



Clinical education

Clinical supervision in perioperative nursing education in Sweden – A questionnaire study

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1. Introduction

Supervision is a key element in the clinical learning environment of the placement (internship) in the study programme for specialist nursing with a specialization in perioperative care. Investigations into students' experience through various approaches are an important part of understanding and developing education. In a university teaching context, these investigations together with research in several other areas contribute to increased education quality (Kristofferzon et al., 2013).

A central strategy to promote learning and development of practical skills and competencies in the study programme for specialist nursing is "Workplace learning". Here the student has the opportunity to integrate theoretical knowledge with practical pursuit, to apply and experience the real meaning of theory and theoretical models and to practice professional conduct and accountability (Biggs and Tang, 2011; Morris, 2010; Teunissen and Wilkinson, 2011). In Sweden, the concept of work-integrated learning is used. This is an educational method that emphasizes the significance of promoting the integration of theory and practice from a pedagogical perspective. The method highlights supervision as an important educational effort (Scully, 2011). The students describe the preceptor and the supervision as important parts of the clinical practice. It is shown that the relationship with the clinical preceptor as well as the educational atmosphere of the

clinical placement has a major impact on the students' perceived study motivation (Bos et al., 2015; Wilkes, 2006). Similar results also emerged in a review of studies on how nursing students viewed at the nurse's role as a clinical preceptor (McClure and Black, 2013).

Supervision in the clinical education can be described using two models: the master-apprentice model and the reflective supervision model. The first emphasizes a process in which the apprentice through participation in a socio-cultural context and its activities learns in interaction with a master. Exercise and imitation are essential elements; the learner shows that he/she can perform tasks correctly and gets feedback from the master. In the reflective supervision model, the learner's own knowledge, experience and background are important for learning rather than the social context's culture. The goal of reflection is increased insight and perspective on the clinical issues. The model is effective in helping persons to verbalize tacit knowledge so that it can be brought to light, examined and valued rather than simply passed on (Jerlock et al., 2003).

A Swedish study examining recently graduated perioperative nurses' experience of clinical supervision in specialist education found that the participants experienced a gap between the theoretical part of the university and the clinical education which did not always respond to the academic level required for specialized training at an advanced level. The results also showed that the quality of supervision varied and that the individual preceptors in many cases was crucial to how students experienced clinical training (Lannér and Teledahl, 2011).

Perioperative nursing education in Sweden is a specialist nursing programme leading to specialization of a registered nurse with a previous bachelor degree. The one year programme consists of both theoretical courses and clinical rotation and results in a master degree in nursing and a professional title protected by law. This has only been the case in recent years, earlier the education only led to a specialization and not to a higher academic degree. The clinical education is carried out at various hospitals connected to universities and may vary in content and extent between different university study programmes. In order to enhance cooperation and collaboration between the university and the clinical setting many healthcare organizations and universities have

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introduced a function called head preceptor who is an adjunct clinical lecturer. The head preceptor is a clinically active registered nurse that supports the supervising nurse by planning the clinical placements and undertaking student introductions, facilitating student learning through reflective discussions and supporting the preceptor in training situations and examinations. The head preceptor is a connecting link between the university and the clinical setting (SLL Landsting, 2014).

An evaluation of the quality of all study programmes in specialist nursing made by the Swedish Higher Education Authority (abbreviated as UKÄ in Sweden) 2014 showed that several universities received the overall assessment of inadequate quality. In several cases this was motivated by the fact that students according to UKÄ demonstrated low performance of achievement in integrated theoretical knowledge with practical action (UKÄ, 2014). In the study programme for specialist nursing specializing in perioperative nursing the evaluation led to a process where extensive work was done to improve and change the content of the curriculum.

The aim of this study was to examine newly graduated perioperative nurses' perception of clinical supervision in clinical education in Sweden.

2. Methods

2.1. Design

The design was a cross-sectional study with a quantitative approach based on questionnaires.

2.2. Participants

A request was sent to all universities in Sweden offering education in perioperative nursing to perioperative nurses who graduated from five universities, in the summer of 2014. In total, 95 questionnaires were sent, five of which were returned due to invalid address. The total number of respondents after a reminder was 49, which resulted in a response rate of 54 percent.

The participants were between 26 and 53 years old and had been working between zero and 15 years as a registered nurse before beginning the education. The majority of the participants were female ($n = 43$, 88%).

2.3. Data collection

The participants received a letter including an information sheet, a questionnaire and a stamped return envelope. The information sheet described the purpose of the study and clarified that participation was voluntary and confidential. The questionnaire was provided with a code so that reminders could be sent out which was also mentioned in the information sheet. A reminder was sent after approximately one month if no reply had been received.

2.4. Questionnaire

The questionnaire used in this study was a modified version of a questionnaire on supervision of clinical education for nurses who had completed courses in supervision. The original questionnaire was created by Kauffeldt and Velander-Sundin (2009) and was modified for newly graduated perioperative nurses by Lannér and Teledahl (2011). The questionnaire consists of 40 questions involving the supervision process, the supervisor's capability and the contents of the supervision. The questionnaire also includes questions regarding the perioperative learning environment, but

the result of those questions will not be reported in this paper. The rating options of the items were: 'not at all', 'to some extent', 'to a large extent' and 'to a very large extent'. The response options were not scored in the questionnaire.

2.5. Statistical analysis

The collected data were on an ordinal and nominal level. Data were analysed descriptively and presented in tables and histograms using SPSS 22.0 (Statistical Package for the Social Sciences). In addition, a significance analysis with dichotomized variables was performed using Pearson's χ^2 -test. For the variable "time available for supervision" the response options "to a large extent" and "to a very large extent" formed the group *large extent* and "not at all" and "to a small extent" formed the group *some extent*. For the variable "educational level of preceptor" the response option "Master or higher Degree" formed group number 1 and all other response options except "Do not know" formed group number 2. The significance level was set at 0.05.

2.6. Ethical considerations

Participation was voluntary and completely confidential as emphasized in the supplied information letter. The questionnaires were coded purely for administrative reasons which were also described in the information letter. Data on the encoding and the forms sent back were handled solely by the research group and kept inaccessible to outsiders. All data were recorded and managed in accordance with the Swedish Data Protection Act (SFS, 1998:204). No results are presented in such a way that participants, staff or institutions can be identified. Written informed consent was considered given by the participants through filling out the form and returning it.

Implementation of the study followed good scientific practice and ethical principles in accordance to the Helsinki declaration. It was decided that application for formal ethical permission from the local Ethics Committee was not required since the study addressed graduated perioperative nurses who were no longer under any dependency as students and whose skills and ability to acquire information on the research was considered to be adequate.

3. Results

3.1. Organization of the clinical education

Total amount of weeks in clinical education differed largely between the respondents and ranged from nine to 18 weeks. Forty-three respondents (88%) answered that there was a head preceptor present at the clinical setting, and 28 respondents (57%) replied that they had been supported by this to a large or very large extent. Twenty-one respondents (43%) replied that they perceived that their preceptors collaborated with the head preceptor during assessments of the students' academic performance in the placement to a large or very large extent.

To the question of how often the respondents were given time for conversation with the university clinical teachers or the head preceptor, a majority of the participants replied that they were given time in connection with the mid-term and final evaluation. Fewer replied that they had received time for conversation as an activity as such (Table 1).

3.2. Supervision strategies and contents

Nineteen respondents (39%) replied that their preceptors possessed large or very large familiarity with the contents of the

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