



National Nursing Student Survey (NSU), 2021

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Executive Summary

There were 2266 student financial members of New Zealand Nurses Organisation, Tōpūtanga Tapuhi Kaitiaki o Aotearoa (NZNO) at the time of the survey. The national, anonymous web-based survey of student nurses was undertaken in March-April 2021. This is the ninth biennial survey of NZNO nursing student members; the previous survey was completed in 2019 and attracted 878 participants. This survey had 685 respondents, just over 30% of the total possible respondents, and all the 18 schools of nursing were represented.

The main focus of the survey was to investigate:

- > the impact of the COVID-19 (Mate korona) pandemic on students enrolled in a nursing course in 2020,
- > the impact of the COVID-19 pandemic on those preparing for nursing study for 2021.
- > preceptorship
- > understanding of the student nurse scope of practice
- > mentorship opportunities for nursing students
- > nursing in the post COVID-19 environment

Significant findings

Nursing students enrolled in 2020 were subject to significant disruption in their nursing studies. The biggest impact was on the limit in number and length of clinical placements. In addition, the lockdown resulted in limited preparation for clinical placements. Half of students faced financial difficulties associated with lockdown. Earning opportunities were limited, but living costs were unchanged, or increased in some cases.

Understanding of the student scope of practice by preceptors and other nurses' students encounter on clinical placement was not optimal. Experience with preceptors was mixed, but a relatively small proportion rated the quality of preceptorship as low. Peer support or mentoring opportunities for students are limited and could be significantly expanded

At the time of the survey, which was before the Delta variant arrived in Aotearoa New Zealand, respondents indicated they had good access to COVID-19 clinical resources and very high numbers of students would take the COVID-19 vaccine if offered. The majority indicated that they would feel comfortable working in managed isolation and quarantine facilities, and indeed, working with patients infected with COVID-19.

Limitations

As with all surveys, the results need to be interpreted with caution, due to the representativeness of those who choose to participate and the subjectivity of some of the views expressed. In addition, this report was finalised for publication as the country emerged from the response to the Delta variant of Mate korona which arrived in Aotearoa New Zealand in August and as we moved into the 'traffic light' system. A survey of nursing students conducted after these events may well have elicited different responses.

Dissemination and Recommendations

Representatives of the NSU presented the survey results to the Heads of Schools and members of the Council of Deans in July 2021. Following the presentation there was an opportunity for discussion of the findings. This report will be circulated to all schools of nursing and will be available on the NZNO website.

Introduction

The 2021 NZNO Nursing Student Survey

NZNO is the leading professional and industrial organisation of nurses in Aotearoa New Zealand, representing over 54,000 nurses, midwives, students, kaimahi hauora and health workers on a range of employment-related and professional issues. NZNO commitment to te Tiriti o Waitangi is embedded in its constitution and articulated through its relationship with Te Rūnanga Tōpūtanga Tapuhi Kaitiaki o Aotearoa, who ensure bi-cultural values of tikanga and matauranga Māori are guiding the mana of this partnership.

NZNO provides leadership, research, and support for professional excellence in nursing, negotiates collective employment agreements on behalf of its members and collaborates with government and other agencies throughout the health sector. This report documents the results of a survey of nursing students in New Zealand.

Context

This is the ninth biennial survey of NZNO nursing student members and was undertaken between March and April 2021. The National Student Unit (NSU) is comprised of students enrolled in an undergraduate nursing/midwifery course or a programme leading to an initial New Zealand nursing/midwifery registration and may include Enrolled Nurse students. The NSU exists to serve the interests of all student members of NZNO. The NSU is unique, as it is the only nursing student representative group in Aotearoa New Zealand and is the major political voice for nursing students today. The NSU committee aims to have two student representatives from each school of nursing in Aotearoa New Zealand, one Māori taura (Te Runanga Taura, TRT) and one additional student (National Student Representative, NSR).

This survey report will be published and read as the impact of the Delta variant of Mate korona is being realised. The results of a survey conducted now may well be different so this report needs to be read with several contextual factors in mind. Firstly, the impact of Delta on the Māori and Pacific communities, particularly in Auckland may have changed responses from Māori and Pacific students, many of whom are part of Auckland communities where the greatest impact has been experienced. Since the survey was conducted the Pfizer COVID vaccine has been rolled-out and various health orders mandating vaccination included students in the health workforce. Free-text response options were available and utilised by respondents and are summarised in themes presented in an Appendix. These responses give meaning and detail to some of the descriptive statistics used to summarise the survey results and are useful to support work with students of nursing. Further work that explores the lived experience of students, particularly Māori and Pacific students of the Delta outbreak in Aotearoa New Zealand is recommended.

Methods

A national, anonymous, web-based survey with the primary aim of investigating the impact of the COVID-19 pandemic on students enrolled in a nursing course in 2020, or those preparing for nursing study enrolling for 2021. The survey also explored preceptorship, understanding of the student nurse scope of practice and mentorship opportunities for nursing students. The project used a partnership approach between all nursing schools in New Zealand, and NZNO student delegates from each school. The survey link was e-mailed to all NZNO nursing student members, was advertised on the NZNO website and was shared by NSU members with fellow nursing students. Consent was implied by completion and submission of the survey questionnaire.

Report structure

The results are given for all respondents, and numbers and percentages are shown to allow comparisons.

Results

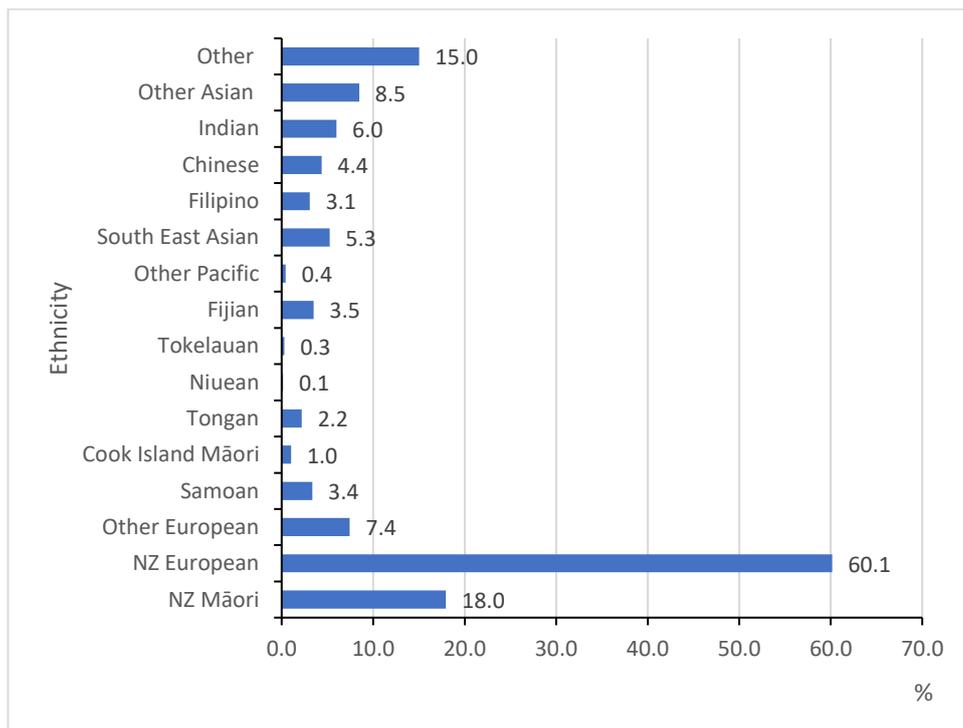
Gender

A total of 685 students participated in the survey. The respondents comprised 620 (90.8%) students who identified as female; 59 (8.6%) participants were male, and four (0.6%) individuals identified as gender diverse.

Ethnicity

The total student cohort comprised 123 (18.0%) NZ Māori, 412 (60.1%) NZ European, 75 (10.9%) Pasifika and 186 (27.2%) Asian peoples. An additional 15.0 per cent of the students identified with other ethnicities. Respondents could choose more than one ethnicity; accordingly, the total exceeds 100 per cent. The ethnicity data is shown in figure 1 below.

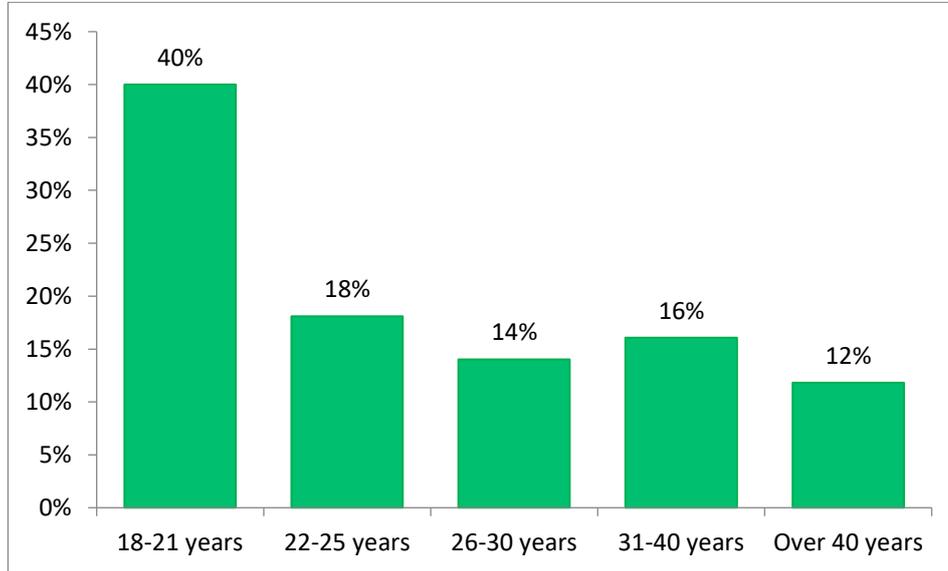
Figure 1 Ethnicity of Respondents



Age

As illustrated in figure 2, students aged 18-21 years made up the majority of the student group (274, 40.0%). The remainder of the sample cohort comprised, 124 students (18.1%) aged 22-25 years, 96 students (14.0%) aged 26-30 years, 81 students (16.1%) aged 31-40 years and the remaining 101 students (11.8%) were aged over 40 years.

Figure 2 Age of Respondents



The respondents were fairly evenly spread across the first (241, 35.7%), second (203, 30.0%) and the third year of study (203, 30.0%). The 29 individuals in the other category included CAP students, and a small number completing or repeating parts of their 2020 course.

Figure 3 Year of Study in 2021

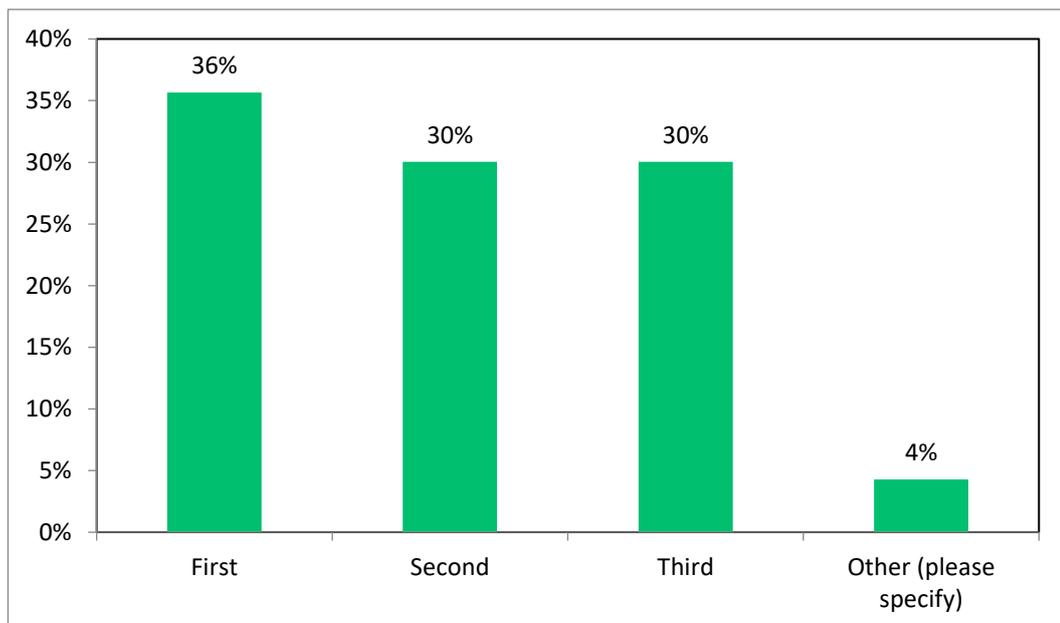


Table 1 Nursing School attended by Respondent

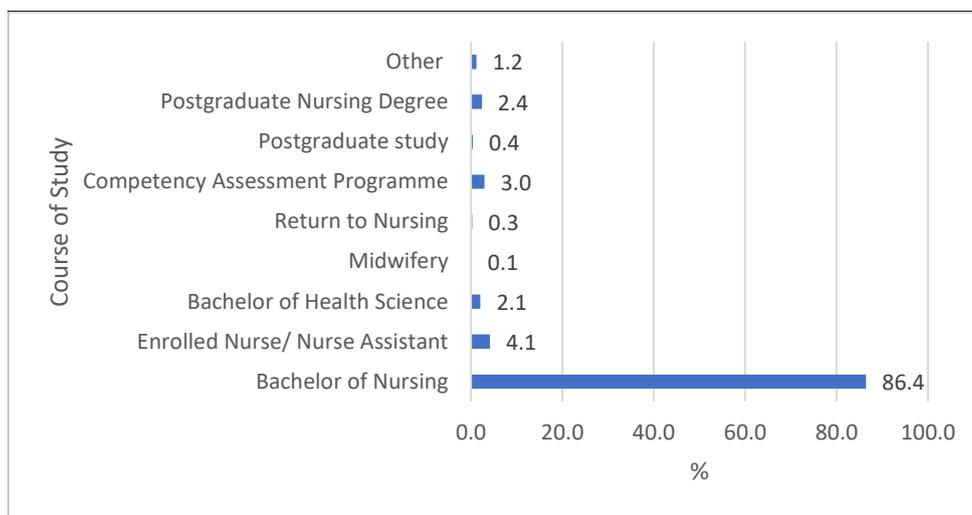
Nursing School	%	n
ARA Institute of Canterbury	12.9	87
Auckland University of Technology	23.7	160
Avatar Institute of Learning	0.6	4
Eastern Institute of Technology	3.7	25
Manukau Institute of Technology (MIT)	1.2	8
Massey University, Albany	1.0	7
Massey University, Palmerston North	0.4	3
Massey University, Wellington	4.9	33
Nelson Marlborough Institute of Technology	0.1	1
North Tec	3.6	24
Otago Polytechnic	10.7	72
Other (please specify)	0.3	2
Southern Institute of Technology	9.3	63
Te Whare Wānanga o Awanuiārangi	2.4	16
Toiohomai Institute of Technology	6.8	46
Unitec NZ	1.2	8
University College of Learning (UCOL)	2.7	18
University of Auckland	2.1	14
University of Otago Christchurch	0.3	2
Waiariki Institute of Technology	1.6	11
Waikato Institute of Technology (Wintec)	2.1	14
Wesley Institute of Learning	0.7	5
Western Institute of Technology, Taranaki	1.2	8
Whitireia Community Polytechnic	6.7	45

All of the schools offering nursing training were represented in the study.

Course of Study

Some 585 (86.4%) of the student nurses were enrolled in the Bachelor of Nursing course (figure 4). This included five students who identified Bachelor of Nursing Māori, and one student who identified Bachelor of Nursing Pacific as their course of study. The Enrolled Nursing course was the second most popular course (n=28, 4.1%). The other category included seven individuals enrolled for a combined Bachelor of Nursing and Masters degree.

Figure 4 Course of Study



Impact of Mate korona, COVID-19 on Studies in 2020

A major focus of the survey was the impact of the COVID-19 on nursing students in 2020, as well as the effect of the lockdowns associated with the pandemic on preparation for tertiary study in 2021. It is important to note that this section of questions would not be relevant to a proportion of students, according to the number of respondents is lower than the previous demographic section. The numbers and percentages apply to the number of respondents who answered the questions.

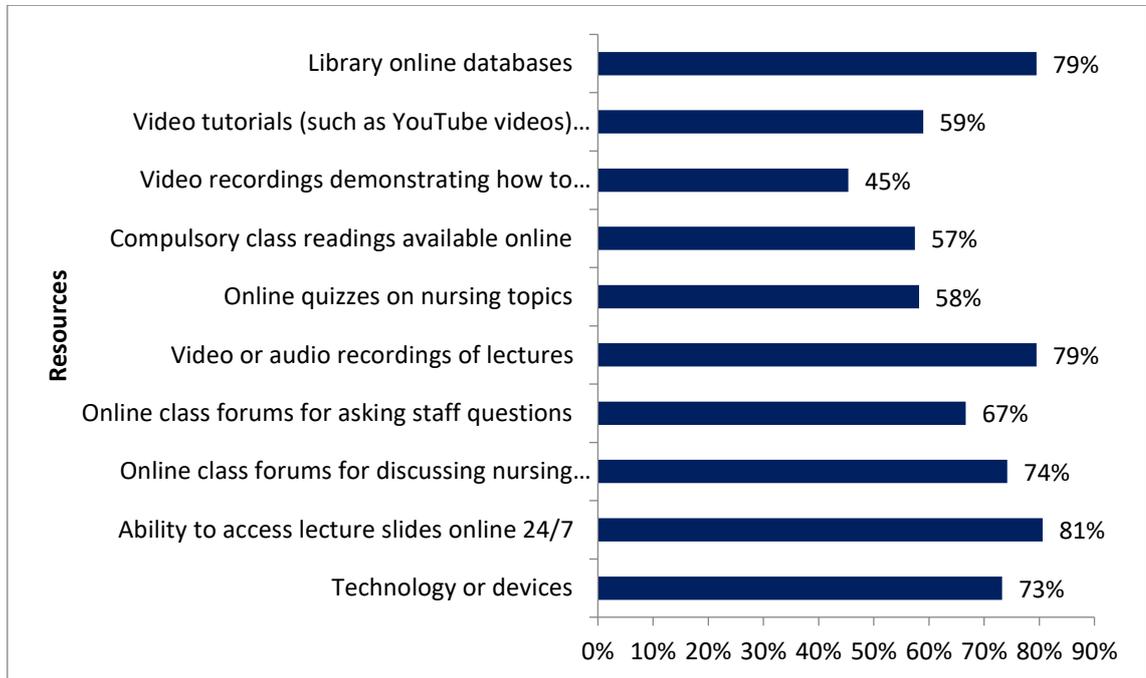
The majority of the respondents (473, 70.9%) were enrolled in a Nursing course in 2020. Of those students enrolled in 2020, 249 (39.9%) were in the first year of study and 190 (30.4%) were in the second year of study. Only 24 individuals (3.8%) were in the third year of nursing study. Among the remaining 161 (25.8%) students, eight individuals were enrolled in university study, 23 respondents were completing foundation or bridging courses for nursing, 27 respondents were studying at secondary school and 19 respondents were undertaking a combination of second and third year papers.

Respondents were asked if the pandemic made them re-evaluate whether they wanted to study nursing. More than two thirds of students who completed the survey (473, 68.6%), had not re-considered the decision to complete nursing study. Indeed, some students indicated that the pandemic had encouraged them to enter nurse training. Nursing was seen as a secure employment pathway, and other options, such as overseas travel, were no longer viable.

Students who were not enrolled in a nursing course in 2020, but were preparing to commence nursing study in 2021, were asked if their preparation for study had been adversely affected. Of the 176 students who answered this question, 48 (27.3%) respondents indicated that preparation for study had been adversely affected.

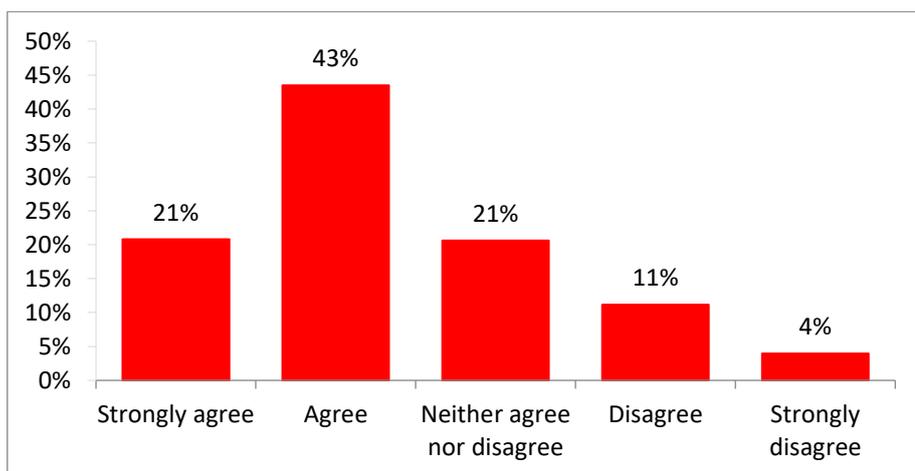
Nearly 81% (520) of respondents indicated that the pandemic had not affected their decision to go ahead with nursing study in 2021.

Figure 5 Learning resources available to you during COVID-19 lockdown



Asked whether information about learning resources was easily accessible and available to all students, the majority (467, 87.1%) indicated that this was the case. Respondents were also asked if communication with tutors was appropriate. These data are presented in the figure below. Almost two-thirds (340, 64.3%) students strongly agreed or agreed that communication was adequate and timely.

Figure 6 Communication with Tutors during Lockdown



Access to the Internet and Technology

Eighty-eight percent of students (471) had satisfactory internet access to enable them to study at home. However, some 29% of students (154) indicated that they incurred extra costs associated with internet access or technology to enable studying at home during lockdown. Timely access to IT support was experienced by 71% (374) students. Overall, 70.3% of students (378) believed they were able to study effectively during the lockdown and three quarters (383, 75.1%) of students assessed communication from Heads of School during 2020 as adequate.

Respondents who indicated they were not able to study effectively during the lockdown were asked what additional resources would have assisted. Common responses were:

- > A quiet place to study without the distractions of home and family
- > Adequate internet connection
- > Interaction with class members and teaching staff
- > Opportunities to learn or practice practical skills

Support Services

Almost two-thirds (320, 63%) respondents reported that mental health support was available and promoted by their nursing school. Only 24 (4.7%) respondents accessed mental health support. It is hard to generalise with such a small sample size. Some students indicated the support was adequate, but others had to wait weeks for an appointment or left feeling they were not provided with any coping skills. Over half of students (274 or 55%) reported that their school provided pastoral support in addition to mental health support.

Only 32% of respondents indicated that they required support for childcare or whānau commitments during lockdown. Slightly more than half of this group had been able to access the support they needed. After lockdown, childcare facilities re-opened in time for 67% of respondents who required them. However, the data only represents those participants engaged in the survey and does not capture the anecdotal evidence of the various hardships students have been experiencing.

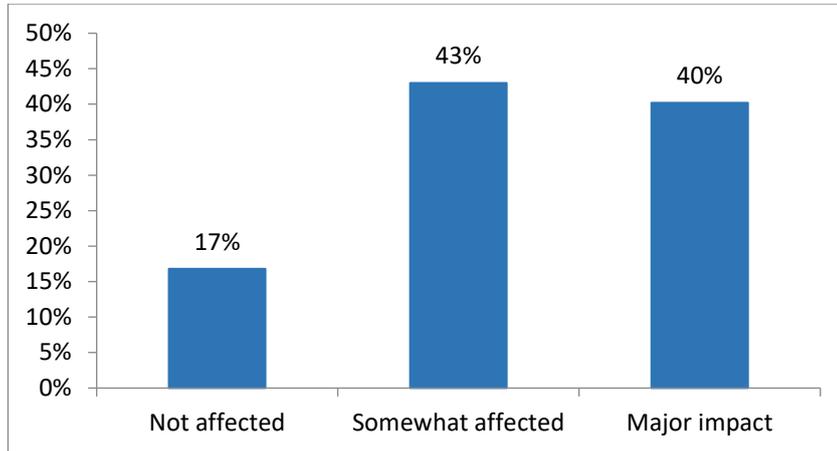
Financial Difficulty

Financial pressure arising from the COVID-19 lockdowns was explored. Just over half of the students who responded to the question (259, 51.1%) indicated that they did not experience increased financial pressure. However, many students lost their jobs, particularly casual work, as a result of lockdown. Sole parents could not leave the home to work while their children were off school. Living costs such as power for heating increased during lock down. 16

Mate korona, COVID-19 Restrictions and Clinical Placements

Very few students were not affected by changes in the number or length of clinical placements in 2020. As shown in figure 7 below, most students were somewhat affected (202, 43%), with major impact on clinical placements experienced by 40% (189) of students who responded to the survey. Just over half of respondents (55%) were able to access provisions to catch-up with clinical hours lost.

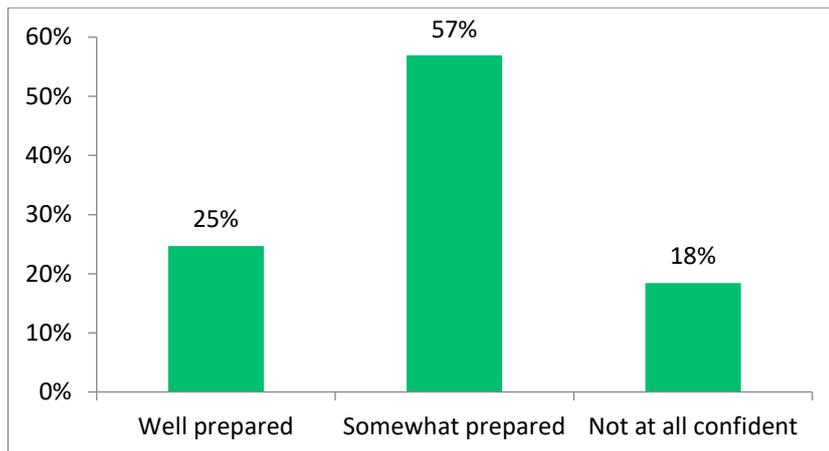
Figure 7 Restrictions on the number or length of clinical placements



The re-percussions for students of having cancelled, shortened or re-configured clinical placements in 2020 were revealed in comments the respondents provided. In general students describe:

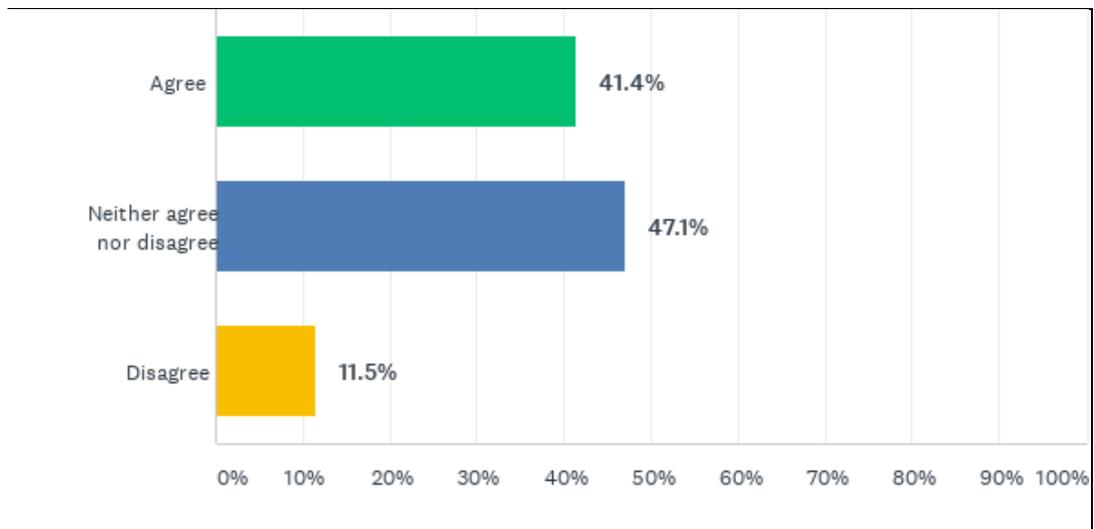
- > Missing out on placements in particular clinical environments
- > Extension to the academic year to catch-up on missed work
- > Insecurity over having enough clinical hours for registration
- > The extended academic year limiting the opportunity to earn over the long vacation.

Figure 8 Preparedness for placement after lockdown



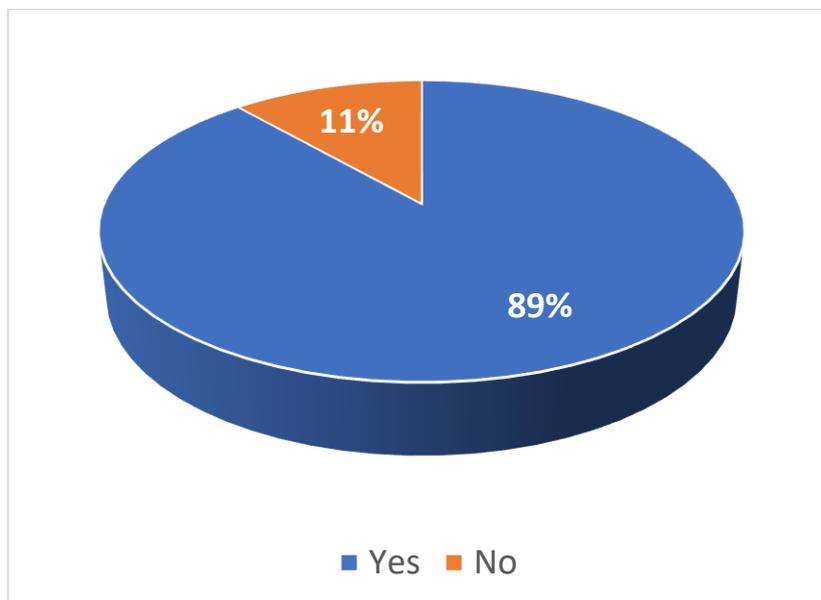
Students had limited opportunities to learn or practice clinical skills during lockdown. Consequently, only a quarter of respondents (114, 24.7%) felt well prepared for placement after the lockdown and some 18% (85) of respondents were not at all confident about placement (figure 8). Given the limited preparation available to students during lockdown, the extent to which students felt they were given sufficient time to understand the requirements of placement was explored. The data are presented in figure 9.

Figure 9 Adequate time to understand placement requirements



While many nurses had significant difficulties accessing adequate PPE during 2020, it was pleasing to learn that this was not an issue for the majority of students (figure 10).

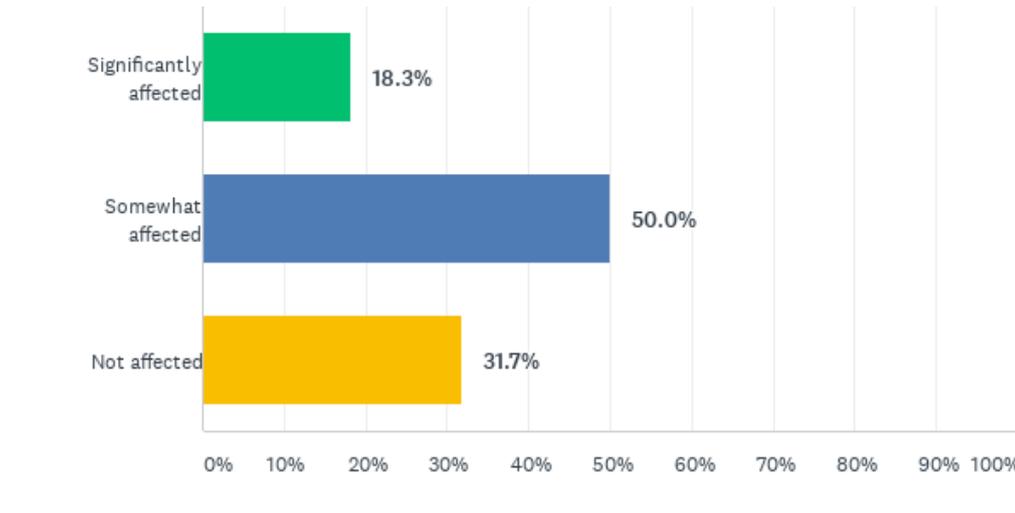
Figure 10 PPE access during placement



Academic Performance

Overall, the survey sought to understand the impact on the COVID-19 lockdown on the ability for students to successfully complete the year of study. As shown in figure 12, about two-thirds (320, 68.3%) of students were somewhat or significantly affected by the COVID-19 disruptions of 2020. However, 320 (81.7%) of respondents indicated that they were able to complete their course in 2020, and only about a quarter of respondents (123, 26.5%) indicated that future plans were affected or jeopardized by the COVID-19 disruptions.

Figure 11 Impact of COVID-19 disruptions on grades



Scope of Practice

The extent to which the student nurse scope of practice was understood by nursing students, preceptors, and other nurses encountered by students in the clinical practice environment, was explored. The Nursing Council of New Zealand does not define a student scope of practice. In this context, the term 'scope of practice', refers activity that nursing students can reasonably be expected to undertake while on clinical placement. These data are presented in Figures 12, 13 and 14. Only 5 (1%) of students admitted to not understanding their scope of practice.

Figure 12 Understanding of your scope of practice

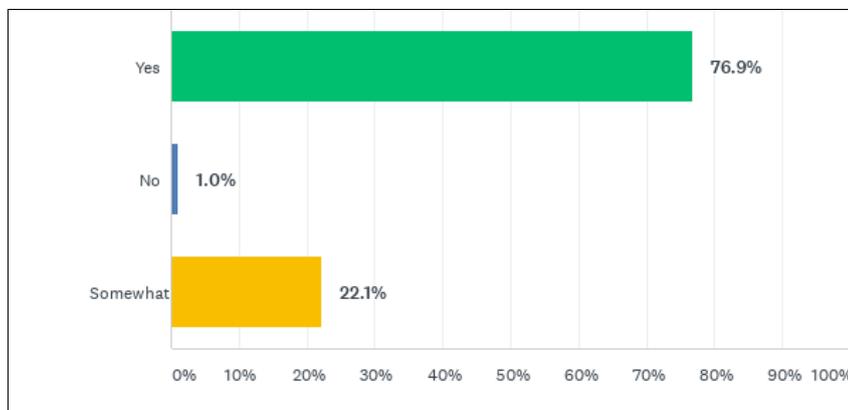
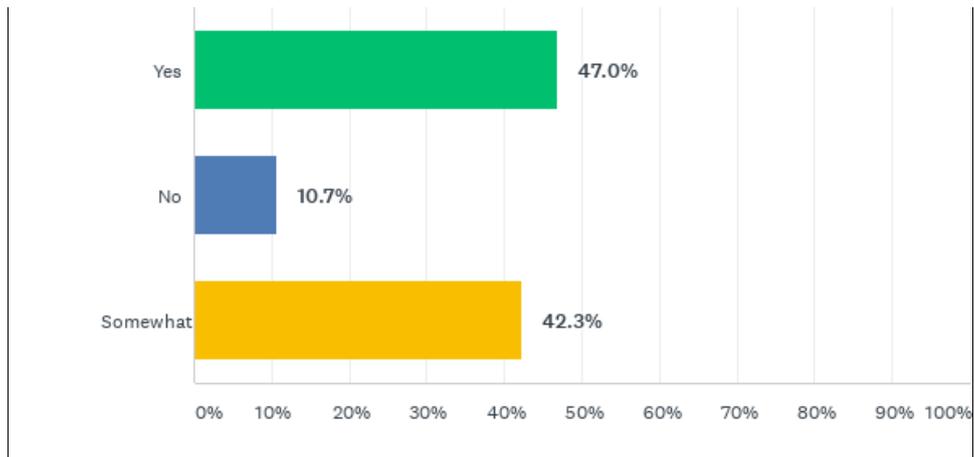
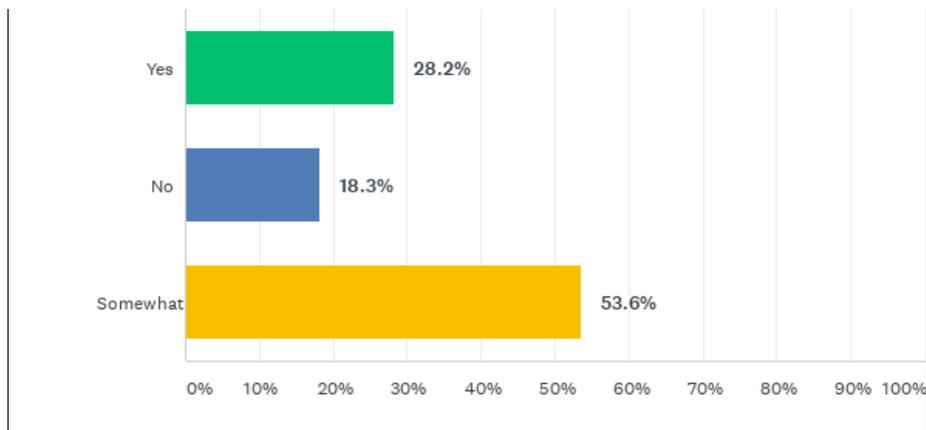


Figure 13 Preceptor understanding of your scope of practice



Responses indicated that less than half of the students (224, 47%) believed their preceptor understood their scope of practice, with 51 (11%) of respondents volunteering that they did not think their preceptor understood their scope. Forty-two % of students thought preceptors somewhat understood the student scope of practice.

Figure 14 Understanding of student scope of practice by nurses

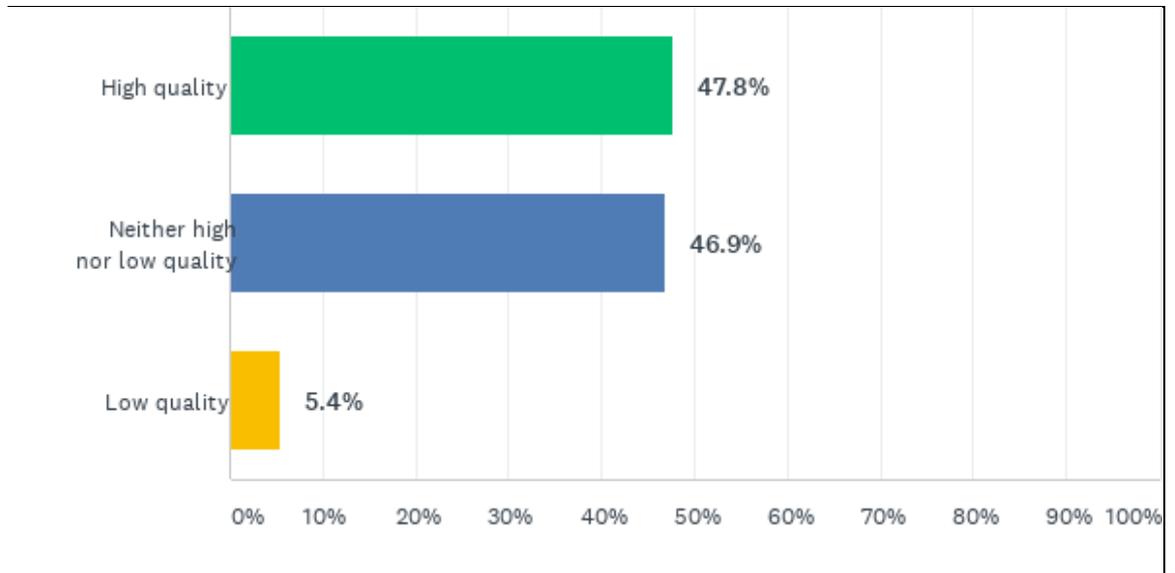


Less than one third of student respondents (134, 28.2%) believed that nurses encountered on placement understood the student scope, and around half (255, 53.6%) of respondents thought that nurses somewhat understood the student scope. Against this background it was not surprising to find that a third of students (159, 34.0%) who responded to the survey reported that they had been asked or expected to work outside of their scope on placement.

Preceptorship

Students were asked to rate the quality of preceptorship experienced on clinical placement. The responses are shown in Figure 15 below

Figure 15 Quality of preceptorship for clinical placements

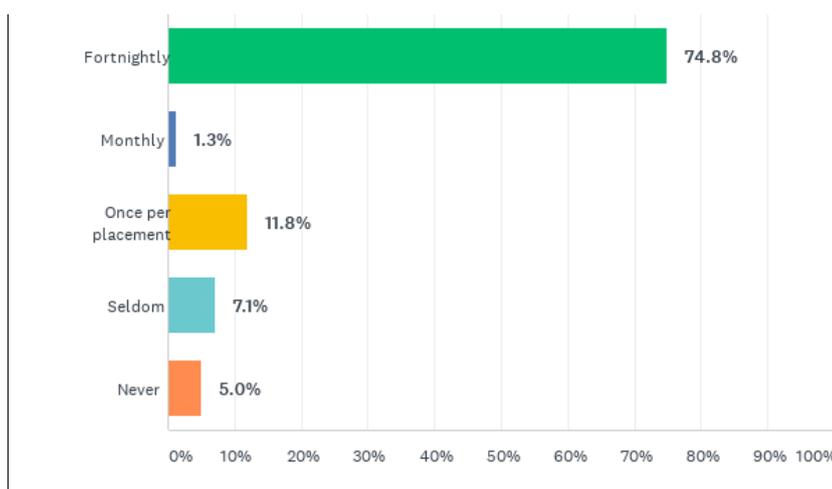


Clearly, the experience of preceptorship on placement was very mixed. Almost half of students (213, 47.8%) rated the preceptorship as high quality, but most students (209, 46.9%) reported that the experience was middling. Only 24 (5%) respondents had experienced preceptorship of low quality.

Respondents were asked what traits they valued in a preceptor. Comments representing common themes are listed in the Appendix. The following comment expresses what many students conveyed:

- > Someone who pays an interest in you
- > Someone who is willing to teach you skills
- > Someone who lets you do things rather than doing them all themselves
- > Someone who understands you are a student and does not expect you to know everything

Figure 16 Frequency of tutor oversight of clinical placement



Three-quarters of respondents (297, 74.8%) reported that their tutor oversaw their clinical placement fortnightly. Some students indicated that the frequency of oversight was weekly. However, 48 (12%) students reported that their placements were seldom or never overseen by their tutor.

Extra Support

A peer mentorship or buddy system was available to nearly 40% (194) of students. Similarly, 37% (180) had opportunities to meet nursing students from other nursing students at the same school on a regular basis. Only around a quarter (121, 24%) of respondents had access to any mentoring outside of school, from qualified nurses, for example.

Mate korona, COVID-19 Issues

Most respondents (390, 77.8%) felt their school was adequately prepared for another lockdown.

Asked whether they would take the COVID-19 vaccine if offered it, 85% (413) respondents indicated that they would seek vaccination. Further, three quarters of respondents knew where to access clinically relevant information regarding the COVID-19 vaccines. Two thirds of respondents (329, 66.6%) indicated they would feel comfortable Managed Isolation or Quarantine Facility (MIQ) once qualified. Similarly, almost two thirds (327, 65.7%) of nursing students who responded to the survey would feel comfortable working in ahead treating COVID-19 patients given their current knowledge.

Other issues

The survey concluded by asking respondents if there were any issues not raised elsewhere in the survey. There were 59 comments to be explored thematically. With the small number of comments made the results are not generalisable. The themes are listed below:

- > Acknowledge gender diversity
- > Bullying
- > Extra time in class to consolidate and practice skills
- > Financial support
- > Funding support during placement
- > More information about employment opportunities during study

Summary

Significant disruptions were experienced by nursing students in 2020.
The greatest impacts for students were:

- > Reduction in the number and or length of clinical placements
- > Reduction in the ability to earn through usual employment channels
- > Affected grades
- > Longer academic year to catch-up

Additional findings were:

- > Understanding of the student scope of practice while on placement is not optimal
- > Students rate the quality of preceptorship highly
- > Peer support or mentoring opportunities are limited
- > Students have good access to COVID-19 clinical resources
- > Very high numbers of students would take the COVID-19 vaccine if offered

Appendix

Selected comments grouped by theme are included verbatim below.

Impact of COVID-19 on Clinical Placements

- > *Unable to complete our first placement so instead had 1 x 3-week placement at the end of the year*
- > *We had to alter our community placement to be done over the phone, but it was still completed*
- > *first semester placements were pushed back to the end of the year, which made it difficult to remember what we did and to put it into practice.*
- > *Rescheduling of placements and therefore having an almost 12-month study year*
- > *Lost our year one hospital exposure day which was not repeated, and our last week of our first placement and now must make up hours in other placements to meet registration criteria.*
- > *My placement was cancelled completely during lockdown and I was only able to make it up at the very end of the year at which time my 8 week placement was cut to 6 weeks but we were made to go 5 days a week instead of 4 to make up the difference, this was hard as trying to complete the required paperwork without that day off. As a parent of 3 kids I had no choice but to work to make ends meet so working 5 days during placement affected my ability to also provide for family it was just one more stress of COVID lockdown*
- > *Missed out 4 weeks of clinical placements, which provided some pressure to fill out required clinical hours.*
- > *The same number of clinical hours and paperwork packed into fewer hours mean very busy placement and minimal time to complete work. Along with lack of personal time and decreased hours of sleep.*
- > *Didn't have placement at all in first year 2020. Therefore, all practical skills, communication skills, how to deal with patients, what are clinical expectations were severely hindered. The first clinical placement in 2nd year feels as if there is more pressure added and feeling very inexperienced.*
- > *We only attended 2 weeks of our clinical placement and missed out on the rest. Getting feedback from nurse mentors in facilities was difficult because they were also affected and were busy.*
- > *Programme was extended into the holiday for students that did not get a chance to do their clinical placements during lockdown. However, clinical hours gained from clinical placements were greatly reduced and its insufficient to greatly contribute to the 1100 hours needed for graduation.*

Financial implications

- > *Placements over the summer was difficult as we couldn't work instead, leaving us with minimal money as summer is usually when we save up for the following year. Placement travelling and parking costs a lot so not having enough saved made it a bit difficult for 2021/my final year financial wise.*

Online learning

- > *It was difficult at first, to adapt to online learning but it challenged me, and I've now adapted towards it. I consider it's become a strength and a key skill for my future.*

I've learnt a lot about technology I wouldn't have discovered without this experience and I'm still learning all the time!

- > *Back up protocol learning. Which means that if another pandemic, lockdown, or anything else that inhibits nursing students to go into labs/ lectures/ tutorials they can develop their skill set at home.*
- > *Loved having recorded sessions available to go back and revise, you don't always click on in classes but being able to go back and watch it is great*
- > *We were off campus for the duration of COVID lockdown. During this time, we were unable to access campus facilities, Wi-Fi, library, gym, heating etc. however we received no reimbursement of costs. Online learning meant no use of labs or lab equipment but again we didn't receive reimbursement.*
- > *I really liked the 2020 study year because everything was recorded and in 2021, we still have access to them. Recorded lectures are helpful for our revisions.*
- > *The lecturers were not given sufficient training on how to use their devices and software often resulting in half a lesson being spent fixing these problems*

Social interactions lost

- > *I failed to successfully complete semester one 2020 due to Covid 19 lockdown. I feel I lost the kanohi ki te kanohi interaction with tutors and peers and somewhat became stuck in a helpless situation. I have since returned to complete semester one in 2021.*
- > *The main issue I noticed during the lockdown how withdrawn we felt without that human interaction. I believe it is vital to have that face-to-face interaction to really engage in our learning.*
- > *Over the 2020 year of nursing study I found myself feeling isolated from classmates and tutors. A platform for students specifically to talk about their papers, experiences, how they're coping, just a place to talk, etc. could be beneficial for students to feel connected and improve their abilities to cope with the disruptions of COVID-19*

Unknown legacy of 2020 Academic Year

- > *The pandemic might have impacted the quality of experience compared to other previous graduated nursing students. It would be great to consider the future consequences during the process of employment.*
- > *I worry that there will have been inconsistencies across different nursing schools around programme delivery during lockdown and clinical placements*

Gratitude

- > *I would simply like to use this as a chance to thank the tutors who supported us and facilitated us in a difficult time. Between placement troubles, the difficulties of online learning and the stress they must have endured to try keep us all together, I have nothing but the highest of respect for them.*

Traits valued in a Preceptors

- > *A desire to teach and space to let us learn, talking through what they're doing and why and those that respect we're being taught a certain way and should follow what we're being taught to do from the university.*

- > *Wanting to have a student alongside them. Taking the time to teach and challenge you as a student in a supportive way. Sharing of knowledge, open communication.*
- > *Confident, supportive, understanding, someone who cares about the development of our skills, someone who is happy to have students and understands that we are still learning, and may need more time to practice our skills. Good role modelling of practice and rapport with the patients. I value someone who is keen to have students over a few shifts and build rapport with a student and become more confident in our abilities.*
- > *Engaged, willing to take students, knowledgeable, not task/time focused, warm, and compassionate*
- > *Confidence wants to be a preceptor, willing to teach, know the scope of practice, a positive attitude.*
- > *Someone who has a lot of knowledge to give. Someone who appreciates that a student has a lot of knowledge and background themselves and that this shouldn't be overlooked. Support for future learning and development. Openness to discuss things for professional development in a safe environment. The ability to have open discussion and to feel safe to do so.*
- > *Patients and trust. Preceptors who patiently show you how things are done and then assist you to do one and then trust you to do it independently. Some preceptors won't let you do anything, and others get annoyed if you haven't done it or seen it before and can't be bothered showing you.*
- > *Willingness to teach and let me partake and practice nursing cares. Making sure I am comfortable and competent in the skills that I am practicing. And being kind.*
- > *My recent placement allowed me a space of my own to work. This gave me ability to follow up my learning online and make notes. it meant i could be found there by other RNs who offered me experiences in the roles. A relaxed preceptor did not over burden me with many aspects of the placement, instead set me tasks on a calendar so I could concentrate pre learning on those tasks and so understand where and what I was to do.*
- > *I value preceptors actively engaging in the work we are required to do as students. I also appreciate being recognised when I am doing something well.*
- > *Open communication, expectations of student evaluated each day as learning progresses and more responsibility added as needed. Teaching is also good not just following around because they are too busy.*
- > *Understanding strict but in a loving way, honest, trustworthy, knowledgeable, patient, one who doesn't shout or embarrass us in front of other staff, wise and mature and cares about helping students rather than forgetting we are there*
- > *Ability to teach me the correct way to do things; why we do it; little tips and tricks; understanding; patience when learning a skill; approachable to ask for help or questions; able to push me and challenge me.*
- > *Empathy and cultural awareness. Not every student learns the same way, also I find it important that preceptors know that for pacific students we tend to steer away from asking help as it can become quite intimidating for us. Patience is something I also value in a preceptor, we are still in learning, we will not know everything that you do.*
- > *A preceptor who understands what we are expected to gain out of that particular placement because sometimes it can feel hard to always ask if we can do certain things in order to meet competencies and you don't want to bug them all the time or feel like a burden*
- > *Please can you make sure that all preceptors get the right preceptor training before they take on a student. As well as create a list for all the things that the student nurses are allowed to do within all the different year groups so there is no questioning or unsureness of what we are able to do.*

- > *I have had more than one placement and more than one preceptor. Some were excellent preceptors, some were not. Some taught me a great deal and gave me the opportunity to teach myself, some did none of these things. This may be because they were simply too busy, but it may also be because they were not suited to the role of preceptor.*

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Mission statement

NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

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