PERCEPTORS' PERSPECTIVE ON PROFESSIONAL NURSING STUDENTS' CARE

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Perspektif Preseptor Klinik Tentang Caring Mahasiswa
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ABSTRAK

Mahasiswa profesi Ners merupakan calon perawat profesional masa depan. Perseptor klinik adalah perawat klink yang bertugas untuk mengajar dan mendukung mahasiswa profesi Ners dalam melakukan pelayanan. Caring, merupakan pelayanan yang dapat mempengaruhi kepuasan pasien dan keluarga. Penelitian ini bertujuan menganalisis caring mahasiswa profesi Ners dari perspektif preseptor klinik. Metode penelitian menggunakan pendekatan explanatory of mixed method. Teknik pengambilan sampel menggunakan purposive sampling, sehingga didapatkan 74 responden yang terdiri atas 70 responden untuk penelitian kuantitatif dan 4 responden untuk penelitian kualitatif.Data kuantitatif menggunakan instrumen caring assessment tools, data kualitatif diperoleh melalui wawancara individu secara mendalam (indepth-interview). Data kuantitatif ditentukan dengan analisa deskriptif menggunakan isu strategis yang ditentukan oleh rata-rata mean composite pada tiap item. Nilai rata-rata mean composite >3 akan dijadikan isu strategis. Hasil penelitian menunjukkan secara keseluruhan ratarata mean composite 2.8. Berdasarkan hasil wawancara diperoleh 3 tema : mahasiswa masih sering bermain ponsel saat berinteraksi dengan pasien dan keluarga, malu untuk meminta kompetensi dan pembiasaan caring. Prinsip caring dalam melakukan pelayanan keperawatan hendaknya diterapkan oleh mahasiswa dengan cara role model dari perawat klinis dan pembiasaan penerapan caring dari tahap akademik.

Kata kunci: caring, mahasiswa profesi ners, preseptor klinik

ABSTRACT

Nursing professional students are future professional nurses. A clinical perceptor is a clinical nurse who is tasked with teaching and supporting students of the nursing profession in carrying out services. Caring is a service that can affect patient and family satisfaction. This study aimed to analyze the caring of nursing students from the perspective of clinical preceptors. The research method uses an explanatory mixedmethods approach. The sampling technique used was purposive sampling, so that 74 respondents were obtained, consisting of 70 respondents for quantitative research and 4 respondents for qualitative research. Quantitative data using caring assessment tools and qualitative data were obtained through in-depth individual interviews. Quantitative data is determined by descriptive analysis using strategic issues determined by the mean composite average of each item. The average value of the composite mean >3 will be used as a strategic issue. The results of the study showed an overall mean composite average of 2.8. Based on the results of the interview, 3 themes were obtained: students still often play mobile phones when interacting with patients and families, are embarrassed to ask for competence, and habituation of caring. The principle of caring in providing nursing services should be applied by students by way of role models from clinical nurses and habituation of the application of caring from the academic stage.

Keywords: caring, nursing professional students, clinical perceptors

INTRODUCTION

Student status is given to students who have graduated from high school or

its equivalent and are continuing on to higher education. Nursing students have two phases in their education: academic

and professional.1 Caring is a behavior that nursing students and nurses must demonstrate when implementing nursina care. especially when interacting with clients. Caring can influence the quality of service and patient satisfaction; the lower the caring level, the lower the patient satisfaction.2 After becoming a nurse, caring will be the first foundation when providing services to patients.3 Thus, nursing services can reduce the anxiety levels of patients receiving treatment at the hospital.4

The results of previous studies at GMIM Pancaran Kasih General Hospital in Manado stated that most of them were satisfied, and nurses at the hospital had caring, with a p-value of 0.04, which means there is a relationship between satisfaction and caring. 5 Based on the results of research on Nursing Students at Padjadjaran University in 2018, it was found that 132 (54.8%) nursing students had negative caring. The highest negative caring was mainly in the dimensions of existentialphenomenological-spiritual strenath (61.4%), sensitivity to oneself and others (58.9%), and destiny-hope (58.1%). 6 The average caring value of nursing professional students was 59.66 from a minimum value of 43 and a maximum value of 70, which means it is still quite low. 7 Based on initial data collection. it was found that 2 out of 4 clinical preceptors stated that nursing professional students were indifferent when meeting patients and families.

Caring is the behavior that underlies nursing care. Several factors that can influence caring include emotional exhaustion, workload, and self-efficacy.⁸ ⁹10 Every service carried out by nursing professional students requires the application of caring behavior.

In the educational process, nursing students undergo several stages, such as basic professional nursing, maternity nursing, pediatric nursing, psychiatric nursing, medical-surgical nursing, community nursing, and others. In

completing each stage, students are accompanied by clinical preceptors. 11 Clinical preceptors are practicing nurses who work in a specific nursing area, with providing of teaching, task counseling, acting as role models, to support students in certain periods and goals as professionals. 12 The purpose of this study was to determine the image of nursing students' caring from the perceptions of clinical preceptors. This used clinical preceptors' nursing students' assessments of caring, which is still rarely done.

METHODS

The method used is an explanatory mixed method, which uses a combination of quantitative and qualitative. This research took place in the Jember area, including at one hospital, one community health center, and two independent nursing practices. The study was conducted from May to July 2024.

The research population is all pThe sample of nursing profession students in Jember area, using a purposive sampling technique, the sample in the study amounted to 70 preceptors for quantitative research, and 4 preceptors who were interviewed in-depth. The inclusion criteria of quantitative data research are clinical preceptors who conducted guidance have assessment of nursing profession students, have been a preceptor for at least 6 months, have a preceptor certificate, and are willing to be respondents. The exclusion criteria of the study are clinical preceptors who are on leave, or on outside duty when data collection. There is only one variable in this study, namely caring for nursing profession students. The researcher explanation of provided an researcher's identity, research title, objectives, and time required to collect data, both in quantitative and qualitative data collection. Respondents who are willing sign the informed consent (approval) sheet of the study.

This research received ethical approval from Dr. Soebandi University on May 13, 2024, under the number 314/KEPK/UDS/V/2024. The researchers applied research ethics, including respect for human dignity, freedom from coercion, benevolence, and justice.

Data collection was conducted using a quantitative method first, using the Caring Assessment Tools (CAT) questionnaire in the form of a positive statement with five answer choices, namely a score of 1 for inappropriate, a of 2 score for of inappropriate. а score appropriate, and a score of 4 for very appropriate. The questionnaire was tested for validity with Pearson productmoment and reliability with Cronbach's alpha coefficient test, with the results of the validity test above 0.6319 and the reliability test >0.7.

The qualitative research conducted through in-depth interviews using Zoom meetings, lasting 1-2 hours per participant. These interviews were conducted to identify the perceivers' perceptions of caring for nursing students. The qualitative research involved four participants (two from the hospital, one from the community health center, and one from an independent nursing practice). The inclusion criteria for participants were clinical preceptors who provided guidance and assessment to nursing students, had been a preceptor for at least six months, had a preceptor certificate, were appointed by the institution as a representative, and were willing to be respondents. The exclusion criteria for the study were clinical preceptors who were on leave.

The collected data was then processed and analyzed using descriptive analysis. Descriptive analysis uses strategic issues determined by the average composite mean for each item.. The average composite mean value >3 will be considered a strategic issue. Qualitative

data uses descriptive analysis using thematic analysis techniques.

RESULTS

Table 1 shows that the majority of clinical perceivers are women (65.7%), with most having worked for >4 years (65.8%), and less than 1 year as a clinical perceiver (50%).

Table 1. Distribution of respondent characteristics based on gender, highest education, marital status, and length of time as a perceiver based on quantitative data

Respondent n Percenta characteristics (%)	ige
(1.1)	
Gender	
Man 24 34.3	
Woman 46 65.7	
Length of work	
<1 year 9 12.8	
1-4 years 15 21.4	
>4 years 46 65.8	
Long time as a	
perceiver	
<1 year 35 50	
1-4 years 9 18	
>4 years 26 32	

Table 2. Description of caring behavior of nursing professional students based on quantitative data (n=70)

No	Caring	Mean rating
		composite
1	Students provide attention to patients during treatment	2.7
2	Students always smile sincerely when treating patients	2.6
3	Students encourage patients to say whatever they are complaining about and feeling	2.5
4	Studentcheck the schedule of the patients he manages regularly	2.8
5	Students encourage patients to do things related to their beliefs (such as praying, etc.)	2.4
6	Student ask patients about their experience of patient care	2.7
7	Students explain to patients about the patient's condition and the actions that need to be taken for the patient.	2.9
8	Students tend to keep their promises when they make promises to patients.	2.9
9	Students involve patients when discussing patient health.	2.6
10	Students come immediately if the patient needs it	2.7
11	Students provide motivation to patients to recover	3.2

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No	Caring	Mean rating composite		
12	Students encourage patients to ask questions about their	2.7		
	medical condition.			
13	Students are friendly to patients	3.1		
	and their families.			
14	Students tell patients that they 2.8			
	understand the complaints they			
	are experiencing.			
15	Students patiently listen to	2.6		
	patients' expressions of feelings			
	about the illnesses they are			
	experiencing.			
16	Studenthelp patients not to be	2.9		
	too anxious or worried about			
	their medical condition			
17	Studentassist patients in	3.1		
	carrying out their needs			
	according to student			
	competencies			
18	Students try to provide comfort to	2.7		
	patients			
	Composite mean average	2.8		

Table 3. Distribution of respondent

characteristics (n=4)					
Respondent	Ν	Percentage			
characteristics		(%)			
Gender					
Man	2	50			
Woman	2	50			
Length of work					
<1 year	0	0			
1-4 years	1	25			
>4 years	3	75			
Long time as a					
perceiver					
<1 year	0	0			
1-4 years	1	25			
>4 years	3	75			
Perceiver age					
20-29 years old	1	25			
30-59 years	3	75			
There is a					
family/kinship					
relationship with					
the respondent					
Yes	0	0			
No	4	75			

Based on table 2, the results show that most of the nursing professional students based on the perception of clinical preceptors have not implemented caring (average composite mean: 2.8) and there are three items above the composite mean rating, namely the statement of providing motivation to patients to recover, being friendly to patients and families, and

helping patients carry out their needs according to competence.

Table 3 shows that the qualitative respondent data for gender is the same for men and women with respective values (50%), with the majority having a work period of >4 years (75%), and less than 1 year as a clinical perceiver (75%).

Based on the results of interviews with 4 clinical preceptors, the following results were obtained:

- The implementation of caring by nursing students is not yet optimal, this is because students still often play with their cell phones when interacting with patients and families.
 - "Most nursing students are often at the patient's side to listen to complaints, but yes... students often play with their cell phones too" (P1)
 - "Actually, caring students are good, but often they only focus on their cell phones, so when they are called by patients, they still have to be reminded by nurses (P3).
- Nursing students are happy when given the opportunity to provide nursing care to patients, but are embarrassed to ask for competency.
 - "Nursing students are happy when they carry out competencies, for example inserting an IV, but they have to be told first" (P2)
 - "Students lack initiative when it comes to taking action" (P3)
- 3. CaringIt must be made a habit since students are at the academic stage, so that when they are at the professional nursing stage, they are used to it. "Caring requires a long process of getting used to" (P4).
 - "Caring for students is a habit from the undergraduate program" (P1).

"Caring should be assessed while in the undergraduate program" (P2)

DISCUSSION

Based on tables 1 and 3, the results show that the majority of preceptors who conducted caring assessments of students varied. The gender of the quantitative data was predominantly female, with most having worked for >4 years, and <1 year as a clinical preceptor. The general data for the qualitative study showed no difference in gender, with most having worked as nurses for >4 years and clinical preceptors for >4 years, with most aged 30-59 years, and all preceptors having no family ties with the respondents. Gender, work experience, and length of clinical preceptor experience influenced assessment. person's Clinical preceptors are senior nurses working in a service setting and are experts and experienced in providing training and practical experience to students. 13 One of the practical experiences and assessments that can be provided by clinical preceptors is related to caring.

This study states that nursing students have sufficient caring based on the assessment of clinical preceptors, which indicates that caring is sufficient to underlie the care carried out by students. Caring is the essence of all nursing actions, which is based on the desire to understand, help, and reduce suffering by doing the best actions for health. 14 The caring process consists of how students understand significant events in the client's life, being emotionally present, doing something for others as they would do for themselves, providing information, and facilitating the client's path in undergoing life transitions, and trusting the client in living life. Caring contains three inseparable things: attention, responsibility, and being done sincerely. Caring that can be done by nursing students includes sincere attention to patients, smiling when providing care, and so on. Several

factors can influence caring, such as self-efficacy, social support, and personality type. 15 16 Caring carried out by nursing students is important to do, because it can affect the quality of services such as hospitals, community health centers, and independent practices.

Based on Table 2, it was found that many nursing students motivate patients to recover. Motivation to recover or enthusiasm for life is important for clients, especially when undergoing medical treatment. Nursing students' caring can be demonstrated through therapeutic communication, both verbally and nonverbally. This communication can increase the motivation to recover in clients. 17 Another thing that nursing students usually do is be friendly to patients and their families. Friendliness is one component of caring, and smiling is one indicator of a nurse being friendly and warm. 18 Nurses with caring behavior engage in interpersonal relationships that show affection and love. In addition, carrying out activities according to competence is also a manifestation of caring behavior.

Table 2 states that nursing professional students are assisting patients in fulfilling their needs according to their competencies. This is consistent with the results of interviews conducted with nursing professional practice field perceivers, who stated that students were happy when given the opportunity to carry out nursing care, but students were embarrassed to ask for this competency from the field perceivers. Competence is something that students must do. Competence is the ability of professional students to carry out a job correctly and with excellence based on knowledge, skills, and attitudes effectively. 19 Competence is needed to support the goals to be achieved. This competency is demonstrated by the ability of nurses to provide health services to the community. In carrying out actions. nurses require

interprofessional collaboration to provide services and pay attention to ethical and moral codes. 20 The achievement of nursing professional students' competencies will influence their skills when they become professional nurses.

Being busy playing with mobile phones is another complaint from field observers. This is consistent with previous research, which stated that students are preoccupied with their which phones. can disrupt concentration. Mobile phone use can have a significant impact on behavior. Excessive use can lead to impaired concentration. Concentration is the ability to focus attention during the learning process, which can impact activities or work. 21 Nursing students who are unable to concentrate can impact nursing services in the practice setting.

Clinical preceptors stated that caring is a behavior that must be accustomed in nursing students: this habituation can begin when students are at the academic level. Caring in nursing students is the first place for students to learn about the values and essence of the nursing profession. 3 In addition to habituation, caring behavior can be developed through clinical professional nurse role models, effective simulation communication. usina placement experiences and alternative clinical settings. 21 Caring behavior is an important thing that must be applied by nurses with habituation carried out at the academic stage. The limitation in this study is the relatively small number of respondents for qualitative data, the advantage of this study is data collection using a mix method. namely quantitative qualitative. The implication of the study is knowing the assessment of nursing students' caring conducted preceptors, so that it can be used as evaluation material. especially educational institutions.

CONCLUSION

This study concluded that good caring of nursing students is in providing motivation to patients to recover, being friendly to patients and families, and helping patients carry out their needs according to competence. This study has three themes based on the perspective of clinical preceptors about caring of nursing students, namely students still often play with their cellphones when interacting with patients and families, happy when given the opportunity to provide nursing care to patients, but embarrassed to ask for competence, and the habit of caring since students are in the academic stage, so that when they are in the nursing profession stage, they are used to it.

Further research suggestions can be carried out by providing training to improve student caring.

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