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Enhancing clinical teaching: Introducing 5 minute preceptor model among nursing students during their obstetrical nursing clinical placement

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ABSTRACT

Clinical education is a very important aspect in professional education in nursing. In traditional model (patient centered) of clinical education, Preceptor tend to spend more time related to patient care rather than teaching and spending time with students (learner centered) for learning activities. To address this issue, a Five-minute preceptor model was introduced in one of the nursing institutions in UAE for the nursing students during their clinical training (n= 33) during obstetrical clinical placement. The main aim of the study is to enhance the clinical learning among the nursing students by adopting five-minute preceptor clinical teaching model. The study undertaken is an interventional study. The intervention introduced and studied revealed that it made direct and indirect impact positively on aspects that was evaluated using Kirkpatrick's levels of evaluation model. (Level-I Reactions: Evaluation at this level measures the students' reaction, which focuses on What they felt about the training, Level- II Learning: Evaluation at this level measures the extent resulting increase in Knowledge, skills and attitude, Level –III Transfer: Evaluation at this level measures the extent of behavior and capacity Improvement/ implementation and application due to the training. Level-IV Results: This level of evaluation addresses the success of the training program. The analysis revealed that 80% to 100 % of the students agreed that this five-minute preceptorship has helped them to achieve the clinical learning objectives during their clinical placement. This 5-minute preceptor method of clinical education is well perceived by all students as very interesting and comprehensive method. All the students agreed that this method of teaching has helped to improve self-confidence and critical thinking. Standardized 5MP educational package can be prepared and studied its effectiveness in enhancing the learning before establishing and adopting in the clinical learning setup.

INTRODUCTION

Clinical education is an important aspect in professional nursing curriculum. The main aim of clinical education is to help the nursing students to obtain and develop professional nursing skills in an appropriate clinical setup. Clinical education provides the students with appropriate clinical

experiences through the learning activities, strategically planned and provided. It also enhances appropriate link between theory and practice and at the same time provides opportunity to have a practice on how to solve complex problems of health care, provide safe care and enhance critical thinking.(Farzi, Shahriari, & Farzi, 2018).

One of the things that is exciting and at the same time terrifying is bringing new life into the world. Obstetrical nursing is a combination of art and science that pivots on excellence in obstetrical nursing practice. The obstetrical nursing program in the nursing institute in UAE is designed to enable undergraduate nursing students to gain competency relating to the concepts, principles and nursing care of child bearing women and maternity clients in the UAE. The course includes both theoretical and Practical education and trains the students to acquire knowledge and skills and demonstrate competency in rendering nursing care to women during her antepartum, intra and post-partum period. Students also are trained to develop competency in managing normal neonates and participate in family welfare programs during their clinical placement. It further aids in applying the nursing process to assess, plan and implement the quality care for women during their reproductive cycle and increases their competence in clinical assessment and problem-solving techniques.

Clinical training is considered as an essential and highly significant aspect of professional education in nursing. It is during the clinical placement that students relate theory to practice, learn the necessary technical and interpersonal skills, make clinical judgments, become socialized into the profession, and begin to appreciate its values and ethics. The development of competent practice is a primary goal for nursing education.

The preceptors in the clinical setting are hard pressed for time with the tension between efficiently caring for women and newborns and also making time for teaching the students. On the other hand, students, who perceive obstetrical nursing course as challenging and threatening, must receive adequate guidance & feedback in relation to their clinical learning. Nursing teachers/ clinical instructors/ clinical facilitators are in charge of clinical practice because they are the ones ultimately responsible for students' learning in the clinical practice. To accomplish this goal, multiple models of clinical teachings are followed. This includes, short and long case study discussions, obstetrical medication review and supervision of performance of clinical skills etc. Each learning episode does not follow a standard process of teaching and learning.

Becoming competent to perform the skills of nursing provides a strong sense of confidence and it

is the foundation to the development of thinking of nursing and also most importantly the critical thinking. The student learns by shadowing the preceptor who is a Registered Nurse, whose primary responsibility is patient care. While the nurse is busy in caring for the patients, the explanation for the "why" of the interventions may not be given by the preceptor and also not understood by the student, if not discussed.

The roots of teaching theories that is commonly used with the clinical teaching model today have developed out of a scheme presented by Koen and Vivian (1980) describes unique communication and teaching behaviors to guide clinical educators in developing specific teaching skills. They identified five teaching role models including conceptualization, problem solving, teacher-learner relations, feedback, and role modeling-scholarship.

FIVE-MINUTE PRECEPTORSHIP MODEL

Bott et.all (2011) formulated this concept of 5 minute preceptor model of clinical teaching. Five minute preceptor is an innovative method which is an adaptation from the OMP (one minute preceptor) concept. This is introduced to enhance the clinical teaching for nursing students after analyzing the suitability in regard to undergraduate baccalaureate nursing education program.

"One-Minute Preceptor" OMP model was first described by Neher et al (1992). This method of teaching is followed in the clinical teaching of medical students, where the student initially assesses a patient and approaches the preceptor for help from the preceptor. This OMP is a framework which enhances the key teaching and learning behaviors. It is an easy & time efficient method of clinical teaching. It comprises of 5 micro skills form the basis of one minute preceptor Model. They are termed as micro skills because they are very simple and easy to learn. These skills assist the preceptor to analyze the case & the learner, then take appropriate action to teach the learner .The five micro skills are

- [1]. Get a commitment from the learner about what (s) he thinks is going on with the case;
- [2]. Probe for underlying reasoning to explore the learner's understanding;
- [3]. Teach general rules pertaining to the case;

- [4]. Provide positive feedback for what the learner did correctly;
- [5]. Correct learner's errors and make recommendations for improvement.

Among the five of these micro skills, the first two skills focus on assessing the students' knowledge and reasoning and the last three reminds to provide specific individualized instruction.

Numerous literatures are found about OMP and its usefulness in clinical teaching for medical students William (2003) and for students of radiology Sushil (2015).

The students while on clinical are expected to shadow their preceptor and learn by observation and also learn by performing certain skills under supervision by the preceptor or clinical facilitator. Preceptors tend to focus their attention primarily towards patient care issues rather than enhancing to attend to learner issues. They do ask low level questions to clarify their knowledge, clinical data and awareness about the case, provide mini lectures to students rather than promoting discussion, reasoning and critical thinking and provide little or no feedback. However ultimately it is the faculty, who serves as the clinical facilitator is responsible for the students to achieve their clinical learning objective. Clinical facilitators in the obstetrical setting struggle to find ways to integrate students into clinical teaching and learning into their busy clinical practices while trying to minimize the disturbance to the patient care.

One minute preceptor is a learner centered model of clinical teaching during which the teaching encounter mainly focuses on the learner's reasoning, while simultaneously correlating the components of history taking, focused assessments, relevant laboratory findings, coordination of care etc. In this study, the modified version of clinical training model formulated by Bott et al (2011), which is the 5MP model was used.

Bott (2011) have analyzed the suitability and modified the concept of OMP to suit the wide scope of nursing profession and has adapted OMP as 5MP to suit clinical teaching for nursing students.

Neher et al (1992) mentions the five steps of OMP and Step I is indicated as "Get a commitment" where the student would commit for a particular treatment or diagnosis. But it is modified as "Get the student take a stand" caters to Nursing profession's broad mandate and scope of

practice. Bott et al (2011). It includes assessment, nursing diagnosis, objective setting, patient management, plan of care, coordination of care, professionalism and judgement about any aspect of learning situation currently dealt. The step II and III remains the same as OMP where the focus is on probing for the supportive evidence of the current situation presented by the student about the patient and teaching the general concepts or rules related to the aspect dealt. Step IV of OMP indicates " Reinforce what was done right" , here the step is re worded as " Reinforce the positives" which will encompass reinforcing the aspects and commenting positively on the critical thinking, exploring the rationale for the intervention, other cognitive aspects, decision making, coordination of care, patient and family education and patient safety. At OMP, the last and the step V is "correct mistakes". Here, since the nursing student will be shadowing the preceptor, mistakes and errors by the student are prevented from reaching the patient and reworded as "correct errors and misinterpretations". This will focus on discussion of the errors committed in terms of near miss, improper prioritization of care, aspects of care neglected or omitted and also the misinterpretations of the therapy, nursing considerations related to medication management, patient safety, infection control etc.

Finally, as commented by Neher et al (1992) the more realistic time frame to carry out this technique of teaching is five minutes, and this makes it more a credible teaching method with the practical and feasible declared time of teaching in 5MP.

The purpose of the study is to introduce the 5 minute preceptor model of clinical teaching, evaluate the effectiveness of it in enhancing their clinical learning experience from the student perspective.

The objectives of the research were to:

- To introduce 5MP model of clinical teaching for baccalaureate nursing students during their obstetrical nursing clinical placement.
- To evaluate the perceptions of the baccalaureate nursing students about the 5 MP model for clinical teaching ,during their obstetrical nursing clinical placement

THEORETICAL UNDERPINNING & CONCEPTUAL FRAMEWORK

In this study, the application and evaluation of 5 minute preceptor model of clinical teaching is provided, and it is related to Experiential learning theory. Experiential learning theory emphasizes the importance of personal experience and its impact in enhancing the learning. Kolb (1984) defines experiential learning as the process where knowledge is created through the transformation of experience.

The experiential learning process involves a “hands on” experience to students which helps them engage with the theory content and reflect upon the application (Haynes, 2007). According to UC Davis (2011), an experiential learning activity includes exploration, sharing, processing, generalizing, and application. This requires the student to perform an activity or task, share the results and observations, discuss and then reflect on the process, connecting it with real world examples

and applying it to another situation. In this study where the micro skills of 5minute preceptor caters to enhancement of clinical learning experience supported by experiential learning theory. Based on Kolb’s work, Burnard (1987) has provided a frame work where the 5MP steps were applied as in Fig: 1 where the Burnard’s stages of experiential learning 1 & 2 consisting of students practical experience and sharing the experience with the preceptor or the clinical facilitator relates to the step I of 5MP in which the student takes a stand based on the current situation. Stage 3 & 4 focuses on reflection of the experience based on preceptor or clinical facilitators knowledge and expertise, where it proceeds to the discussion of gaps identified, which is coherent with the stage II & III of 5MP. Lastly in the stage 5, the teacher and the student evaluate the learning and plan for the future experiences, which correlates to step IV and V of 5 MP where the focus is on reinforcement of the positives of the learner and the guidance to correct errors and misinterpretations.

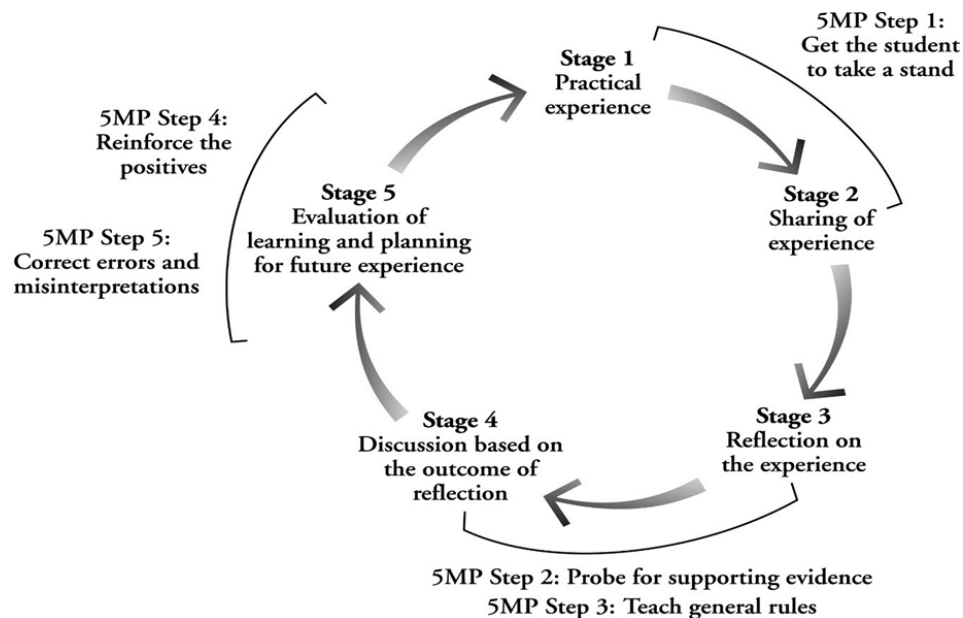


Fig:1 Application of the 5MP steps (adapted from Neher et al., 1992) to Burnard's stages in the Experiential Learning Cycle for Nurse Education (adapted from Burnard, 1987)

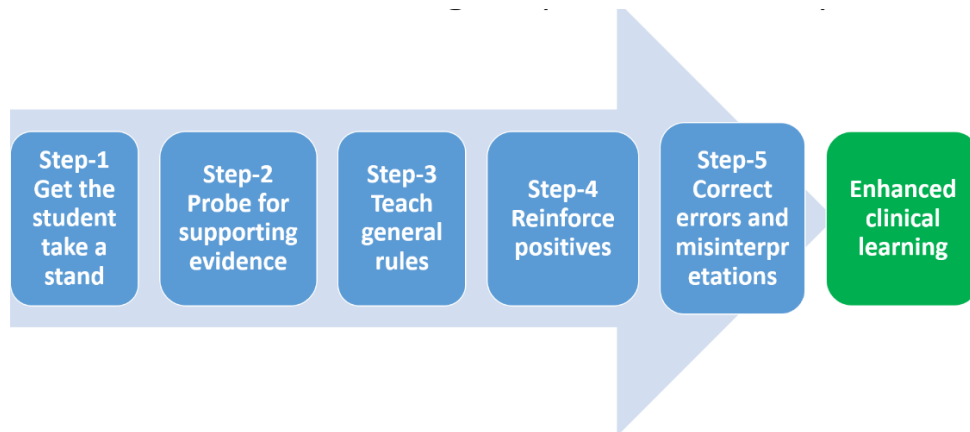


Fig: 2 Conceptual framework of adopting 5MP in enhancing clinical learning.

METHODOLOGY

In Emancipatory / Advocacy / participatory research approach, to some extent, the researcher feels that the other approaches like quantitative approach, qualitative approach and the pragmatic approach does not cater to the need of the current scenario under study, and the researcher feels he need to respond to the need of the situation of people as they adopt the research, Mike (2002). In this study, the main aim is to enhance the clinical learning among the nursing students posted in their obstetric clinical placement and the researcher here is the lecturer, obstetrical nursing course coordinator and clinical facilitator who are responsible for the clinical learning of the nursing students. It was felt that this emancipatory research approach would suit better as the new clinical teaching strategy would be introduced to enhance the learning in the clinical set up. Mike (2002) also states that the researcher here is not in a neutral stance. The intervention introduced and studied is expected to directly or indirectly make an impact.

The study undertaken is an interventional study. Obtained ethical clearance from the scientific research and ethical committee from the nursing institute. Consent was obtained from the participants after explaining to them about the 5MP concept and the model for effective clinical teaching and learning. 5MP sessions were conducted daily for the students during their clinical placement for the semester. Common Antenatal cases like pregnant women with GDM, Primi parous mother admitted with abdominal pain/ spotting/ leaking P/V / SROM, multipara and grand multi para with bad obstetrical history, women with trophoblastic disease, Ovarian hyper

stimulation syndrome, post-natal cases like women with spontaneous vaginal delivery, LSCS, Rh incompatibility along with their normal newborn and during their labor unit posting they were assigned to women in their early labor, while having spontaneous vaginal delivery, instrumental delivery, induction and augmentation of labor, and emergency cesarean sections and also were assigned to the students. The Researcher and the clinical facilitator of the study is a PhD scholar. Has served as chief nurse educator in a prestigious corporate institution, designed and implemented numerous clinical training programs. Presently serving as academic faculty in a nursing institute. The study focused on introduction of 5 minute preceptor method of clinical teaching and evaluate the effectiveness of this model of clinical teaching to enhance the learning of baccalaureate nursing students of nursing institution and are posted in the obstetrical unit for their clinical requirement.

The participants are the undergraduate nursing students, who were registered for Obstetrical nursing course in their III year of Nursing. At this level they would have completed clinical health assessment course, communication skills, Anatomy and physiology-I, psychosocial Nursing, understanding research in nursing and fundamentals of nursing courses and co-learning medical and surgical nursing (acute cases) and Health law and ethics course. They are exposed to clinical settings prior for clinical health assessment course, communication course and fundamentals of nursing course during their II year level and clinical practicum for medical and surgical course in III year level, prior to their posting to the obstetrical unit.

A Consecutive sampling was adopted among the students posted for clinical placement in the obstetrical unit, during the period when the study was undertaken. This method of sampling chosen since, Consecutive sampling is defined by Polit (2014) as "Taking all of the people from an accessible population who met the eligibility criteria over a specific time or for a specified sample size". The inclusion criteria were being the III year student, registered for the course of child and family nursing-I (Obstetrical Nursing) and posted in the obstetrical unit at the time of study. Total of 33 students were included in the study, all of them were females. The students were asked to sign an informed consent and were informed to withdraw from the study at any moment.

The data regarding the evaluation of the effectiveness of the 5minute preceptor model of clinical teaching was obtained using a proforma of questionnaire with 18 closed ended questions and 1 open ended question. The questionnaire was administered directly to the student and not posted to their mails as the researcher did not want to take a chance of poor response rate as it is one of the advantage of using the web based questionnaires. It was paper, and pen based questionnaire that was handed over to the students at the end of their clinical posting was told to respond to the questionnaire as it would take 5-7 minutes at the maximum.

This questionnaire was based on the Donald Kirkpatrick (1994) four level of evaluation model. The validity was ensured by obtaining the input from the experts in the field of Obstetrical nursing academic and clinical education.

- **Level-I Reactions:** Evaluation at this level measures the students' reaction, which focuses on What they felt about the training.
- **Level- II Learning:** Evaluation at this level measures the extent resulting increase in Knowledge, skills and attitude.
- **Level –III Transfer:** Evaluation at this level measures the extent of behavior and capacity Improvement/ implementation and application due to the training.
- **Level-IV Results:** This level of evaluation addresses the success of the training program.

For statistical analysis the psychometric scale which is the Likert scale is used to capture the feelings in regard to the item and the intensity of

the feeling. This Likert scale gets the students' response on a scale of 1 to 5; in which the score of 1 –strongly disagree, 2 – disagree, 3 – neutral, 4 – agree and 5- strongly agree. The one open ended question which is formulated to capture the students' learning experience while adopting 5 Minute preceptor method.

The response of all the nursing students (n= 33) registered in the obstetrical course and were posted in the obstetric units for their clinical placement who willingly participated in this study to each item of the Likert scale was obtained. The summary is presented as the average score of 4.73

Donald Kirkpatrick's four level evaluation model showed the following results:

Level-I Reactions

All the 33 nursing students participated actively and enthusiastically in this clinical training program. Table: 1 clearly indicates that the current method of 5MP was perceived by the students as providing specific and straight forward teaching, addressing the students' knowledge and based on students' knowledge base. They have also felt that the learning is interesting and appealing as there was correlation of patients' picture and the book picture. The mean score value for the response regarding the learners' reaction is 4.78 as given in Fig: 3

Level- II Learning

It is evident from the response of the students as tabulated in Table : 2, this method of teaching has helped them to learn to link the patient's assessment data and the current situation to formulate the nursing diagnosis, goals for care and the evidence for evaluation of care. The students have also positively indicated that this method of teaching have greatly guided their learning by provoking and guiding their thought process in terms of patient assessment and care, the average score value given as 4.8 out of 5. As per the step III of the 5MP method, it also guides the teacher to provide the general rule in relation to patient care, the students have vouched for the same and the average score is found to be 4.82 out of 5 and the overall mean score for the level –II evaluation of learning is 4.76 as given in Fig: 3

Level –III Transfer

The researcher and the clinical facilitator herself observed that the nursing students posted in the obstetric units for their clinical placement exposed to “5 Minute preceptor” method of clinical teaching were able to assess the patient comprehensively and holistically, prioritize the need and problems of the patients, prioritize the care, coordinate and provide appropriate care. Apart from this, as in Table: 3 the students also felt that they were able to view the situation comprehensively and have experienced improvement in their clinical reasoning and critical thinking. The mean score for the responses regarding this level of evaluation is 4.77 as given in Fig: 3

Level-IV Results

Almost 80% of the students have mentioned that as per the step III where the clinical facilitator provides appreciation about the positive aspects of assessment and care and step IV where the student is pointed out his mistakes and provided the rationale behind it, the students felt the encouragement and has agreed that it has helped them to correct themselves respectively. The students also have given a positive response that the 5MP method of clinical teaching strategy has improved their self-learning skills, confidence and their presentation skills. The mean score of this level of evaluation focusing on the results receives the mean score of 4.59 as given in Fig: 3

Analysis of the response for the questionnaire as per Kirkpatrick’s level of evaluation

Table: 1 Analysis of response to level –I evaluation- REACTION

Likert Item no:	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5	Average Score
1	0	0	9%	27%	64%	4.55
2	0	0	0	36%	64%	4.64
3	0	0	0	9	91%	4.91
4	0	0	9%	0	91%	4.82
13	0	0	0	0	100%	5

Table: 2 Analysis of response to level –II evaluation -LEARNING

Likert Item No:	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5	Average Score
5	0	0	0	18%	82%	4.82
6	0	0	18%	0	82%	4.64
9	0	0	0	18%	82%	4.82
12	0	0	9%	0	91%	4.82
18	0	0	9%	9%	82%	4.73

Table: 3 Analysis of response to level –III evaluation- TRANSFER

Likert Item No:	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5	Average Score
7	0	0	0	9%	91%	4.91
8	0	0	0	18%	82%	4.82
16	0	0	0	36%	64%	4.64
17	0	0	9%	9%	82%	4.73

Table: 4 Analysis of response to level –IV evaluation – RESULTS

Likert Item no:	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5	Average score
10	0	0	18%	18%	64%	4.45
11	0	0	0	18%	82%	4.82

14	0	0	0	36%	64%	4.64
15	0	0	9%	36%	55%	4.45

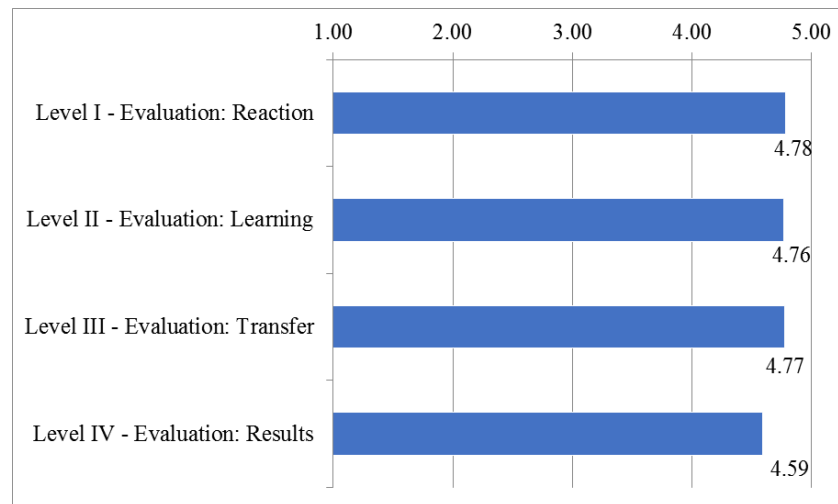


Fig: 3 Mean Score of Kirkpatrick's four level of Evaluation

All the students agreed that 5 minute preceptor method of teaching has helped to improve self-confidence and their critical thinking. It was also found to be an interesting way of learning. The students also agreed that they were able to be guided in a very methodical way where the clinical facilitator questioned them which provoked them to think and come up with a solution later they were appreciated for the positive aspects of care and the teacher also provided general rules and concepts of care which made them gain so much with this experience of learning with 5MP.

"...the teaching with the 5minute preceptor model helped to focus on "why" of things..., in other words it has made me to think about the rationale for any nursing actions"

"It helped me to organize my thought flow regarding patient care"

"Able to get full picture about my patient"

"It was very interesting as I was able to relate the theory to the actual clinical scenario"

"I have begun to think critically correlating the assessment details"

"Able to make me face the real situation with confidence"

Among the literatures that was consulted, ample literatures are available regarding the studies that were undertaken related to effectiveness of one minute preceptor method of teaching is available

and majority of it were found to be used for medical students. Bott et al (2000) have modified OMP to suit the scope and need for nursing education and established as 5MP and has recommended to use to evaluate the effectiveness in nursing education. This present study has been undertaken to introduce the 5MP to the nursing students during their posting in obstetrical unit as a part of their clinical placement and was found to be very effective than the traditional clinical teaching strategies. The limitation of the study is identified by the researcher as the small number of samples used in this study and also it was tested in one institution that makes it generalize the results.

RECOMMENDATION FOR FUTURE RESEARCH

This study would provide an insight to adopt 5MP model of clinical teaching that would positively enhance the clinical teaching. The outcome of this study exhibiting the positive feedback and the evaluation responses received from the students and also from the researcher and the clinical facilitator endorses the suitability for clinical nursing education. The study would provide a baseline for other faculties to implement 5MP method in the clinical field and appreciate the steps/ the micro skills of this teaching strategy to improve the student outcomes In the future same

study will be planned to be undertaken for all the students.

This 5 minute preceptor method of clinical education is well perceived by all students and can be used by all faculties teaching the clinical courses and enhance their teaching experience and also enhance the learning of students in a very interesting and comprehensive manner. Being short and effective method of clinical teaching, this can be routinely implemented in clinical teaching.

Similar studies can be undertaken to evaluate the effectiveness of 5minute preceptor method of teaching. Qualitative research method can be used to capture in-depth understanding about the learners' perception and impact of this 5 MP. Preceptor workshops can be conducted using role playing and simulation Bott (2011). Standardized 5MP educational package can be prepared and studied its effectiveness in enhancing the learning before establishing and adopting in the clinical learning setup.

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