ABSTRACT

Purpose: The purpose of this study was to survey second year Associate Degree Nursing (ADN) students with the use of the Clinical Learning Environment Diagnostic Inventory to determine any student perception of differences in clinical learning experiences based on differences in the clinical models of instruction. This survey was accomplished by comparing responses of students taught by the preceptor clinical model and the traditional clinical instructor model of clinical instruction. An additional purpose is to assess the ease of transition of associate degree graduates as it relates to each model of clinical experience. Design: This study is a retrospective replication study using two groups of Associate Degree Nurses in a convenience sample. Method: A thorough review of literature was performed looking at clinical experiences and concepts related to educational theory for nurses as well as previously researched tools evaluating the experiences and educational opportunities of the clinical experience for nursing students. The Clinical Learning Environment Diagnostic Survey was previously compiled and tested by Dr. Yasuko Hosoda and others to determine reliability and validity of the instrument related to clinical environments for nursing students. Based on Dr. Hosoda’s findings the Clinical Learning Environment Diagnostic Survey was chosen and was offered to students who graduated from the 2007 and 2008 Associate Degree Nursing (ADN) Program of a western North Carolina Community College. Survey results were evaluated with a t test for ordinal data using the nonparametric equivalent Mann Whitney Sum Rank to determine if the data collected meets the assumptions of the research. The survey was offered to collective group of 111 graduates of the Associate Degree Nursing Program with n=39 and p=<.05. Results: Mann-Whitney rank sums based on the two different clinical models of instruction produced the following test results. Mann-Whitney rank sums ranged from U= 70.00, p=.001 to U=94, p=.009 for the affective
subscale variable titled “Sense of Clinical Learning Environment”. For the second subscale of perception titled “Perception of Clinical Learning Environment” ranks sums ranged from $U=103.00, p=.024$ to $U=144.00, p=.314$. The third subscale, symbolic, titled “Symbolic Clinical Learning Environment” produced $U=135.00, p=.194$ to $U=162.50, p=.700$ or $p=n.s$. In the behavioral domain titled “Behavioristic Clinical Learning Environment” $U=138.000, p=.183$ to $U=163.000, p=1.000$. The fifth subscale looked at the reflective domain and titled “Clinical Learning Environment” $U=112.50, p=.047$ to $U=121.000, p=.529$. In the sixth and final subscale titled “Transitions” $U=115.00, p=.067$ and $U=123.000, p=.102$. **Conclusions:** The findings yielded various outcomes for each subscale in the instrument. The two groups had no significant differences in their perceptions of clinical learning environments in all subscales with a significant difference in the item of instructors become role models where the preceptor group felt more strongly in this area than the traditional group.

**Key words:** nursing student, clinical education model, traditional clinical education, preceptor