaction and integration into current practice, as well as job-related outcomes including performance improvement, patient satisfaction, effective care, quality of nursing care, and efficient team communication). This analysis underscores the significance of the concept in the development of nursing theory, practice, and education.

A key attribute of nursing students' clinical preparedness for practice was self-assurance, including professional competencies, communication skills, and self-management abilities. As a result, these results led to both personal and job-related consequences, which are essential in nursing services. It is essential for nurse scientists to provide treatments that enhance the self-confidence of nursing students. Furthermore, another ambiguous aspect of doing concept analysis is the notion of "self-assurance." This will provide a fundamental foundation for developing ideas that will enhance students' clinical practice and facilitate their ultimate inclusion into service [32,33]. This distinction is crucial since many academics, clinicians, and practitioners seem to conflate self-assurance with self-confidence, hence necessitating concept analysis. Thoroughly examining these principles may facilitate the integration of clinical practice and nursing science [34].

This examination of the idea was undertaken with the recognition that "readiness for practice" [13] has been previously examined; nonetheless, several particular differences in its use within clinical practice remain. This comprehensive definition of nursing students' clinical ready to practice diverges from other concept analyses that lacked varied viewpoints and concentrated only on the general notion of readiness to practice. Moreover, earlier definitions indicated that clinical preparedness for practice is characterized as the instant ability to handle clinical situations that a more seasoned nurse would anticipate seldom [26,27]. This definition is further constrained due to its capacity to exhibit all the essential defining features, antecedents, and consequences. This study expands the notion by identifying its key features, which include

self-confidence, the lack of transition shock, professional abilities, communication skills, and self-management skills.

4. The Theoretical Implications of Concept Analysis

Methods of idea analysis must underpin the development and, at times, the therapeutic implementation of concepts. This is due to the fact that a theory is constructed upon variously articulated notions [15]. A theorist presents the reader with essential defining characteristics via theoretical definitions, which are often abstract, often immeasurable, and generally include a synthesis of many yet interconnected notions. The theoretical definition and potential application of nursing students' clinical readiness for practice pertain to the acquisition of self-confidence, encompassing professional skills, communication skills, and self-management skills, with the objective of attaining self-reliance, self-assurance, a scientific perspective, and the delivery of organized, acceptable care to patients and communities. Comprehending and developing theories concerning nursing students' clinical preparedness for practice is crucial due to the rising population of undergraduate students, congestion in clinical training environments, reduced clinical placement hours, and diminishing motivation among clinical preceptors affecting workplace readiness [35-37].

As nursing theory continues to evolve, few have concentrated on the transition to clinical practice and the preparedness consistently linked to student nurses' practice. This concept analysis, focused on nursing students' clinical readiness to practice in developing countries, underscores the necessity of addressing this concept, as the "honeymoon" period for many graduating students is increasingly brief. This idea analysis may serve as an initial foundation for the development of a nursing theory aimed at comprehending, elucidating, and establishing essential principles for delivering healthcare services to patients and communities. Formulating a middle-range nursing theory would enhance understanding of the issues encountered by newly certified nurses and facilitate the implementation of practical actions essential for alleviating these challenges. Caring for multiple patients necessitates significant dexterity in a complex setting, requiring a steep learning curve that can only be achieved by enhancing the student's nursing confidence, clinical skills, and overall competence within a supportive environment.

5. Advantages and Disadvantages

This concept analysis approach used the comprehensive Walker and Avant techniques, which are utilized in the nursing field to elucidate, delineate, or accurately define the essential characteristics of vague or ambiguous phrases [38]. This idea analysis approach facilitated the demonstration of many views. This was accomplished due to the establishment of instances. The case studies illustrated the topic and contextualized it inside real-life scenarios. Employing this concept analysis technique for assessing nursing students' clinical preparation for practice fosters an understanding of the idea's complexity via a systematic literature review process, enhancing the trustworthiness of the integrated scientific methodology. Nonetheless, this review procedure has many significant limitations that must be recognized. A significant drawback was the restriction to publications published only in English, limiting the potential extension of the results to other languages. This concept analysis used the scoping review technique for the screening and selection of research, and the PCC framework for the literature search. This facilitated the incorporation of diverse research with distinct study approaches.

6. Conclusions

This concept analysis delineated the causes, defining characteristics, and outcomes of nursing students' clinical preparedness for practice. The fundamental trait is self-assurance, including professional competencies, communication abilities, and self-management capabilities. These outcomes yielded personal and job-related results, both of which are essential in nursing services. This framework delineates the criteria for assessing the clinical preparedness of nursing students as they transition to practice-ready graduates. The proposed definition of nursing students' clinical readiness for practice is "the acquisition of professional nursing knowledge, skills, communication abilities, self-management competencies, and the judicious application of these skills, accompanied by the self-assurance to provide quality care." Following

this concise definition, it is anticipated that nursing researchers will explore diverse methodologies for developing nursing theory to describe, elucidate, or advance the concept.

References

- [1] Kaur, V.; Dhama, K.; Kaur, S.; Rawat, R. Budding nurses readiness for clinical practice: The future is now. *Int. J. Res. Med. Sci.* 2020, 8, 215–220.
- [2] Notarnicola, I.; Stievano, A.; Pulimeno, A.; Iacorossi, L.; Petrizzo, A.; Gambalunga, F.; Rocco, G.; Petrucci, C.; Lancia, C. Evaluation of the perception of clinical competencies by nursing students in the different clinical settings: An observational study. *Ann. Ig.* 2018, 30, 200–210.
- [3] Sharma, S.K.; Arora, D.; Belsiyal, X. Self-reported clinical practice readiness of nurses graduating from India: A cross-sectional survey in Uttarakhand. *J. Edu. Health Promo.* 2020, 9, 125.
- [4] Levett-Jones, T.; Fahy, K.; Parsons, K.; Mitchell, A. Enhancing nursing students' clinical placement experiences: A quality improvement project. *Contemp. Nurse* 2006, 23, 58–71.
- [5] Walker, A.; Yong, M.; Pang, L.; Fullarton, C.; Costa, B.; Dunning, A.T. Work readiness of graduate health professionals. *Nurse Edu. Today* 2013, 33, 116–122.
- [6] Dugué, M.; Sirost, O.; Dosseville, F. A literature review of emotional intelligence and nursing education. *Nurse Edu. Pract.* 2021, 54, 103124.
- [7] Maria, H.S.Y.; Mei, W.L.; Stanley, L.K.K. The transition challenges faced by new graduate nurses in their first year of professional experience. *GSTF J. Nurs. Health Care (JNHC)* 2020, 5.
- [8] Reebals, C.; Wood, T.; Markaki, A. Transition to practice for new nurse graduates: Barriers and mitigating strategies. *West. J. Nurs. Res.* 2022, 44, 416–429.
- [9] Casey, K.; Fink, R.R.; Krugman, A.A.; Propst, F.J. The graduate nurse experience. *JONA J. Nurs. Admin* 2004, 34, 303–311.
- [10] Labrague, L.; McEnroe-Petitte, D. Job stress in new nurses during the transition period: An integrative review. *Int. Nurs. Rev.* 2018, 65, 491–504. [Google Scholar] [CrossRef]
- [11] Lee, T.; Damiran, D.; Konlan, K.D.; Ji, Y.; Yoon, Y.S.; Ji, H. Factors related to readiness for practice among undergraduate nursing students: A systematic review. *Nurse Educ. Pr.* 2023, 69, 103614.
- [12] Zhang, Y.; Wu, J.; Fang, Z.; Zhang, Y.; Wong, F.K.Y. Newly graduated nurses' intention to leave in their first year of practice in Shanghai: A longitudinal study. *Nurs. Outlook* 2017, 65, 202–211.
- [13] Mirza, N.; Manankil-Rankin, L.; Prentice, O.; Hagerman, L.A.; Draenos, C. Practice readiness of new nursing graduates: A concept analysis. *Nurse Educ. Pr.* 2019, 37, 68–74.
- [14] Schaefer, J.D.; Welton, J.M. Evidence based practice readiness: A concept analysis. *J. Nurs. Manag.* 2018, 26, 621–629.
- [15] Walker, L.O.; Avant, K.C. *Strategies for Theory Construction in Nursing*; Pearson/Prentice Hall Upper: Saddle River, NJ, USA, 2005.
- [16] Pluye, P.; Hong, Q.N. Combining the power of stories and the power of numbers: Mixed methods research and mixed studies reviews. *Ann. Rev. Pub. Health* 2014, 35, 29–45.
- [17] Creswell, J.W. *Steps in Conducting a Scholarly Mixed Methods Study*. 2013. Available online: <https://pedevalguide.safestates.org/wp-content/uploads/2020/07/Steps-in-Conducting-a-Scholarly-Mixed-Methods-Study.pdf> (accessed on 22 May 2024).
- [18] Akinyode, B.F.; Khan, T.H. Step by step approach for qualitative data analysis. *Intern. J. Built Env. Sust.* 2018, 5, 163–174.
- [19] Ericson, K.M.; Zimmerman, C.M. A retrospective study of the clinical capstone experience on perceptions of practice readiness in associate degree student nurses and preceptors. *Teach. Learn. Nurs.* 2020, 15, 92–97.
- [20] Munroe, T.; Loerzel, V. Assessing nursing students' knowledge of genomic concepts and readiness for use in practice. *Nurse Educ.* 2016, 41, 86–89.
- [21] Musallam, E.; Flinders, B.A. Senior BSN students' confidence, comfort, and perception of readiness for clinical practice: The impacts of COVID-19. *Int. J. Nurs. Educ. Scholarsh.* 2021, 18, 20200097.

- [22] Davies, H.; Sundin, D.; Robinson, S.; Jacob, E. Does participation in extended immersive ward-based simulation improve the preparedness of undergraduate bachelor's degree nursing students to be ready for clinical practice as a registered nurse? An integrative literature review. *J. Clin. Nurs.* 2021, 30, 2897–2911.
- [23] Kerr, D.; Ratcliff, J.; Tabb, L.; Walter, R. Undergraduate nursing student perceptions of directed self-guidance in a learning laboratory: An educational strategy to enhance confidence and workplace readiness. *Nurse Educ. Pr.* 2020, 42, 102669.
- [24] Porter, J.; Morphet, J.; Missen, K.; Raymond, A. Preparation for high-acuity clinical placement: Confidence levels of final-year nursing students. *Adv. Med. Educ. Pr.* 2013, 4, 83–89.
- [25] Reid-Searl, K.; Crowley, K.; Anderson, C.; Blunt, N.; Cole, R.; Suraweera, D. A medical play experience: Preparing undergraduate nursing students for clinical practice. *Nurse Educ. Today* 2021, 100, 104821.
- [26] Johnstone, M.-J.; Kanitsaki, O.; Currie, T. The nature and implications of support in graduate nurse transition programs: An Australian study. *J. Prof. Nurs.* 2008, 24, 46–53.
- [27] Romyn, D.M.; Linton, N.; Giblin, C.; Hendrickson, B.; Limacher, L.H.; Murray, C.; Nordstrom, P.; Thauberger, G.; Vosburgh, D.; Vye-Rogers, L.; et al. Successful transition of the new graduate nurse. *Int. J. Nurs. Educ. Scholarsh.* 2009, 6, 34.
- [28] Boswell, C.; LONG, J.A. VALIDATING Graduate Student Programmatic Outcomes. *Nurs. Educ. Perspect. Natl. Leag. Nurs.* 2011, 32, 107–109.
- [29] Duchscher, J.B. A process of becoming: The stages of new nursing graduate professional role transition. *J. Contin. Educ. Nurs.* 2008, 39, 441–450.
- [30] Candela, L.; Bowles, C. Recent RN graduate perceptions of educational preparation. *Nurs. Educ. Perspect.* 2008, 29, 266–271.
- [31] Yanhua, C.; Watson, R. A review of clinical competence assessment in nursing. *Nurse Educ. Today* 2011, 31, 832–836.
- [32] Kavenuke, P.S.; Kinyota, M.; Kayombo, J.J. The critical thinking skills of prospective teachers: Investigating their systematicity, self-confidence and scepticism. *Think. Ski. Creat.* 2020, 37, 100677.
- [33] Turi, E.R.; McMenamin, A.; Wolk, C.B.; Poghosyan, L. Primary care provider confidence in addressing opioid use disorder: A concept analysis. *Res. Nurs. Health* 2023, 46, 263–273.
- [34] Osuji, J.; Onyiaapat, J.; El-Hussein, M.; Iheanacho, P.; Ogbogu, C.; Ubochi, N.; Obiekwu, A. "Relational Transformation": A Grounded Theory of the Processes Clinical Nurse-Educators (CNEs) Use to Assist Students Bridge the Theory-Practice Gap. *Am. J. Qual. Res.* 2019, 3, 71–86.
- [35] Graf, A.C.; Jacob, E.; Twigg, D.; Nattabi, B. Contemporary nursing graduates' transition to practice: A critical review of transition models. *J. Clin. Nurs.* 2020, 29, 3097–3107.
- [36] Bvumbwe, T.; Mtshali, N. Transition-to-practice guidelines: Enhancing the quality of nursing education. *Afr. J. Health Prof. Educ.* 2018, 10, 66–71.
- [37] Murray, M.; Sundin, D.; Cope, V. New graduate registered nurses' knowledge of patient safety and practice: A literature review. *J. Clin. Nurs.* 2018, 27, 31–47.
- [38] Beecher, C.; Devane, D.; White, M.; Greene, R.; Dowling, M. Concept development in Nursing and Midwifery: An overview of methodological approaches. *Int. J. Nurs. Pr.* 2019, 25, e12702

تقييم تأثير التدريب السريري على استعداد طلاب التمريض للممارسة المهنية: مراجعة شاملة

الملخص

الخلفية: أصبح الفجوة بين المعرفة النظرية المكتسبة في التعليم التمريضي والمهارات العملية المطلوبة في البيئات السريرية مصدر قلق كبير، مما قد يؤثر سلبًا على استعداد خريجي التمريض لممارسة المهنة. تُعرف هذه الفجوة، التي تُسمى غالبًا بفجوة النظرية والممارسة، بأنها قد تؤثر سلبًا على تقديم الرعاية الصحية وتساهم في نقص التمريض.

طريقة البحث: استخدمت هذه المراجعة منهجية استكشافية لتحليل الأدبيات من عام 1980 إلى 2023، مع التركيز على تأثير التخصصات السريرية على استعداد طلاب التمريض للممارسة. تم إجراء بحث منهجي عبر قواعد بيانات مثل CINAHL و PubMed و Embase، باستخدام كلمات مفتاحية تتعلق بالاستعداد السريري، وتعليم التمريض، وكفاءات الخريجين. تم تقييم الدراسات الرئيسية لمعرفة نتائجها بشأن فعالية التخصصات السريرية في تعزيز المهارات العملية والثقة لدى طلاب التمريض.

النتائج: حددت المراجعة مجموعة من العوامل التي تؤثر على الاستعداد السريري، بما في ذلك جودة التخصصات السريرية، والدعم المقدم خلال التدريب، ودمج المعرفة النظرية مع التجارب العملية. بينما أفادت العديد من الدراسات بتحسين الكفاءات السريرية ومستويات الثقة بين خريجي التمريض، لوحظت فروقات كبيرة في فعالية نماذج التخصص المختلفة.

الخلاصة: تؤكد النتائج على الدور الحاسم للتخصصات السريرية في إعداد طلاب التمريض لممارسة مهنية. لتعزيز الاستعداد، يجب على برامج التمريض إعطاء الأولوية للتجارب السريرية عالية الجودة، وتنفيذ هياكل دعم، وتعزيز الدمج بين التعلم النظري والعمل. هناك حاجة لمزيد من البحث لوضع مقاييس معيارية لتقييم الاستعداد السريري بين طلاب التمريض.

الكلمات المفتاحية: التخصصات السريرية، تعليم التمريض، الاستعداد للممارسة، فجوة النظرية والممارسة، كفاءات التمريض.