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Standardized Patients' Perception of Student Nurse Care Compared to Registered Nurse Care

Purpose and Literature Review

The research purpose was to explore patients' perspective of the care they received from student nurses compared to that of registered nurses. Modeling and Role Modeling (MRM) theory served as the theoretical framework; MRM seeks to understand the patient's perspective and guides nurses in assisting patients in the attainment of their goals with that understanding in mind (Erickson, 2006). The research questions were: 1) How do patients perceive student nurse care differs from registered nurse care? 2) What domains of nursing care provided by nursing students and registered nurses do patients perceive need improvement?

Research on hospitalized patients' perception of student nurse care revealed varied perceptions. Student nurses were viewed as caring, competent, and able to meet patients' needs (Mukumbang & Adejumo, 2014; Oskay, et al., 2015). On the other hand, patients also reported feeling uncomfortable when being cared for by students (Shakya and Aryal, 2018). Other research focused on patients' perception of hospitals or family care (Jha et al., 2008; Hudon et al., 2011) Research on Standardized Patients' (SP) perception of care provided by nursing students is lacking, revealing a gap in the literature.

Design, Sample, and Methodology

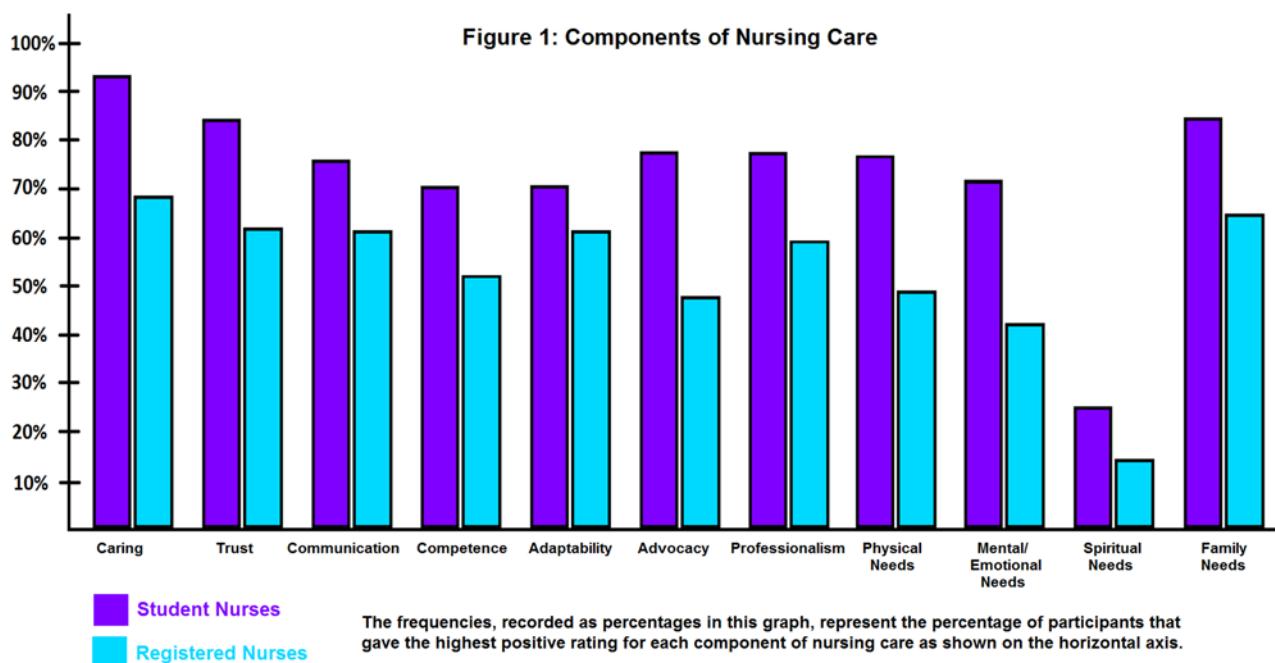
A mixed-method exploratory design was used to explore SP's perception of nursing care. SPs act as patients in clinically based simulations that nursing students participate in with clinical courses. A 22 item Likert scale (e.g., 1 = strongly agree, 2 = agree, 3 = disagree, 4 = strongly disagree) survey with 3 open-ended questions was developed using 11 patient care domains as the survey variables (e.g., caring, trust, competence, advocacy). All of these patient care domains are components of the Dishman School of Nursing (SON) curriculum. The participants rated student nurses (SN) and registered nurses (RN) on each domain; the possible total scores ranged from 11-44. A recruitment email, which contained a link to the Qualtrics survey, was sent to the SPs by the Director of the Dishman SON Simulation Center. The first page of the Qualtrics survey contained the informed

consent. Completion of the survey indicated agreement to participate. No IP addresses or any other identifying data was collected. Lamar University IRB approval was obtained prior to participant recruitment.

Thirteen out of the fifteen SPs employed by the SON completed the survey, resulting in a response rate of 87%. The participants' ages ranged from 60 – 79; the majority of participants (69%) had participated in a simulation within the past year. Ninety-two percent reported being hospitalized at least once in their lifetime and 54% reported being hospitalized within the past 5-10 years.

Analysis

The quantitative data was analyzed in SPSS statistical software using descriptive and parametric analysis. The qualitative data was analyzed using qualitative descriptive analysis. Analysis of frequencies and percentages for each individual nursing care domain revealed that student nurses scored higher in each domain compared to registered nurses. See Figure 1.



Total survey scores, representing all nursing care domains, were calculated for perception of student nurses and registered nurses; scores ranged from 11 – 22. The lower numeric value represents the highest agreement with the related nursing care domain. The total score was higher for student nurses. See Table 1. A paired sample t-test revealed a statistically significant difference ($t = -2.221, p = .048$) in mean total scores between student nurses ($M = 14.32$) and registered nurses ($M = 16.50$).

The qualitative data was gathered from the responses of eleven participants to the open-ended questions and was overall positive for student and registered nurses. In analyzing their answers, several concepts were found threaded throughout the SP's responses including anxiety, experience, time, confidence, and care. Registered nurses were generally described as more experienced, confident, and efficient. There were a few negative comments describing some registered nurses as “snoopy” or appearing “busy”. Student nurses were more often described as caring compared to registered nurses. Student nurses were also seen as more nervous, less confident, and slower in the provision of care compared to registered nurses. In several cases, SP's believed these qualities in student nurses to be a result of inexperience.

To improve care, participants suggested that student nurses be more calm in their manner and communication and continue their education. A common belief seemed to be that students would become better nurses with time. Others suggested that students need to be more professional, prepared, and disciplined. A suggestion was also made to place students in a “less controlled situation” each semester.

Discussion

The results were unexpected in that student nurse care frequently had higher scores than registered nurse care. Some reasons behind these results were provided by the participants and included: 1) The higher patient load carried by registered nurses, which reduces the time they are able to spend with individual patients and can potentially increase stress. 2) Registered nurses also do not know for certain what will happen; whereas student nurses are in a “controlled situation” so that if an error is made, there will not be consequences for a real person. This could also make it easier for patients to be more trusting of student nurses. 3) Student nurses are also being evaluated during the duration of care and must meet certain standards. Registered nurses, on the other hand, are not supervised this closely and may be held to different standards than students. In addition, students' anxiety and/or decreased level of confidence (compared to RN's) may also play a role in motivating students to be more careful or listen to their patient. Some of the participants' responses seemed to support this as they noted that students spent more time in general caring for and communicating with the SPs.

Table 1: Total Scores for Registered and Student Nurses

Total Score	Registered Nurses		Student Nurses	
	Frequency	Percentage	Frequency	Percentage
11 – 13	4	33.3	5	38.5
14 – 16	2	16.7	7	53.8
17 – 19	2	16.7	1	7.7
20 – 22	4	33.3	0	0
	Total: 12	Total: 100%	Total 13	Total: 100%
	M = 16.50 / SD = 3.75		M = 14.32 / SD = 2.02	

Scoring Range = 11 – 44

Results Range = 11 – 22

M = Mean Total Score

SD = Standard Deviation

Lowest Numeric Value = Highest Quality of Care

Highest Numeric Value = Lowest Quality of Care

Implications

The results showed that, for every component of nursing care, 60% or more of participants perceived student nurses provided very high quality care. The only exception was in regards to SPs spiritual needs. Only 23.1% of participants felt that student nurses did very well in this area. This may indicate the need for a stronger emphasis on spiritual care in nursing education. Another implication is the need for improvement among registered nurses as the scores for their care were generally lower than those of student nurse care. The results appear to suggest that maintaining the standards that student nurses are held to may improve registered nurse care. A limitation to this study was the small sample size, which limits the generalizability of the results.

Possible Continuation

There is certainly a possibility of continuing this research in the future on a wider scale. I have learned a significant amount about the research process as well as patients' perceptions of nursing care. My hope is to conduct a study with the same goals on a larger scale by using a sample of hospitalized patients. I believe this could provide more detailed information on patients' perception of nursing care and ways to improve both the clinical and educational aspects of nursing.

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