

The Relation between Perceived Faculty Support and work Practice Readiness among Bachelor Nursing Students

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Abstract Background: Perceived Faculty Support play important roles in promoting nursing students' engagement in the clinical environment which enhance their readiness for practice. **Purpose:** To assess the relation between perceived faculty support and nursing student's readiness for practice. **Design:** A descriptive research design was used in carrying out the study **setting:** The study was conducted at Faculty of Nursing, Menoufia University. **Sampling:** Included 300 4th year undergraduate nursing students. **Instruments:** Perceived Faculty Support Scale and Casey-Fink Readiness for Practice Survey were used to the subject data. **Results:** The majority (87.7) of the studied nursing students had a high level of perceived faculty support. Additionally, the majority (91.3) of the studied nursing students had a high level of readiness for work practice. There was a high statistics significant positive strong correlation between total scores of perceived faculty support and readiness to practice. More than four-fifths of the studied nursing students have a high level of perceived faculty support **Conclusion:** There was a high statistically significant positive correlation between perceived faculty support and students' readiness for practice. **Recommendations:** Providing encouragement, caring, and promoting a sense of competence and self-worth are important factors for nursing students to improve work Practice Readiness among Bachelor Nursing Students

Keywords: *Nursing students, Perceived Faculty Support, Readiness for practice.*

Introduction:

Nursing education is considered as one of the most crucial elements for improving the quality of professional identity of future nurses (Oermann et

al.,2024). .In higher education, faculty members are recognized as the key socializing agents whose positive interactions with and caring for

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students' needs have helped improve and sustain students' persistence and retention until college graduation (Bañuelos and Flores 2024). Students face situations related to the profession and academic development that may be assessed as stress (Gao and Yuan 2024). Academic success is influenced by nursing student background, internal psychological processes, and external support so faculty support results from teacher-student interactions, and includes both psychological and functional actions (Huang et al., 2024). Faculty member may consider that an optimal clinical training experience is one where students are adjoined with instructors in a one-to-one ratio with patients inflowing at preset appointment times; establishing partnerships with hospitals and care providers in various clinical settings and environments might be valuable. The establishment of community relationships with a service-learning framework can offer creative chances for students to interact and take part in in health awareness, physical and mental health evaluations and intervention with people with no access healthcare services in a given setting (Roddy, 2024). Thus, cooperation between educational institutions of nursing and hospitals or clinical practice settings is a method of resolving complex conflicts confronting educators and clinicians. Academic practice interchange can be an efficient technique for decreasing workforce deficits and those policymakers should promote such partnerships. (Cheng, et al., 2024)

Notably, the ability of higher education students to effectively engage in academic activities and attain optimal personal, as well as professional development, depends on motivating positive student to faculty relationship, also known as faculty support which could decrease or increase students' stress levels, depending on how faculty present content and create relationships with the student (Lynam et al., 2024). On the other hand, difficulty balancing home and college demands, time pressure, financial concerns, feelings of distance from faculty and staff, and feelings of unpreparedness and incompetence were stress factors perceived by nursing students (Vavasseur, 2024). Nursing faculties can translate feelings of superiority over their students into behaviors of incivility, which may be perceived as controlling and empathetic by students, so the ability of new graduates to be practice-ready upon entry to the workplace remains a challenging concern for nurse educators (AlMekkawi and El Khalil, 2022). Unfortunately, bachelor nursing students are expected to be job ready, demonstrate competence in the provision of evidence-based care, practice independently, and assume accountability and responsibility for their own actions by hospital managers and nursing authorities (Schmidt and Brown 2024). Graduates are required to apply their learning from the academic setting into the clinical environment immediately upon entry into practice (Pleshkan, 2024). It remains partly upon nurse educators to identify student learning and professional

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development needs as students' progress toward practice (Oermann et al., 2024). Preparation of nursing students for their role as future registered nurses is an essential and complex endeavor and is a shared responsibility between academic and clinical health care organizations (Haruzivishe and Macherera, 2021).

The National League for Nursing's 2020 call for nurse educators to establish best practices for clinical education and evaluate the impact of teaching practices on learning and engagement. One way that perceived faculty support may enhance nurse educators to engage learners to use active methods of instruction. Active learning strategies have been shown to promote student learning (Ghezzi, et al., 2021) and it is suggested that they can better prepare new nurses for the complex healthcare system in which they will practice. Nursing clinical education has evolved over time and now includes more than just the traditional clinical experience. Other strategies used to promote active learning in nursing clinical education include the clinical post-conference, simulation experiences, and simulation debriefings. These strategies used in nursing clinical education provide the student with the opportunity for engagement in patient interaction with time for feedback and reflection (Noone and Gubrud, 2023).

Purpose of the study

Assess the relation between perceived faculty support and work practice readiness among nursing students

Research Questions

- 1) What is the level of perceived Faculty support among nursing students?
- 2) What is the level of students nursing practice readiness among nursing students
- 3) What's the relation between perceived faculty support and work practice readiness among nursing students?

Methods

This part includes the research design, setting, sample, instruments used in data collection, ethical consideration, pilot study, collection procedure and statistical test used.

Research Design:

A descriptive research design was used in conducting this study.

Setting:

The study was conducted at Faculty of Nursing, Menoufia University, which is affiliated to Ministry of Higher Education, Egypt. The emergence of College /Institute: -

Sampling technique:

Simple random sample was used in the present study, which entails Fourth year nursing students enrolled in the first semester academic year 2023/2024 at Faculty of Nursing, Menoufia University

Sample size:

Sample size was determined using Yamane, (1976) formula to determine the sample size of nurses. $n = N / 1 + N (e)^2$.

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N→ total numbers of nursing students are (1200) student.

n→ sample size.

e→ error tolerance (0.05).

1→ a constant value.

Sample size of nursing students' bachelor's degree = $1150 / (1+1150) \times (0.05)^2 = 297$ nursing students.

Sample will be increase to 300 for attrition and missing data.

Instruments:

Two instruments were used to collect data.

Instrument one: Perceived Faculty Support Scale

- **Part1:** it includes questions related to nursing students' personal data such as age, sex and residence.

- **Part 2:** Perceived Faculty Support Scale

This instrument was developed by Shelton & Allen (2000) to measure Faculty support students. It consists of 24 items divided into two subscales psychological support (12 items) and functional support (12 items). Nursing students' responses were measured on a five points Likert Scale. Ranging from 1-5: 1: strongly disagree=1, disagree=2, uncertain=3, agree=4, strongly agree=5.

Scoring system:

This instrument consisted of 24 items with a total grade 120. According to Abdou et al., (2021) subject responses were calculated in the scoring system and classified in to:

- Low level: if the total score was less than 60%, it means less than 72 points.

- Moderate level: if the total score was equal or more 60% to less than 75%, it means less than $\geq 72 < 90$.

- High level: if the total score was equal or more 75%, it means equal or more than 90.

Instrument two: Casey-Fink Readiness for Practice Survey

This instrument was developed by Casey & Kathy, (2011) to measure student readiness to practice and consists of 20 items divided into 3 subscales professional identity (7 items), ethical practice (9 items) and systems of care (4 items). Students were asked about comfort/confidence in key practice skills using 4-point Likert scale (1 = strongly disagree, 2 = disagree, 3 = agree, and 4 = strongly agree).

Scoring system

This instrument consisted of three dimensions distributed into (20 items) with a total grade (80). According to Lanahan et al., (2022) whose responses were calculated in the scoring system and classified to:

- Low level: if the total score was less than 75%, it means less than 60 points.

- High level: if the total score was equal to or more than 75%, it means equal to or more than 60.

Procedure

Validity

The instrument was formulated and submitted to five experts (4 professors and 1 assistant professor) in nursing administration from Faculties of nursing in different Universities

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(Menoufia and Benha University). To assess face validity, no modifications were done.

Reliability:

The study instruments were tested for reliability to estimate the consistency of measurement. Reliability of the instruments indicates its accuracy with respect to stability and repeatability in gathering data. Reliability performed using alpha coefficient test (Cronbach alpha). Internal consistency of the first instrument (perceived faculty support) with Cronbach alpha coefficient at .985. Internal consistency of the second instrument (readiness to practice) with Cronbach alpha was .922

Ethical Considerations:

Written approval was obtained from the Faculty of Nursing Ethical Research Committee (no., 952) and informed consent was gained from the study sample. They were informed that participation in the study was voluntary and they had the right to withdraw at any time of conducting the study. The respondents were assured that their data was treated as strictly confidential and their anonymity was maintained.

Pilot study:

Pilot study was conducted on 10% of the subject sample (30 student) before starting data collection to assess the clarity of the utilized instruments and the time needed for each instrument. No modification was done according to the result of the pilot study, so sample of the pilot study were included in the main study sample.

Procedures:

An official permission was obtained from Dean Faculty of Nursing, Menoufia University to carry out the study. The purpose of the study was explained to each participant in the study to gain their cooperation to participate in the study, and then written consent was obtained from those who accepted to participate in the study. After explanation of the purpose and nature of the study, students who fulfilled the inclusion criteria were invited to participate in the study.

The structured questionnaire was distributed by the investigator. Filling the questionnaire by students was carried out after its distribution between the participants. Upon completion, it was handed back to the investigator.

Statistical analysis:

Data was entered, analyzed and tabulated by using SPSS (Statistical Package for Social Science) statistical package version 22. Graphics were done using Excel program. Quantitative data was presented by mean (X), standard deviation (SD). Qualitative data was presented in the form of frequency distribution tables, number and percentage. It was analyzed by chi-square (χ^2) test. However, if an expected value of any cell in the table was less than 5. Level of significance was set as P value <0.05 for all significant tests.

Result

Table (1) shows that more than half (56.3%) of the age of the studied nursing students ranged $22 < 24$ years

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old, with a mean age of 22.65 ± 1.49 . Additionally, the majority (90.7%, 91.3%) of them were unmarried and had children respectively. Considering, Place of residence, four-fifths (80%) of them were from rural area. Finally, about two-thirds of the studied nursing students weren't working in a health-related field.

Figure (1) shows that about two-thirds (69.3%) of the studied nursing students were a female while only about one-third (30.7%) were a male. Additionally Male to female ratio is 0.4:1.

Table (2): represents that the total mean score of perceived faculty support among the studied nursing students is $\bar{x} \pm SD = 105.75 \pm 14.65$ (total score is 120) with a highly statistically significant difference at $P = 0.000$. Additionally, the dimension of psychological faculty support gained slightly higher mean is $\bar{x} \pm SD = 53.0 \pm 7.26$ than functional faculty support = 52.75 ± 7.47 (total score is 60 for both dimensions) with a highly statistically significant difference at $P = 0.000$.

Figure (2) illustrates that the majority (87.7%) of the studied nursing students have a high level of perceived faculty support, followed by (11.3%) have a moderate level. While the minority (1%) of them have a low level. In addition to the presence of a highly statistically significant difference between low, a moderate and high level, at $P = 0.000$.

Table (3): represents that the total mean score of readiness for work

practice among the studied nursing students is $\bar{x} \pm SD = 73.3 \pm 9.4$ (total score is 80) with a highly statistically significant difference at $P = 0.000$. Additionally, the dimension of readiness for work practice regarding system of care was ranked as the first and gained higher weight mean = 3.86. Additionally, the dimension of readiness for work practice regarding professional identity was ranked as the third and gained lower weight mean = 3.57 (total score is 4-point Likert scale).

Figure (3) illustrates that the majority (91.3%) of the studied nursing students have a high level of readiness for work practice. While the minority (8.7%) of them have a low level. In addition to the presence of a highly statistically significant difference between low and high level, at $P = 0.000$. Moreover, the low to high level ratio is 0.1:1.

Figure (4): represents that there was a highly statistically significant positive strong correlation between total score of perceived faculty support and readiness for work practice among the studied nursing students, at $r = 0.917$ & $P = 0.000$.

Table (4) indicate the goodness of fit for the regression between of total perceived faculty support effect and readiness for work practice, was excellence. Additionally, it indicates that perceived faculty support was responsible for (84.1%) of the variation in readiness for work practice ($R^2 = 0.841$).

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Table (1): Frequency distribution of the studied nursing students' personal data (n= 300)

Items		No	%
Age (year)	▪ 20 < 22 Yrs.	89	29.7
	▪ 22 < 24 Yrs.	169	56.3
	▪ 24 < 26 Yrs.	42	14.0
	▪ Mean ± SD	22.65 ± 1.49	
Marital status	▪ Married	28	9.3
	▪ Un-married	272	90.7
Having children	▪ Yes	26	8.7
	▪ No	274	91.3
Place of residence	▪ Urban	60	20.0
	▪ Rural	240	80.0
Working now in a health-related field	▪ Yes	114	38.0
	▪ No	186	62.0

Figure (1): Percentage distribution of gender among the studied nursing students (n= 300)

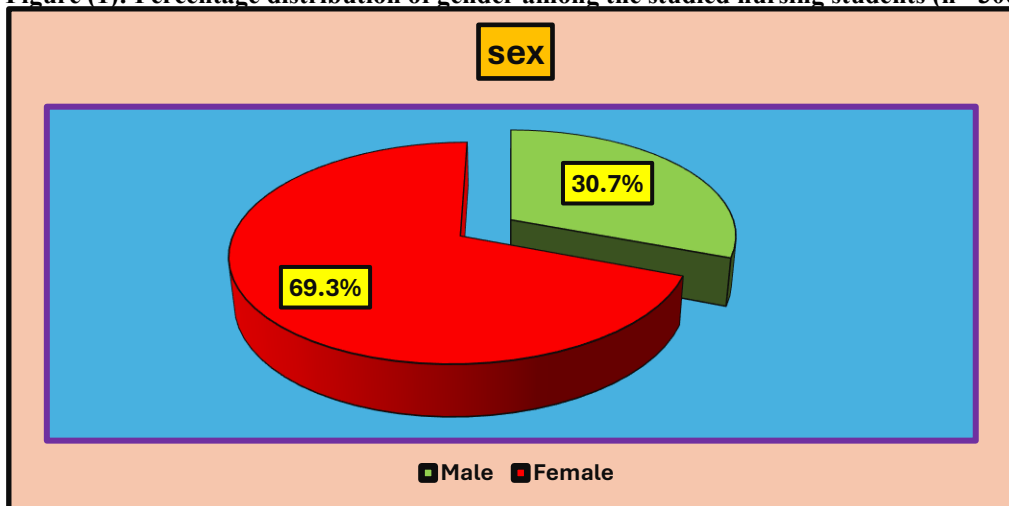


Table (2): Total mean score of perceived faculty support among the studied nursing students (n= 300)

Variable		N	%	Min	Max	\bar{x}	SD	F test	P value
Psychological	Low level	2	0.7	35	35	35.0	0.0	152	0.000**
	Moderate level	33	11.0	36	44	39.06	2.93		
	High level	265	88.3	45	60	54.87	5.33		
	Total	300	100.0	35	60	53.0	7.26		
Functional	Low level	5	1.7	34	35	34.20	0.447	163	0.000**
	Moderate level	33	11.0	36	44	39.33	3.05		
	High level	262	87.3	45	60	554.79	5.41		
	Total	300	100.0	34	60	52.75	7.47		
Total	Low level	3	1.0	71	71	71.0	0.00	157	0.000**
	Moderate level	34	11.3	72	89	78.41	6.17		
	High level	263	87.7	90	120	109.68	10.67		
	Total	300	100.0	71	120	105.75	14.65		

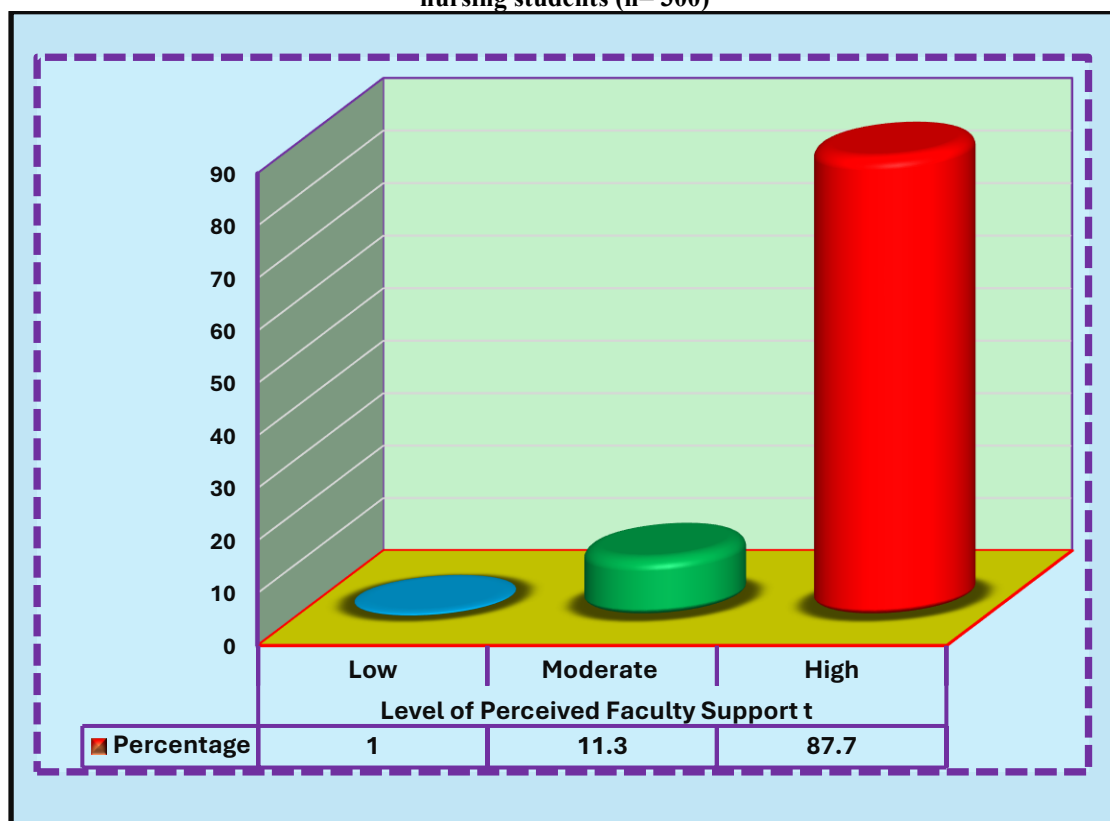
*Significant $p < 0.05$

F: ANOVA Test

**Highly significant $p < 0.01$

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Figure (2): Percentage distribution of level of perceived faculty support among the studied nursing students (n= 300)



$\chi^2=403$, P= 0.000**

Table (3): Total mean score of readiness for work practice among the studied nursing students (n= 300)

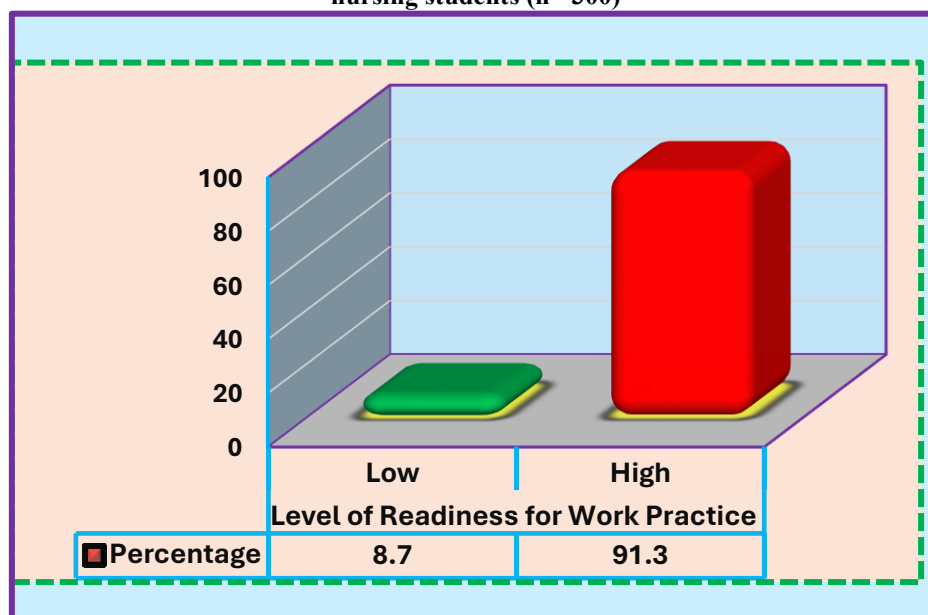
Variable		No	%	Min	Max	\bar{x}	SD	Weight \bar{x}	Rank	T test	P value
Professional identity	Low level	39	13.0	11	20	16.54	2.87	3.57	3	24.4	0.000**
	High level	261	87.0	21	28	26.26	2.22				
	Total	300	100.0	11	28	24.99	4.00				
Ethical practice	Low level	30	10.0	18	26	21.93	2.82	3.71	2	27.5	0.000**
	High level	270	90.0	28	36	34.18	2.24				
	Total	300	100.0	18	36	32.96	4.34				
System of care	Low level	17	5.7	7	10	8.35	1.16	3.86	1	40.0	0.000**
	High level	283	94.3	12	16	15.87	0.62				
	Total	300	100.0	7	16	15.45	1.86				
Total	Low level	26	8.7	39	58	47.4	7.8	3.71	-	27.8	0.000**
	High level	274	91.3	64	80	75.8	4.6				
	Total	300	100.0	39	80	73.3	9.4				

*Significant $p \leq 0.05$

**Highly significant $p \leq 0.01$

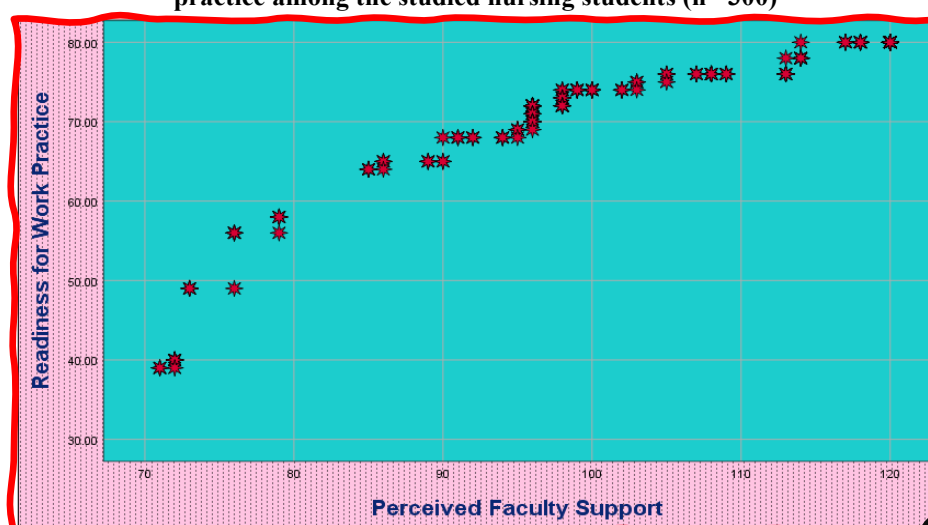
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Figure (3): Percentage distribution of level of readiness for work practice among the studied nursing students (n= 300)



$\chi^2=205$, $P= 0.000^{**}$
Low to High ratio= 0.1:1

Figure (4): Scatter dot between total score of perceived faculty support and readiness for work practice among the studied nursing students (n= 300)



$r=0.917$

Table (4): Linear regression model analysis of perceived faculty support effect on readiness for work practice among the studied nursing students (n= 300)

Unstandardized coefficients		Standardized coefficients	T Test	P Value	r	r Square	F	P Value
β	Std. Error	Beta						
0.590	0.015	0.917	6.95	0.000	0.917	0.841	1575	0.000 ^{**}
a. Dependent variable: Total score of readiness for work practice								
b. predictors (constant): Total score of perceived faculty support								

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Discussion

Faculty support results from interactions between teachers and students that involve the development of trust and a therapeutic, working relationship. Faculty support has the greatest power to influence and optimize psychological outcomes and academic outcomes. Faculty support is critical to academic integration, which in turn is an essential element of persistence in college. Faculty members in nursing are essential to the academic success of nursing students. Gaining insight into how students perceive faculty support in different circumstances can help improve student satisfaction, performance, and program persistence (Labrague et al., 2020).

So, the present study was conducted to assess the relation between perceived faculty support and nursing practice readiness among nursing students.

In relation to the total mean score of perceived faculty support among the studied nursing students is $\bar{x} \pm SD = 105.75 \pm 14.65$ (total score is 120) with a highly statistically significant difference at $P = 0.000$. Additionally, the dimension of psychological faculty support gained slightly higher mean than functional faculty support with a highly statistically significant difference. From the investigator's point of view, psychological support can be considered a factor that determinates the student to be motivated to carry out various tasks and academic activities.

As well, this data was accordance with the study of Raboca & Cărbunărean, (2024) which studied faculty support as

part of faculty strategy on the academic motivation of the working students and documented that dimension of psychological faculty support gained higher than functional faculty support. On other hand, this data was inconsistent with a descriptive correlational study result published at Assiut Scientific Nursing Journal, conducted by Mohamed, & Amin, (2022) which perceived faculty support and burnout among students of nursing faculty, reported that functional faculty support gained slightly higher mean than psychological faculty support.

Concerning level of perceived faculty support among the studied nursing students, the study result showed that the more than four-fifths of the studied nursing students have a high level of perceived faculty support, While the minority of them have a low level. In addition to the presence of a highly statistically significant difference between low, a moderate and high level.

Additionally, high perceived faculty support mentioned by most of the students is congruent with the study result conducted in the critical care nursing department at the faculty of nursing, Alexandria University by Hemida (2024) who assessed perceived stressors, coping strategies, and faculty support, concluded that two-third of nursing student had a high level of perceived faculty support.

As well, this data was in the same line with a descriptive correlational study result published at Assiut Scientific Nursing Journal, conducted by Mohamed, & Amin, (2022) which

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perceived faculty support and burnout among students of nursing faculty, revealed that higher percentage of nursing students at Faculty of Nursing, Beni-Suef University had high level of perception of faculty support

On other direction, the study finding was contrary with the study result conducted by Bakker, et al., (2019) which evaluated late dropout from nursing education: An interview study of nursing students' experiences and reasons, concluded that students did not receive the support from the faculty they needed with some students leaving their program due to a lack of faculty support.

The present study represented that the total mean score of readiness for work practice among the studied nursing students is $\bar{x} \pm SD = 73.3 \pm 9.4$ (total score is 80) with a highly statistically significant difference at $P = 0.000$.

As well, the study finding was inconsistent with Powers et al., (2021) which assessed nurse faculty perceptions of readiness for practice among new nurses graduating during the pandemic, concluded that there was an overall significant decrease in scores for all competency areas, Nurse faculty reported a wide range of changes due to the pandemic, with limitations in clinical learning prevalent and there was a statistically significant decrease in practice readiness scores for the total scale. The study assured the importance of providing guidance for clinical nurses working with new graduates and nurse faculty working with continuing students.

Moreover, the present study reported that the majority of the studied nursing

students have a high level of readiness for work practice. While the minority of them have a low level. In addition to the presence of a highly statistically significant difference between low and high level, at $P = 0.000$. Moreover, the low to high level ratio is 0.1:1. This may be due to nursing students encounter with different problems and struggles during their clinical practice and they need developing their knowledge and skill to be more autonomous and confident in selecting their decisions.

On the same line, the study findings were consistent with the study result published at Mansoura Nursing Journal and conducted by Abdou, et al., (2021) which studied nursing students' readiness and perspective toward self-directed learning, and revealed that about three quarter of nursing students had high readiness for SDL. The study recommended that encourages policymakers in the college to make policy for self-directed learning in nursing curricula.

Additionally, result of Kerr, et al., (2020) which studied undergraduate nursing student perceptions of directed self-guidance in a learning laboratory: an educational strategy to enhance confidence and workplace readiness, revealed that participants perceived that the facility enhanced their confidence and competence during clinical placement, which has implications for the education of students.

On other side, this data was incompatible with online cross-sectional survey conducted by Chen, et al., (2024) which studied nursing students' work readiness and its

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influencing factors before participating in a nurse residency program: a multicenter cross-sectional study and documented that the work readiness of nursing students prepared to engage in a nursing residency program in Chongqing, China, are at an intermediate level and warrant further enhancement.

Moreover, the present study described that there was a highly statistically significant positive strong correlation between total score of perceived faculty support and readiness for work practice among the studied nursing students, at $r = 0.917$ & $P = 0.000$.

As well, this data was supported by Okolie, (2022) which analyzed work placement learning and students' readiness for school-to-work transition: perceived employability and faculty supervisor support matter, found that faculty supervisor support moderated the direct and indirect effects of work placement learning on readiness for school-to-work transition via self-efficacy and outcome expectations.

Linear regression analysis was conducted to empirically determine whether perceived faculty support was a significant determinant of readiness for work practice among the nursing students. It revealed that independent variable (Total score of perceived faculty support) is a positive predictor factor of readiness for work practice the studied nurses. As $\beta = (0.590)$ indicates that the increase in perceived faculty support by one standardized point score is associated with an increase in readiness for work practice by (0.590) standardized point score.

From the investigator 's point of view, creating positive workplace environments that support nursing students and graduate nurses to develop practice readiness can enhance the quality of care they provide, promote their retention in the health workforce and contribute to improved healthcare practice and outcomes.

On the same line, the study finding was combatable with a descriptive correlational study result conducted at the Faculty of Nursing, Alexandria University by El-Sayed et al., (2021) which analyzed academic motivation, academic self-efficacy and perceived social support among undergraduate nursing students, reported that multivariate regression analysis showed that the level of perceived social support is important factor in predicting the levels of academic motivation and self-efficacy. Moreover, the study concluded that students' academic motivation, academic self-efficacy, and perceived social support are significantly and positively related to each other.

Conclusion:

In the light of study findings, it was illustrated that: the majority of the studied nursing students had a high level of perceived faculty support. Additionally, the majority of the studied nursing students had a high level of readiness for work practice (91.3%). There was a high statistics significant positive strong correlation between total scores of perceived faculty support and readiness to practice. There was a highly statistically significant relation

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between perceived faculty support and work practice readiness

Recommendation:

Based on the findings of the study, the following recommendations were proposed for practical, educational and research level:

- Nursing faculty member should connect students with services or resources that can help them with career exploration, goal selection and ongoing academic assistance ask students for feedback about their experience, including what works, what needs improvement and what's missing. Also, they should recognize the value of students' talents, abilities, skills and experiences and connect them with opportunities to contribute and encourage participation in out-of-class activities. Communicate, demonstrate and care about the student success. A faculty member should be passionate about teaching and advocating for nursing students.
- Balancing all the duties adequately as faculty member. Not only teachers, nurse educators serve as administrators, advisors, clinical coaches, lab instructors, mentors to new faculty members, course developers, researchers, and more.
- Future research studies could be conducted using larger sample size rather than the current study to generalize the results.

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