

Effective Clinical Instructor Leadership Qualities within Clinical Settings:

How it Impacts Student Nurses

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Nursing is a highly collaborative profession which offers continuous opportunities where leadership skills are either cultivated or repressed. In the clinical setting, nursing care is delivered in high stakes environments often requiring work within stressful situations (Galuska, 2015). Leadership skills within these environments are essential to develop in order to foster positive team dynamics which have implications towards better nursing staff retention and better quality of patient care (Shirley, 2006). One of the most crucial times to form a foundation of leadership skills is during student experiences within their clinical practice. Student nurses are in a stage of their learning where they can be highly susceptible to positive and negative influences because they are in an active process of deciphering their role identity (Galuska, 2015). It is important to shape student experiences in the most positive ways possible because students will become future leaders in the healthcare industry. Future leaders have the capacity to shape an organization's culture and are influential moderators of positive change (Shirley, 2006). A clinical instructor's ability to integrate student nurses in the hospital can set the stage for developing a healthy early recognition of how to become an effective team member. Positive integration into the clinical setting opens students up to safely discover what role to play and when to push or pull back. It allows them to be able to tests their limits and explore their abilities in different situations, which is an integral part of becoming a leader (Patrick, Scrase, Ahmed, & Tombs, 2009). Certain qualities demonstrated by the clinical instructor are more successful in facilitating a positive and safe atmosphere for students to explore their capacities to their fullest extent and promote development of individualized leadership skills. These qualities can be categorized into four parts, those pertaining to interpersonal experiences, personality characteristics, teaching ability, and professional competence, (Tang, Chou, & Chiang, 2005).

The following is an analysis of how leadership within the clinical setting is influenced by clinical instructors and what qualities are most effective in shaping positive student experiences.

Interpersonal Relationship Skills

A clinical instructor's ability to proficiently establish good interpersonal relationships between nursing staff and nursing students greatly impact how effective students felt their instructor was and contributed to positive clinical experiences (Tang et al., 2005; Shirley, 2006). In fact, good interpersonal relationship building skills were deemed the most important factor for influencing positive clinical experiences for students because it fosters inclusion (Livsey, 2009). Clinical instructor's ability to maintain good communication between students and with staff promotes healthy relationships that initiated feelings of acceptance in students and a sense of safety to ask questions to nursing staff (Livsey, 2009). Feeling belonging in the clinical setting is an important factor which influences student's sense of acceptance and integration as it is needed in order for students to become active participants in the hospital (Levett-Jones, Lathlean, Higgins, & McMillan, 2009). Feeling a level of acceptance helps foster a safe learning environment and a sense of togetherness which can form the basis to develop a sense of caring. Motivation through caring fuels leadership roles and without such, students may become isolated from nursing staff and be unable to explore their role identity and skills to their capacities (Livsey, 2009). Isolation and lack of caring can be demoralizing for students and become a barrier to students in seeking learning opportunities and asking relevant questions for fear of rejection and ridicule (Shashsavari, Yekta, Houser, & Ghiyasvandian, 2013). The clinical instructor must be sensitive to the implications of students' need to integrate into the RN team in order to meaningfully assimilate to working RN's work culture. In order to accomplish this,

clinical instructors need to set clear expectations and establish a good line of communication between themselves and students, as well as nursing staff (Tang et al., 2005). Clinical instructor's also need to treat students with respect and as knowledgeable individuals in order to encourage student's growth as an active participant in the clinical setting (Valiee, Moridi, Khaledi, & Garibi, 2016). Treating students as respected members of the unit can help set the tone for how RN staff should approach and treat the students as well. To be respectful yet provide adequate guidance, clinical instructors need to balance lack of presence from over-supervising as it can make students feel more anxiety and limit their perceived ability to learn. Students are also highly anxious about making mistakes in their first clinical experience as they are novices and clinical instructors can either heighten these anxieties to a critical point or allow students to accept, learn, and grow from their experiences (Valiee et al., 2016). For instance, clinical instructors who scolded their students for mistakes, over supervised, and exhibited authoritarian like attitudes towards students were deemed as highly ineffective interpersonal qualities (Tang et al., 2005; Shashsavari et al., 2013). Clinical instructor's scolding students especially in front of others can instill paralyzing fear or influence defeated morale that undermines their abilities and leads to personal and professional isolation from others (Levett-Jones et al., 2009). Furthermore, it models lack of collaboration to solve problems together and lack of empathy for their learning. Student who reported this kind of interaction with their clinical instructors would be wary to seek further support and could feel no support to grow at all (Tang et al., 2005; Livsey, 2009). This would most likely lead students to behave in such a way to minimize their presence, avoid confrontation, and practice within small limits to ensure their own safety. Promoting such behaviors are contradictory to leadership qualities because students

may learn not to collaborate and prioritize actions to self-preserve themselves over advocating for best patient care.

Personality Characteristics of Leadership

Personality characteristics of clinical instructors were also contributing factors that influenced student learning. As leaders, clinical instructor's need to treat students with objectivity and refrain from personal judgements that might skew their behavior towards students as it can affect trust (Tang et al., 2005). Students look to clinical instructors to be their role model and help them maneuver through their clinical experience. Personality characteristics of clinical instructors that were consistently viewed as promoting learning were empathy, enthusiasm about teaching, and understanding individual students' unique needs (Tang et al., 2005). The clinical environment being such an unpredictable place compared to the classroom can be a challenge for students to overcome. There are so many new components that are unpredictable in the working environment such as the staff members, availability of equipment, patient needs and personalities, and work atmosphere that clinical instructors are unable to control (Koontz, Mallory, Burns, & Chapman, 2010). In such an environment, one of the only things clinical instructors can control is how they approach the clinical setting and what actions and behaviors they illicit. Personality characteristics that demonstrate flexibility, adaptability, and understanding of different situations make for a more resilient clinical instructor that students can depend on (Shirley, 2006; Koontz et al., 2010). These characteristics are exemplary of behaviors that illicit more creative problem solving and demonstrates an authentic leadership geared towards self-efficacy (Shirley, 2006). Students who experience their clinical instructors demonstrating self-efficacy have important implications in influencing the development of future

leaders through role modelling. Clinical instructors need to be aware that with so much unknown comes anxiety and fear, and student learning relies on predictability of their clinical instructor's personality to support them (Koontz et al., 2010). This may be because dependable and consistent personality expectations early in the clinic makes for one less unpredictable variable in this new and sometimes volatile learning environment. Clinical instructors who demonstrated empathy, showed cooperative attitudes, and had an enthusiastic attitude about clinical teaching were all reported as effective clinical behaviors that attributed to positive learning experiences (Tang et al., 2005). This may be because clinical instructors become a reliable and valuable resource for students in different situations because of their adaptable and understanding personality characteristics. These characteristics may also be more likely to influence clinical instructors approaching issues using a collaborative approach which have been previously indicated as promoting student learning and growth (Livsey, 2009). Through personal approaches that emphasize team effort rather than punishment, nursing students are more likely to feel safe enough to discuss difficulties. Patience and sincerity shown by clinical instructors also provide students with opportunity to reflect and evaluate their practice knowing they their clinical instructors are on their side to guide them (Livsey, 2009).

Teaching Ability

Teaching ability refers to the extent clinical instructors can facilitate knowledge development within students (Tang et al., 2005). Effective teaching requires a balance in both enough challenge and opportunities to critically think while providing the necessary resources to do so (Tang et al., 2005). Clinical instructor's teaching qualities such as ability to address knowledge gaps and encouraging students to think and learn independently seems to enhance

student learning and competencies (Livsey, 2009). For this reason, there are implications in the importance of obtaining clinical instructors who are experts in both nursing and education. Having a clinical instructor who is inadequately experienced with both or either teaching and in nursing may pose a threat to student experiences as they may feel less trust in their clinical instructor's abilities to help guide them through their clinical. The reliability of clinical instructors suffers if students feel their clinical instructors lack the ability to lead them as an educator or a nurse. Lack of trust in the clinical instructors teaching abilities impact the students respect of the clinical instructors and results in a failure to see their clinical instructors as a reputable leader (Khomeiran, Yekta, Kiger, & Ahmadi, 2006; Galuska, 2015). Teaching ability also refers to the clinical instructors informal teaching skills and ability to exhibit a holistic student-centered approach to teaching (Valiee et al., 2006). That means clinical instructors must be able to implement teaching strategies correctly to appropriate situations, and sometimes to appropriate students. Whether that means applying teaching methods such as step-by-step skill breakdown, getting a student to write a reflective paper, or demonstrating a skill with a student through practice; the clinical instructor needs to be able to apply the appropriate teaching to the student's individual needs for best results (Valiee et al., 2006; Ismail, Aboushady, & Eswi, 2016). Having a competent teacher who can apply correct teaching tools according to student needs has implications for effective leadership because it helps students gain the knowledge they need to begin their journey to become experts themselves.

Professional Competency

Finally, the perceived level of professional competency was an attribute of clinical instructors that were significant in influencing student experiences (Patrick et al., 2009). Clinical

instructors need to be aware of hospital policies and demonstrate a level of caring for patients that students can refer to (Khomeiran et al., 2006). Students also rated their experiences as richer if clinical instructors were able to teach different skills, share various techniques to enhance their learning, and apply theory to their own practice (Tang et al., 2005; Patrick et al., 2009). A clinical instructor's ability to demonstrate professional competency in the work place also has implications for the extent students feel they can trust and rely on them because it is a measure of expertise (Ismail et al., 2016). They must have adequate professional competence in providing quality nursing care themselves in order for students to view them as a legitimate role model (Khomeiran et al., 2005). However, it is not enough to just have good professional competency, it must also be shown to students to help set the standard and set clear expectations. For instance, clinical instructors should actually be able to demonstrate a skill to students by example, whether it is a clinical skill or how to conduct oneself within hospital politics (Patrick et al., 2009). How clinical instructors deal with conflict and difficult working situations between staff members and with patient care are modelled to the students (Ismail et al., 2016). A clinical instructor's ability to refer to their own competency provides opportunities for students to form their self-efficacy by example. It can also help solidify their confidence when clinical instructors are able to validate what students are doing well and provide critical feedback in areas in need of improvement (Tang et al., 2005). Positive reinforcement and relevant critical feedback can help support the development of accountable, capable, and well-rounded nursing students. In order to provide this, clinical instructors need to be well aware and knowledgeable in their field for students to be able to learn effectively.

Conclusion

The qualities that influence student experiences as most positive seem to be those that support good interpersonal culture, adaptability, expertise, and the right balance between challenge and support. It seems clinical instructors who are able to utilize qualities with these themes may be most successful in offering positive clinical experiences to their students. A major theme that lies within these qualities pertain to those that support professional and informal socialization with staff in order to feel integrated (Levett-Jones et al., 2009). Interpersonal relationship development seems pivotal in laying the foundation for nursing students to become caring professionals and team players who actively participate. The professional competency and teaching skill qualities seem to be needed in order to help student nurses grow into skillful, knowledgeable, and capable nurses. Personality qualities that support growth and learning through understanding and compassion are the common themes that help students feel a safe enough to reach for healthy exploration and discovery. Although the kinds of clinical instructors are highly variable as is the case with any individual, these noted qualities have implications that support better leadership development for nursing students' first introduction into clinical settings. Clinical instructors who are able to exhibit qualities that support emotional, interpersonal, and skills development in an empathetic nature will drive positive student-staff relationships and positive modeling of professional behavior. Guiding students towards empowerment, students are more likely to solidify their role identity and begin forming the foundations to become self-actualized nurses.

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