

Perceptions and experiences of undergraduate nursing students of clinical supervision

By

Gabieba Donough



Thesis presented in partial fulfilment of the requirements for the degree of
Master of Nursing Science
in the Faculty of Health Sciences at Stellenbosch University

Supervisor: Mariana M Van Der Heever

Co- Supervisor: Dr E Stellenberg

CEFI

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ANNEXURES

ANNEXURE A: PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

TITLE OF THE RESEARCH PROJECT:

Perceptions and experiences of undergraduate nursing students of clinical supervision

REFERENCE NUMBER: 15923800

PRINCIPAL INVESTIGATOR: Gabieba Donough

ADDRESS: Vanguard

CONTACT NUMBER: 0824855634

You are invited to participate in a research project. Please read the information presented here. Please feel free to question me about any part of this project that you do not fully understand. Your participation is **entirely voluntary** and you are free to decline to participate and will not be penalised in any way.

The aim of this study is to explore the perceptions and experiences of undergraduate nursing students of clinical supervision at an institution of higher education. The perceptions and experiences of the students regarding clinical supervision will provide information from a student's viewpoint.

From each year level nine students will be selected to participate in focus group interviews. The information obtained could assist institutions of higher education to improve the system of clinical accompaniment and supervision.

It is required that you answer all questions honestly. There are no personal benefits for you as a participant, but the information obtained could assist institutions of higher education to improve the system of clinical accompaniment and supervision. There would be no risks involved. The interview will be recorded. The transcriptions of the recorded interviews will be anonymous, meaning nameless. Every effort is made to protect the identity of the participants. Only the researcher and her supervisors will have access to the information.

You will not be paid to take part in the study. There will be no costs involved for you, if you do take part.

This study has been approved by the **Health Research Ethics Committee (HREC) at Stellenbosch University** who ensure that the research conducted will be within national and international accepted standards and legislation with respect to ethics in research. Furthermore, the research will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) Ethical Guidelines for Research.

You can contact the **Health Research Ethics Committee** at 021-938 9207 if you have any concerns or complaints that have not been adequately addressed by the researcher.

Declaration by participant

By signing below, I agree to take part in a research study entitled: *Perceptions and experiences of undergraduate nursing students of clinical supervision*.

I declare that:

- I have read the information and consent form and it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** and I have not been pressurised to take part.
- I may choose to leave the study at any time and will not be penalised or prejudiced in any way.
- I have been assured that my identity is protected and my participation is **anonymous**.
- I give consent for the audio recording of the interview.

Signed at on (date)..... 2012.

Signature of participant

Signature of witness

Declaration by investigator

I Gabieba Donough declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use an interpreter. (*If an interpreter is used then the interpreter must sign the declaration below.*)

Signed at (place) on (date) 2012.

Signature of investigator

Signature of witness

Declaration by interpreter

I (name) declare that:

- I assisted the investigator (name) to explain the information in this document to (name of participant) using the language medium of Afrikaans/Xhosa.
- We encouraged him/her to ask questions and took adequate time to answer them.
- I conveyed a factually correct version of what was related to me.
- I am satisfied that the participant fully understands the content of this informed consent document and has had all his/her question satisfactorily answered.

Signed at (place) On (date)2012

.....
Signature of interpreter

.....
Signature of witness

ANNEXURE B: RESEARCH INTERVIEW GUIDE

TITLE:

Perceptions and experiences of undergraduate nursing students of clinical supervision

The interview will be guided by the following open-ended questions:

1. Tell me about your experiences with clinical supervision.
2. Describe your experiences with clinical demonstrations in the clinical laboratory, the clinics, and the hospitals.

Probing words: congruency, competency, cognitive thinking, and approachability

3. Describe your experiences regarding clinical assessments.

Probing words: too lenient, too strict, different methods, different expectancies, time allocated, fairness

4. Describe your perceptions about clinical supervision at the clinics and hospitals.

Probing words: assistance, guidance, accessibility

**ANNEXURE C: PERMISSION LETTER TO CONDUCT RESEARCH AT THE
UNIVERSITY**

From: Oluyinka Adejumo
Sent: 10 October 2012 04:52 PM
To: Gabieba; Gabieba Donough
Cc: Felicity Daniels; Karien Jooste; Nicolette Johannes
Subject: Fwd: RE: Permission to conduct research

Dear Gabieba,

Permission had long been granted for you to conduct your study, this is subject to your complying with the requirements of the ethics as approved for your proposal, and that you must inform the Head of the Undergraduate programme in the School of Nursing for access to the participants in your study.

I have copied this approval to the current Acting Head of School, and also the Head of the Undergraduate programme in the School of Nursing.

Best Wishes.

++++
Prof Oluyinka Adejumo
School of Nursing,
Private Bag X17
Bellville 7535
Cape Town. Republic of South Africa
Tel: +27 21 9593024 (O); +27 82 4436131 (C)
Fax: +27 86 5108808

ANNEXURE D: ETHICAL APPROVAL



UNIVERSITEIT • STELLENBOSCH • UNIVERSITY
jou kennisvenoot • your knowledge partner

Approval Notice

New Application

09-Jul-2012
DONOUGH, Gabieba

Ethics Reference #: S12/05/132

Title: Perceptions and experiences of undergraduate nursing students of clinical supervision

Dear Ms Gabieba DONOUGH,

The **New Application** received on **15-May-2012**, was reviewed by members of **Health Research Ethics Committee 2** via Expedited review procedures on **04-Jul-2012** and was approved.

Please note the following information about your approved research protocol:

Protocol Approval Period: **04-Jul-2012 -04-Jul-2013**

Please remember to use your **protocol number (S12/05/132)** on any documents or correspondence with the REC concerning your research protocol.

Please note that the REC has the prerogative and authority to ask further questions, seek additional information, require further modifications, or monitor the conduct of your research and the consent process.

After Ethical Review:

Please note a template of the progress report is obtainable on www.sun.ac.za/rds and should be submitted to the Committee before the year has expired.

The Committee will then consider the continuation of the project for a further year (if necessary). Annually a number projects may be selected randomly for an external audit.

Translation of the consent document in the language applicable to the study participants should be submitted.

Federal Wide Assurance Number: 00001372

Institutional Review Board (IRB) Number: IRB0005239

The Health Research Ethics Committee complies with the SA National Health Act No.61 2003 as it pertains to health research and the United States Code of

Federal Regulations Title 45 Part 46. This committee abides by the ethical norms and principles for research, established by the Declaration of Helsinki, the South

African Medical Research Council Guidelines as well as the Guidelines for Ethical Research: Principles Structures and Processes 2004 (Department of Health).

Provincial and City of Cape Town Approval

Please note that for research at a primary or secondary healthcare facility permission must still be obtained from the relevant authorities (Western Cape Department of Health and/or City Health) to conduct the research as stated in the protocol. Contact persons are Ms Claudette Abrahams at Western Cape Department of Health (healthres@pgwc.gov.za Tel: +27 21 483 9907) and Dr Helene Visser at City Health (Helene.Visser@capetown.gov.za Tel: +27 21 400 3981). Research that will be conducted at any tertiary academic institution requires approval from the relevant hospital manager. Ethics approval is required BEFORE approval can be obtained from these health authorities.

We wish you the best as you conduct your research.

For standard REC forms and documents please visit: www.sun.ac.za/rds

If you have any questions or need further help, please contact the REC office at 0219389207.

Included Documents:

CVs

Consent

Application

Declaration

Synopsis
Checklist
Interview Review
Protocol

Sincerely,

Mertrude Davids
REC Coordinator
Health Research Ethics Committee 2

ANNEXURE F: DECLARATION BY TECHNICAL FORMATTER



To whom it may concern

This letter serves as confirmation that I, Lize Vorster, performed the technical formatting of Gabieba Donough's thesis. Technical formatting entails complying with the USB technical requirements.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Lize Vorster', is written over a large, stylized 'X' mark.

Lize Vorster
Language Practitioner