The Effect of Clinical Preceptor Training on Student Satisfaction in Clinical Practice Guidance

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Abstract

Clinical or field practical learning is a learning activity held in practice places such as hospitals, clinics, health centers, and communities. Clinical Instructors are responsible for educating and supporting students during clinical practice and facilitating learning in the practical field. The research objective was to identify the effect of mentor preceptor training by clinical instructors on student satisfaction in guiding clinical practice in Midwifery Study Program, University of Tulungagung. Analytical observational research design with the cross-sectional approach. The population of all students of the D3 Midwifery Study Program at the University of Tulungagung has already implemented midwifery clinical practice. The sample was taken using a simple random sampling technique as many as 62 students. Research instrument is questionnaire. Data were analyzed using the chi-square test. The results showed that 32 students (51.6%) were guided by CI who had attended preceptor mentor training by clinical instructors; most of the respondents, namely 46 students (74.2%), said they were satisfied with CI in guiding Clinical practice at the D3 Midwifery Study Program. Chi-square statistical test obtained p-value 0.000 <0.05 it's means that there is an effect of mentor preceptor training by clinical instructors on student satisfaction in guiding clinical practice in D3 Midwifery Study Program, University of Tulungagung. Preceptor mentor training can provide satisfaction for students in guiding during clinical practice; this can happen, of course, with various factors that support its implementation, such as a standardized guidance system and preceptorship training followed by clinical supervisors who can provide good service.

1. Introduction

Clinical or field practical learning is a learning activity held in practice places such as hospitals, clinics, health centers, midwives, independent practice, and communities [1]. The clinical practice aims to integrate, complement, and strengthen all competencies that students must acquire during education and provide professional experience as a prospective midwife [2].

Midwives are a category of health workers who can participate in efforts to achieve the optimal degree of public health, especially mothers and children [1]. For this reason, aspects of knowledge, attitudes, and good skills must be possessed by all prospective midwives bypassing the midwife competency test. In the matter of competency test, it is applicable to be obtained from the experience of students doing clinical practice in midwifery. Nevertheless, there are still students who do not pass the competency test.

The results of the survey by the Ministry of Health of the Republic of Indonesia and WHO (2012) stated that only 15% of the competency of midwife graduates is following current work needs and the achievement of student competency targets in clinics is currently only 45% who are in the good category[3]

Based on the XII midwife competency test results in 2018, there were 12,541 who passed and 9,177 who did not pass. In 2019 at the XIII from exam 6,141, participants passed, and 9,804 participants did not pass [4]. Tulungagung University D3 Midwifery Study Program in 2018 from 57 participants, 11 students, did not pass the competency test, and 46 passed the competency test. In 2019, out of 38 participants who took the exam, four students did not pass. Educational institutions have a considerable influence on student graduation rates in competency tests [5]. To increase student graduation in competency tests, using appropriate learning methods can increase student graduation rates[6]. Learning in the real work environment is also important in improving the skills of graduate midwives. Therefore, we need an evaluation that includes the conditions of the clinic's learning environment through student satisfaction [7]. Students' perceptions of guidance satisfaction will make students more comfortable in a new environment (BPM, Hospital)[8]. Satisfaction is influenced by three
factors: factors related to the product (guidance results), factors related to service, and experience factors [9].

Currently, there are various obstacles in realizing good and correct clinical practice, among others, due to limited practice area, the number of midwifery educational institutions, the availability of practice places but not conducive to learning opportunities, the inadequate number of cases, and the unavailability of competent clinical instructors[10]. Clinical Instructors have a large enough responsibility to educate and support students during clinical practice and help facilitate learning in the practical field. For this reason, good behavioral skills and knowledge as clinical instructors are needed [2].

One of the activities that can be done to improve CI competence is training in preceptors and mentors. With this training, it is hoped that it can improve the quality of clinical supervisors in carrying out guidance so that it will affect improving the quality of clinical guidance to students so that competencies and targets can be achieved by providing real experiences in health facilities while still involving the psychological aspects of students and facilitating to gain professional experience. They are related to maternal and child health in the practice area with fear[11]. Based on interviews conducted by researchers on midwifery students at Tulungagung University, there were 5 (50%) students who said that CI gave guidance both ASKEB and other targets to their assistants during their practice. Some instructors only correct recording and reporting during the practice once and are signed immediately, not to know where the shortcomings are. Some students are not allowed to take action on patients.

Meanwhile, 5 (50%) said CI had guided well following the students' competencies. Both knowledge and skills.

2. Method

This research method is an observational analytic study using a cross-sectional design. The research was conducted from April to May 2020. The sampling technique was carried out by simple random sampling that met the inclusion criteria. Data obtained through primary data in the form of questionnaires, and validity and reliability tests were carried out. Data analysis was performed using computerized assistance, including univariable and bivariable analysis.

3. Result

<table>
<thead>
<tr>
<th>No</th>
<th>Mentor Preceptor Training</th>
<th>Frequencies</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
<td>30</td>
<td>48.4</td>
</tr>
<tr>
<td>2</td>
<td>ever</td>
<td>32</td>
<td>51.6</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>62</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on table 1, it can be interpreted that out of a total of 62 respondents, most of the respondents were 32 people (51.6%) who were guided by CI who had attended preceptor mentor training by a clinical instructor and almost half as many as 30 people (48.4%) guided by CI who had never attended preceptor mentor training by clinical instructors. A preceptor is a person who is widely known to undertake the midwifery study and also acts as a practical guide for midwifery students. As a preceptor, the midwife is responsible for guiding, demonstrating, observing, providing feedback, giving advice, facilitating students in getting to know and procuring equipment as well as providing and presenting case examples that evaluate students' skills in midwifery practice to ensure they are appropriate or not following the expected midwifery competencies [2].

Preceptorship programs are an effective way to bridge the gap between clinical knowledge and practice, develop a sense of belonging, and lower anxiety levels. In preceptorship, preceptors and students are the core elements to carry out the right program based on the close interaction between
them. According to Kurniati[12], preceptorship training can increase clinical instructors' understanding and readiness in providing clinical guidance and achieving practical competence. Myall[13] also states that mentorship is very important for students' clinical experience and very important in preparing them for their role as confident and competent practitioners. Most of the students were mentored by CI, who had attended preceptor mentor training by a clinical instructor. It shows that students are guided by instructors who have a mentor preceptor basis. Guided by the mentor preceptor instructor, it is hoped that they will form perceptions and readiness about the application of the preceptorship method during midwifery clinical practice guidance. Clinical instructors must carry out their roles and responsibilities if they are supported by good clinical understanding and readiness.

Table 2. Frequency distribution of student satisfaction in clinical practice guidance

<table>
<thead>
<tr>
<th>No</th>
<th>Student satisfaction</th>
<th>Frequencies</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Unsatisfactory</td>
<td>16</td>
<td>25.8</td>
</tr>
<tr>
<td>2</td>
<td>sat</td>
<td>46</td>
<td>74.2</td>
</tr>
<tr>
<td>total</td>
<td></td>
<td>62</td>
<td>100</td>
</tr>
</tbody>
</table>

It can be interpreted that from a total of 62 respondents, most of the respondents, namely 46 students (74.2%), said they were satisfied with CI in guiding clinical practice in the D3 Midwifery Study Program at the University of Tulungagung, and there were a small proportion of respondents, namely 16 students (25.8%) said they were not satisfied with CI in guiding clinical practice. Satisfaction with clinical guidance is an expression of student feelings after comparing the guidance that has been obtained and expected during clinical practice. Student satisfaction is associated with the implementation of clinical guidance in clinical practice, including CI professionalism, the supervisor's ability to provide quality guidance, the ability to know, hospitality, politeness, and good communication skills. Students' needs in clinical learning are more complex than in the campus environment, where students do not yet know some of the equipment in the practice site; besides, the equipment is not the same as the laboratory, making students have to adapt first. Wherein the adaptation process, they need guidance from CI. In clinical guidance, clinical instructors' ability is needed so that students are satisfied and able to carry out the set clinical practice targets. The guidance process includes case discussions, midwifery care, information about assignments, checking daily targets, providing recommendations from follow-up notes, and competency achievement tests. Clinical supervisors' ability to convey the information needed by students can also be in the form of clinical supervisors' willingness to give personal attention to problems faced while in the practical field.

Table 3. Cross-tabulation of the effect of mentor preceptor training by clinical instructors on student satisfaction in clinical practice guidance

<table>
<thead>
<tr>
<th>No</th>
<th>Preceptor Mentor Training</th>
<th>Students satisfaction</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Low</td>
<td>Middle</td>
</tr>
<tr>
<td></td>
<td></td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>1</td>
<td>Never</td>
<td>16</td>
<td>25.8</td>
</tr>
<tr>
<td>2</td>
<td>ever</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>total</td>
<td></td>
<td>16</td>
<td>25.8</td>
</tr>
</tbody>
</table>

Uji statistic chi square $P$ Value = 0.000 $\alpha = 0.05$

The results in table 3 can be interpreted that out of a total of 62 respondents, 32 (51.6%) were mentored by CI who had attended mentor preceptor training, and students were satisfied in guiding clinical practice. Quantitative data analysis with the chi-square statistical test with a significant 0.05 resulted in a $P$-value = 0.000 smaller than the value $\alpha = 0.05$ (0.000 < 0.05) so that H0 was rejected and H1 was accepted, which means that there was an effect of mentor preceptor training by clinical instructor towards student satisfaction in guiding clinical practice at D3 Midwifery Study Program, University of Tulungagung. The implementation of clinical practice requires preparation both in terms of theory and practice in the laboratory. The focus of clinical practice learning is directed at knowledge, attitudes, and professional skills by providing students with opportunities to think when doing midwifery care for patients. A situation that provides students with an opportunity to apply the underlying knowledge was obtained previously into various activities that are psychomotor skills...
needed to create quality care. Clinical practice prepares students to integrate previously acquired knowledge with the appearance of skills and competencies related to client care and professional and personal skills, appearance, and behavior, thinking about entering the service system.

Mentor-ship activities are essential to students’ clinical experience and are essential in preparing them for their roles as confident and competent practitioners. It is in line with Neila’s research (2016) that the first step in achieving a competency according to the level set can be achieved through mentorship learning[14].

Preceptorship training affects clinical supervisors’ knowledge and attitude, so it impacts the satisfaction response of students when counseling activities are carried out in the clinic [15].

Preceptor mentor training can provide satisfaction for students in guiding during clinical practice, which is influenced by various factors that support its implementation, such as a standardized guidance system agreed upon by the institution and practice field, the abilities and skills possessed by the practical supervisor in applying the training results. To students as well as institutional support to facilitate training for CI field practice.

4. Conclusion

There is an effect of mentor preceptor training by clinical instructors on student satisfaction in guiding clinical practice in the D3 Midwifery Study Program, University of Tulungagung

Suggestion

It is hoped that educational institutions can collaborate with health agencies in midwifery practice activities so that good synergy can occur so that the objectives of clinical practice can be implemented properly.

5. References
