ORIGINAL RESEARCH ARTICLE

Nursing preceptorship in Ekiti State, Southwest Nigeria: Perceptions of nursing students and clinical preceptors

DOI: 10.29063/ajrh2023/v27i6s.7

Oluwaseyi A. Akpor[1], Titilayo O. Tope-Ajayi[2], Fatimah A. Muhammad[3], Moyinoluwa G. Dada[1], Kehinde D. Aremu[1], Olugbenga Aina[4], Florence T. Olukolade[3], Olaolorunpo Olorunfemi[5], Theresa O. Bamigboye[1]*

Department of Nursing Science, Afe Babalola University, Ado-Ekiti, Ekiti State, Nigeria. Student Affairs' Unit[1]; Federal Teaching Hospital, Ido Ekiti, Ekiti State, Nigeria[2]; Nursing Service Unit, Afe Babalola University Multisystem Hospital, Ado-Ekiti, Ekiti State[3]; School of Nursing, Ekiti State University Teaching Hospital, Ado Ekiti, Nigeria[4]; Department of Medical Surgical Nursing, Faculty of Basic Medical Science, Federal University, Oye-Ekiti, Ekiti State, Nigeria[5]

***For Correspondence:** Email: *akporoa@abuad.edu.ng*; Phone: +2347068531599

Abstract

Nursing preceptors play a vital role in providing skills-oriented opportunities for students in the clinical environment. This study assessed the perceptions of nursing students regarding the clinical learning experience provided by preceptors, and the perceptions of nursing preceptors regarding their roles in ensuring beneficial clinical accompaniment in the three nursing institutions in Ekiti State, Southwestern Nigeria. A concurrent mixed-methods design consisting of a survey and semi-structured interviews were used. A multistage (consecutive, purposive, and convenience) sampling technique was used to obtain quantitative data from 120 nursing students and qualitative data from 20 preceptors. Data were analyzed using descriptive and thematic content analysis. Findings showed that overall students' perceptions of the clinical learning experience were good (92%), 91.7% of the students wanted direct supervision and inadequate support was reported due to the low preceptor-to-student ratio. Preceptors acknowledged that clinical accompaniment is one of their roles, challenges mentioned include few number of preceptors, lack of policy requirements to guide their duties, and limited equipment. We conclude that there is a need to provide adequate preceptors in clinical settings, as they are vital to the training of nurses. A unified policy and standardized procedure manual will improve the quality of the delivery of preceptorships in training institutions. *(Afr J Reprod Health 2023; 27[6s]: 51-59).*

Keywords: Accompaniment, preceptors, training, institution, procedure manual

Résumé

Les précepteurs en soins infirmiers jouent un rôle essentiel en offrant des opportunités axées sur les compétences aux étudiants en milieu clinique. Cette étude a évalué les perceptions des étudiants en soins infirmiers concernant l'expérience d'apprentissage clinique fournie par les précepteurs, et les perceptions des précepteurs en soins infirmiers concernant leurs rôles pour assurer un accompagnement clinique bénéfique dans les trois établissements de soins infirmiers de l'État d'Ekiti, au sud-ouest du Nigéria. Une conception simultanée à méthodes mixtes consistant en une enquête et des entretiens semi-structurés a été utilisée. Une technique d'échantillonnage à plusieurs degrés (consécutif, téléologique et de commodité) a été utilisée pour obtenir des données quantitatives auprès de 120 étudiants en soins infirmiers et des données qualitatives auprès de 20 précepteurs. Les données ont été analysées à l'aide d'une analyse de contenu descriptive et thématique. Les résultats ont montré que les perceptions globales des étudiants de l'expérience d'apprentissage clinique étaient bonnes (92 %), 91,7 % des étudiants souhaitaient une supervision directe et un soutien inadéquat a été signalé en raison du faible ratio précepteur-étudiant. Les précepteurs ont reconnu que l'accompagnement clinique est l'un de leurs rôles, les défis mentionnés incluent le petit nombre de précepteurs, le manque d'exigences politiques pour guider leurs tâches et l'équipement limité. Nous concluons qu'il est nécessaire de fournir des précepteurs adéquats en milieu clinique, car ils sont essentiels à la formation des infirmières. Une politique unifiée et un manuel de procédure normalisé amélioreront la qualité de la prestation des préceptorats dans les établissements de formation. *(Afr J Reprod Health 2023; 27[6s]: 51-59).*

Mots-clés: Accompagnement, précepteurs, formation, établissement, manuel de procedures

Introduction

Learning experience in the clinical field is an important component of nursing education, considering that nursing is a practice-based profession that derives from theoretical knowledge[1,2]. Nursing education starts with the acquisition of basic scientific knowledge and is

incomplete if these scientific principles are not put into actual practice in real-life situations[1,3,4]. The competence needed to handle life situations cannot be fully actualized in the classroom alone; hence, the need for clinical experience that is properly guided by highly seasoned nurses known as preceptors in clinical settings. In order to ensure the integration of theory into practice and the acquisition of critical skills necessary for clinical decision-making, nursing students (preceptees) are required to spend a certain amount of time in the clinical environment under the supervision of nursing preceptors[5]. In the clinical area, the learning experiences of nursing students are influenced by teachings from experienced lecturers, nursing preceptors, and other medical professionals, these interactions could either improve or impede their clinical performances[6,7].

The quality of clinical experiences that student nurses receive is a function of a positive practice environment and the correct application of knowledge and skills fostered by preceptors. Preceptorship is aimed at assisting student nurses to gather the necessary practical and professional skills pertaining to clinical practice[8]. Students' perceptions of clinical experiences and preceptorship can be influenced by factors including assumptions and expectations, character traits, self-concept, values, preconceived notions, education, and past experiences. The establishment of an efficient learning environment where theory and practice can complement each other is dependent on the clinical staff and nurse educators as well as the intended learning outcome of the students[3]. Studies[6,9-11], have shown that various challenges experienced by preceptors and students in the clinical environment cause hindrances to the attainment of set goals. These challenges include difficulties in applying theory to practise, a lack of adequate preceptors, a lack of equipment for practice in the clinical area, insufficient time for clinical evaluation, and the non-completion of theoretical learning and practical demonstration prior to clinical postings. Furthermore, students' negative attitudes and behaviors exacerbate the frustration of clinical supervisors. Various studies have explored the perception of students regarding preceptors[12,13]; however, there have been limited studies focusing on the perception of preceptors and preceptees about preceptorship in the clinical area. Hence, this study was designed to explore the perceptions of preceptors and nursing students about preceptorship in nursing training institutions in Ekiti State, Southwest Nigeria.

Methods

Study design

The study utilised a concurrent mixed-methods design. Quantitative and qualitative data were collected within the same time, analyzed separately, and the results triangulated. The quantitative aspect of this study elucidated responses on student nurses' perceptions on clinical accompaniment, while the qualitative component provided information on the perceptions of preceptors on their roles in the provision of beneficial clinical accompaniment to nursing students. The rationale for choosing this approach is to help corroborate the findings from the different methods and provide information for a robust and reliable conclusion.

Study settings and population

The study settings consisted of a university and the two schools of nursing in Ekiti State namely; Department of Nursing Science, Afe Babalola University Ado-Ekiti (ABUAD), School of Nursing, Ido-Ekiti and School of Nursing, Ekiti State University Teaching Hospital, Ado Ekiti. The preceptors attached to the tertiary hospitals where the students are usually posted for their clinical practice were also recruited to the study. Two of the three nursing institutions are located in the state capital, Ado-Ekiti while the third institution is located at Udo-Osi local government area of the State (Ido-Ekiti). Nursing students in the penultimate and final year of their study were recruited for the survey as they have been exposed to clinical training, while preceptors who regularly trained students during clinical accompaniment were interviewed.

Sample size and sampling technique

The target population for the survey included final year students in the schools of nursing and 400–500-level students in the department of nursing. A multistage sampling technique was used for the study. The first stage involved the consecutive sampling of the three nursing institutions in Ekiti State. In the second stage, purposive sampling

technique was utilized to select the academic level of the students in the three (3) schools, while stratified sampling was used in the third stage to calculate the number of respondents to be taken from each nursing institution. According to the records obtained from the three institutions, the estimated target population was 155. The stratifying attribute for this study was the average number of students at the desired levels. Calculation using Yamane Taro's formula ($n = N/ [1+N (e)^2]$) yielded a sample size of 112. This was increased by a 10% attrition rate to guide against non-response, yielding a final sample size of 123. In the third stage, data was collected from 120 students who responded to the survey.

As regards the qualitative component of the study, the target population were preceptors in the three tertiary hospitals where nursing students had clinical postings, and the estimated number of preceptors was 30. The tertiary hospitals are; Afe Babalola University Multisystem Hospital, Ado-Ekiti (AMSH), Federal Teaching Hospital, Ido-Ekiti (FETHI) and Ekiti State University Teaching Hospital (EKSUTH). Consecutive and purposive sampling techniques were used to guide the recruitment of 20 preceptors. Criteria for inclusion in the study were; being a preceptor for up to a year and more and having the willingness to participate in the study. Appointments were booked with the participants through the nursing education unit of the hospital. To confirm participants' availability, physical visits and follow-up phone calls were made. All the participants who gave their consent were interviewed.

The sample size for the study was determined by data saturation while paying attention to the scope of the study and the quality of the data obtained. Interviews were conducted with the participant and the researcher in a private office within the hospital at prearranged times. Participants were recruited for two months.

Quantitative data collection and analysis

The researchers met with the students at their various institutions, and informed consent was sought. A semi-structured, self-administered questionnaire was utilized. The questionnaire consisted of subsections assessing socio-demographic profiles and nursing students' perceptions of clinical accompaniment. Section A contained questions used to collect socio-demographic data from participants; Section B contained questions relating to nursing students' awareness of preceptorship principles; and Sections C and D contained questions that evaluated factors that influenced clinical learning experiences. Perception and experience questions were quantified using a 4-point Likert scale and also using Yes/No questions. The questionnaire was examined by experts in the field to ensure content validity and was pretested on a convenience sample (n=12) prior to administration. The data was collected over a period of 8 weeks, and the questionnaires were further checked for completeness and consistency. Nursing students' class representatives were contacted and asked to distribute the questionnaire to their classmates. Data were then coded, entered, cleaned, and analyzed using SPSS software version 23 and presented in tables and charts. Descriptive statistics, which included frequency and proportions were used to summarize sociodemographic characteristics. The aggregate students' perception was analyzed by categorizing the score into good (average score and above) and poor (below average score).

Qualitative data collection and analysis

All interviews were conducted face-to face and in English language. Semi-structured interviews were conducted to obtain data from the preceptors regarding their roles, experiences as well as factors hindering optimum role performance. Interview guides comprising of open-ended questions were utilized during the sessions which all lasted between 30-45 minutes. The guide was developed by the researchers with reference to the objectives of the study; afterwards, the instrument was reviewed by experts in the field for content and feedback. The interview guide included questions about preceptors' awareness of their tasks during clinical accompaniment, as well as questions about barriers and enabling variables impacting preceptors' practices during clinical accompaniment of nursing students. The interviews were digitally recorded, transcribed verbatim checked for accuracy. Data was transcribed by the researchers immediately after data collection. Data analysis was done using content analysis following Tesch's approach. The narrative gathered from each

theme was analyzed using open coding. Data quality was maintained by ensuring credibility, conformability, authenticity and transferability.

Ethical consideration

Ethical approval to conduct this research was obtained from the Department of Nursing Science Afe Babalola University, Ado-Ekiti, School of Nursing Ido- Ekiti and School of Nursing Ado Ekiti, Ekiti State with ethical clearance number AB/EC/20/03/115, ERC/2020/10/05/420B and EKSUTH/A67/2020/10/008 respectively. Also, ethical approval was obtained from the corresponding tertiary institutions namely; ABUAD multisystem Hospital, Federal teaching Hospital, Ido-Ekiti and Ekiti State University Teaching Hospital with protocol number; AB/EC/20/20/97, ERC/2020/10/05/419B and EKSUTH/A67/2020/10/009 respectively. Formal permission was also sought and obtained from the participants with explanation of the reason for conducting the research before the questionnaire was administered. Participants were assured that all information provided by them will be treated with utmost confidentiality and used strictly for research purpose.

Results

The results are reported in two sections; results of the quantitative survey with nursing students and the qualitative interview with preceptors.

Quantitative results

General characteristics of participants

Slightly above half (53.3%) of the participants were within the age group of 21-25 years, the majority (87.5%) were females and 32.5% were in their third year of study (Table 1).

Nursing students' perception on effective preceptorship

As shown in Table 2, more than two third (79.2%) of the respondents agreed that clinical experience and preceptorship are necessary for strengthening clinical skills in nursing education. The majority

Table1: Socio-demographic characteristics of the student nurses

Variables	Categories	Frequency (n=120)	Percentage (%)
Gender	Male	15	12.5
	Female	105	87.5
Age	16-20 years	38	31.7
	21-25 years	64	53.3
	26-30 years	18	15.0
Religion	Christian	101	84.2
	Muslim	16	13.3
	Traditional	3	2.5
Educational level	Final year SON	59	49
	400 level	38	32
	500 level	23	19
Which of the listed Institutions	ABUAD SON	61	50.8
	EKSUTH SON	30	25
	FETHI SON	29	24.2
	Total	120	100.0

(66.9%) of the participants claimed that during clinical accompaniments, it is more productive to be allocated to a preceptor who is responsible for coordinating and supervising their learning experiences in order to achieve desired outcomes. A good number of the participants agreed that nursing students are encouraged, criticized, corrected and assisted to identify their limitations and strengths in the clinical area. Over 90% of the participants reported that they want direct supervision from preceptors and stated that they face inadequate support due to high students to preceptor ratio. Furthermore, when asked about their expectations of preceptors, 97.5% of the students agree that preceptors possess certain attributes and skills such as caring, compassion, professionalism as well as leadership and problem-solving skills. Also, well above half (67%) of the nursing students stated that they had problems integrating what was taught in the classrooms into clinical situations. Overall, aggregate score of students' perception about effectiveness of preceptorship in nursing was good (92%) and 94.2% of the students suggested 1:3 as the ideal ratio of preceptor to students as depicted in Figures 1 and 2 respectively.

Table 2: Nursing student's perception on clinical accompaniment

Variables	Categories		
	Agree	Disagree	Undecided
Clinical experience and preceptorship is necessary for strengthening clinical skills in nursing students	95 (79.2%)	20 (16.7%)	5 (4.1%)
It is more productive to be allocated to a preceptor who was responsible for coordinating and supervising their learning experiences in order to achieve desired outcomes	80 (66.7%)	10 (8.3%)	30 (25.0%)
Nursing students are encouraged, criticized, corrected and assisted to identify their limitations and strengths in the clinical area	85 (70.2%)	32 (26.4%)	3 (2.5%)
Direct supervision from preceptors is the best for optimal learning	110 (91.7%)	7 (5.8%)	3 (2.5%)
Preceptors should possess certain attributes and skills such as caring, compassion, professionalism as well as leadership and problem-solving skills	117 (97.5%)	0 (0.0%)	3 (2.5%)
There are problems integrating what was taught in the classrooms into clinical situations	67 (55.4%)	49 (40.5%)	4 (3.3%)
There is inadequate support due to deficient preceptor to student ratio	110 (91.7%)	7 (5.8%)	3 (2.5%)

Qualitative results

General characteristics of participants

As shown in Table 3, 45% of the participants were within the age range of 30-39 years. The proportion of female preceptors was higher than males (95% compared to 5%). More than half of the participants belonged to the rank of Principal Nursing Officer to Chief Nursing Officer (CNO). Majority (75%) of the population had practiced for up to 10 years.

Emerged themes

The qualitative findings of this study are presented according to the themes generated. Three themes emerged from the data, namely: perception of nursing preceptors on preceptorship, protocols for preceptorship, and factors influencing role performance of preceptors.

Theme 1: Perception of nursing preceptors on preceptorship

Participants opinions on their roles as preceptors included supporting, monitoring and overseeing nursing students during clinical attachment. One of the participants during the interview said:
"Clinical preceptors are to supersede the students, oversee them, take them round the clinical aspect, monitor and guide them to practice the things they have been thought in school, make the students used to the equipment they have been thought in school, be able to apply nursing care plan, see to the welfare of the students" (P3)

Also, participants were asked about the appropriateness of clinical accompaniment in institutions, about half of the preceptors (11 of 20) acknowledged that preceptorship has been optimum. Some of their responses include:
"There has been no failure recorded in practical exams" (P16)
"Yes its effective, I have met so many of my students, practicing and they are really doing well, its effective if the student is ready to stay and gain what we the preceptors want to teach" (P8)

Inquiring further, participants were asked the extent to which desired goals of clinical accompaniment are met and (8 of 20) stated that the goals were 60-75% met. Some comments were
"I will say it's good, but in terms of percentage I can say (70%)" (P17)
As for me I would say fairly achieved, in percentage I will say between (60-65%) (P5)
Some (10 of 20) participants noted that lack of sufficient preceptors and equipment to teach students deterred the quality of teaching being provided by the preceptors. The following are some of the responses from the participants:

Table 3: Demographic profile of preceptors (n=20)

VARIABLES	FREQ(N=20)
Age:	
20-29	5
30-39	9
40-49	6
Sex :	
Females	19
Males	1
Religion:	
Christianity	14
Islam	6
Ethnicity:	
Yoruba	19
Others	1
Professional status:	
NO1-SNO	9
PNO-CNO	11
Place of work	
EKSUTH	11
FETHI	6
AMSH	3
Years of practice	
0-10	5
11-20	11
21-30	4

NO1- Nursing officer 1, SNO-Senior Nursing officer, PNO-Principal Nursing officer, CNO- Chief Nursing Officer

"When considering the numbers of students we are having this days, there is no way the preceptors will be adequate for quality training" (P5)
"The equipment's are not available, for putting the students through you just have to improvise" (P16)
"Instrument needed are not available and there are limited preceptors, the time given to them ais not enough to teach the students" (P2).

Theme 2: Protocols for preceptorship

When asked if there were any existing guides for preceptorship, all the preceptors said no unified policy and standardized procedure manual that can serve as a guide for teaching in their institutions, some comments were:
"I would say no, that is part of what is still lacking I do not think the Nursing Council have a standard guide, each management is just using their discretions on what to do" (P5)
"No, it depends on the procedure manual of the students, so that will guide the preceptor, because what is required of the student will be in their manual so that will guide us on what to teach or tell the students" (P15)
"No, there isn't any standardized practical policy guideline in my institution, one of the issues we have is various health care professionals and their school of thought, for example lets pick wound dressing, it differs on the way it's done on different institution, so I won't say there is a standardized practical policy guideline" (P3)
When asked about suggestions on improving preceptorship, some participants said:
"There should be a unified policy and regular training for the preceptors and the school in collaboration with the hospital management, motivation for the preceptors and support from the school and the management" (P10).

Theme 3: Factors hindering role performance of preceptors

Participants stated that restrictions from the institutions, limited equipment and non-cooperative attitude of the students all negatively affected their roles. Some of their responses include:
"We used to improvise almost all basic equipment when demonstrating clinical procedures for the students" (P19)
"No enough instruments, lack of co-operation from nurses on the ward" (P10)
"When there are restrictions of the students from coming to the ward or spending little time on the ward, inadequate preceptors and lack of encouragement from the school" (P3)
"Some students have care-free and irresponsible attitude, some don't bring jotter, and the number of students sent for clinical posting is also large, also, a separate demonstration room is needed in the hospital" (P4)

Discussion

According to Bickhoff *et al.*[14], clinical placements are planned to provide the necessary avenues for students to integrate their theoretical knowledge with practice. These practices should build students' confidence, knowledge, and professional identity and also help to strengthen their clinical skills. This is in line with the report of this study, as both the preceptors and students stated that clinical preceptorship is the act of providing clinical knowledge to nursing students through supervision, monitoring, and teaching of clinical and professional skills. The overall perception of both the students and the preceptors was good. This could mean that both students and preceptors embrace preceptorship in nursing practice.

Previous studies[11,15] have shown that preceptor-preceptee relationships thrive when both parties are aware of their responsibilities. These include making the required efforts to fulfil expectations, preceptors spending more time with their preceptees, and making efforts to know them so as to foster positive relationships between both parties. Findings in this study revealed that both nursing students and preceptors agreed that it is more productive to be assigned to a preceptor who will be responsible for coordinating and supervising their learning experiences in order to achieve desired learning outcomes. This was also suggested by Omer and Moola[12] who reported in their study that having positive preceptorship relationships helped nursing students feel a sense of belonging and aided their successful transition into the nursing profession. In this study, the majority of the nursing students agreed that they wanted preceptors who possessed certain attributes and skills such as caring, compassion, professionalism, leadership, and problem-solving skills, while preceptors wished that students were more disciplined and showed less carefree attitudes. These could form part of the yardstick for the development of policies that should guide preceptorship in nursing practice.

The findings from this study revealed that a shortage of preceptors in the clinical areas caused inadequate supervision of nursing students during their clinical postings. Participants noted that too many students in the clinical area often led to inadequate supervision by the preceptors. Both students and preceptors stated that there is a huge gap in the preceptor-student ratio. Similar studies conducted by Mhango *et al.*[9] and Monareng *et al.*[18] also revealed that an inadequate number of preceptors made preceptorship tedious and non-productive, which consequently resulted in an increased work load on the available preceptors. The preceptorship model designed by Florence Nightingale recommends that each student be attached to one preceptor, or one preceptor should supervise only a handful of student nurses[16,17]. In this study, however, 94.2% of the students suggested 1:3 as the ideal ratio of preceptor to students. Getting 1 to 1 preceptor- student ratio may not be feasible, especially in the era of an international shortage of nurses. On balance, however, it is recommended that the ratio be 1-4 to be on the same page with the WHO recommendation of one nurse to four patients.

Pertinent to the findings of this study, participants noted that there were differences in opinions on the mode of practice of some clinical skills between preceptors and nursing students. Preceptors attributed these occurrences to a lack of unified policies and standardized procedure manuals for teaching. The results of this study are consistent with those of another study that indicates that differences in the approach to clinical procedures could hinder a successful preceptor-student relationship[11]. Maginnis and Craxon[19] defined the theory practice gap as the disparity between what students are taught in a formal classroom setting and what is practiced in the clinical setting. In a study conducted in Namibia, nursing students stated that inconsistencies between theory and practice in the clinical setting led to feelings of discouragement and often caused confusion between them and preceptors[20]. The current study participants also reported having problems integrating what was taught in the classroom into clinical situations. This could also be a signal that precepting student nurses during clinical postings is indispensable.

The study also revealed that a lack of adequate equipment in clinical areas for students to practise with impeded them from developing clinical competence. Preceptors frequently mentioned having to improvise with lacking equipment when teaching students. These findings are comparable with similar studies[6,10] conducted in Addis Ababa, Ethiopia and Nigeria, which showed that a shortage of clinical equipment hampered students' ability to practise. As the survey found, certain nurses on the ward's lack of cooperation and some students' carefree attitude require crucial attention and modification. All of these could have negative impact on providing appropriate training to students, resulting in half-baked nurses in the future which can be detrimental to public health. High-fidelity simulation has recently been a prominent tool in nursing education; simulation can take the form of manikins or role-playing. According to Sanford[21], there is a scarcity of evidence-based research supporting the concept that using simulation in teaching leads to better learning experiences. There are just as many instructors who advocate the use of simulators as there are those who oppose it, with the latter claiming that simulation using manikins and high-fidelity simulations have limitations and take up a lot of time. These findings indicate the need for

additional study in this area to establish whether simulation can improve learning experiences for nursing students who are undertaking clinical accompaniment.

Conclusion and recommendations

The study concluded that both the students and preceptors have good perception about preceptorship and acknowledged it is important to have adequate receptors that could produce well-nourished students and then seasoned nurses. However, lack of unified policy and standardized procedure manual, inadequate preceptors and lack of equipment hindered the preceptorship. Therefore, there is need for a unified policy and standardized procedure manual developed by the Nursing and Midwifery Council of Nigeria to aid uniformity in the teaching clinical skills to nursing students and also, effort should be made for more preceptors in the clinical training of student nurses for quality, effective and efficient care in Ekiti State and in Nigeria at large.

Acknowledgement

The authors are grateful to the Management of Afe Babalola University, Ado-Ekiti, Ekiti State, Nigeria for supporting this investigation. Also, special appreciation the students and preceptors who took part in this study.

Competing interest

The authors also declare that they have no competing interests.

Author contributions

All authors contributed to conception and design of the study. OAA. TOT, FAM, MGD AND KDA were involved in the study conceptualisation, data collection and analysis. Literature review and critical appraisal of included studies was done by OA, FTO, OO AND TOB. OAA supervised the work. TOT, FAM and OO drafted the manuscript and all authors have reviewed the manuscript. All authors read and approved the final manuscript.

References

1. Santa De PM and Bera LP. Nursing student's clinical learning experiences and the barriers faced. International Editorial Advisory Board 2016;8(2): 169.
2. Kaphagawani NC and Useh U. Analysis of nursing students learning experiences in clinical practice: Literature review. Studies on Ethno-Medicine 2013;7(3): 181-185.
3. Phuma-Ngaiyaye E, Bvumbwe T and Chipeta MC. Using preceptors to improve nursing students' clinical learning outcomes: A Malawian students' perspective. International Journal of Nursing Sciences 2017;4(2): 164-168.
4. Khoza LB. Nursing students' perception of clinical learning experiences. Journal of Human Ecology 2015;51(1-2): 103-110.
5. Mbakaya BC. Nursing and Midwifery Students' Perception of their Clinical Learning environment in Malawi. A mixed-Method study. BMC Nursing Journal 2020;19(87).
6. Berhe S and Gebretensaye T. Nursing students' challenges towards clinical learning environment at the school of nursing and Midwifery in Addis Ababa University. A qualitative study. International Journal of Africa Nursing Sciences 2021;15, 100378.
7. Allari RS and Farag MK. Nursing students' expectations regarding clinical training: a qualitative study. International Journal of Nursing 2017;7(3), 63-70.
8. Mhango L, Baluwa M and Chirwa E. The Challenges of Precepting Undergraduate Nursing Students in Malawi. Advances in Medical Education and Practice 2021;12: 557.
9. Nielsen K, Finderup J, Brahe L. Elgaard R, Elsborg AM, Engell-Soerensen V and Ellipsis Sommer I. The art of preceptorship. A qualitative study. Nurse Education in Practice 2017;26: 39–45. http://dx.doi.org/10.1016/j.nepr.2017.06.009.
10. Anarado AN, Agu GU and Nwonu EI. Factors hindering clinical training of students in selected nursing educational institutions in Southeastern Nigeria. Nurse Education Today 2016;40: 140-145.
11. Matua GA, Seshan V, Savithri R and Fronda DC. Challenges and strategies for building and maintaining effective preceptor-preceptee relationships among nurses. Sultan Qaboos University Medical Journal 2014;14(4): e530.
12. Omer TY and Moola SM. The Importance of the preceptor-preceptee relationship in creating well prepared professionals: A make or break experience. Global Journal of Health Science 2019;11(1).
13. Kristofferzon ML, Mårtensson G, Mamhidir AG and Löfmark A. Nursing students' perceptions of clinical supervision: The contributions of preceptors, head preceptors and clinical lecturers. Nurse Education Today, 2013;33(10): 1252-1257.
14. Bickhoff L, Levett-Jones T and Sinclair P. Rocking the boat—nursing students' stories of moral courage: A qualitative descriptive study. Nurse Education Today 2015;42: 35-40.
15. Gopee N. Mentoring and Supervision in Healthcare. 2nd ed. London, UK: Sage Publications Ltd. 2015; 2011: 8–13.
16. Kaniaru D, Nyagena E, Kathuri N and Chebor A.

Perception of preceptor and student nurse partnership on clinical teaching and learning. American Journal of Nursing Science 2016;5(4): 141-145.

17. Phillips SJ and Kaempfer SH. Clinical teaching associate model: implementation in a community hospital setting. Journal of Professional Nursing,1987;3(3): 165-175.
18. Monareng LV, Jooste K, and Dube A. Preceptors' and preceptees' views on student nurses' clinical accompaniment in Botswana. Africa Journal of Nursing and Midwifery 2009;11(2): 113-127.
19. Maginnis C and Croxon L. Transfer of learning to the nursing clinical practice setting. Rural and Remote Health 2010;10(2): 334-340.
20. Kerthu HS and Nuuyoma V. Theory-Practice Gap: Challenges Experienced by Nursing Students at the Satellite Campus of a Higher Education Institution in Namibia. International Journal of Higher Education, 2019;8(5), 21-28.
21. Sanford PG. Simulation in nursing education: A review of the research. The qualitative report 2010;15(4): 1006.
22. Schiavenato M. Reevaluating simulation in nursing education: Beyond the human patient simulator. Journal of Nursing Education 2009;48(7): 388-94.