

## The influence of the Clinical Learning Environment and Learning Transition on Satisfaction with a Gerontological Nursing Clinical Practicum in Nursing Students

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### Abstract

*This study used a descriptive survey design to examine the impact of the clinical learning environments and learning transition nursing students experienced the gerontological nursing clinical on the satisfaction with clinical practice. A convenient sample of 211 4<sup>th</sup> year nursing students who had the gerontological nursing clinical practicum from one College of Nursing at Private University in South Korea was recruited and completed the surveys from October to December 2019. This study showed that the satisfaction with a gerontological nursing clinical practicum was significantly correlated with clinical learning environments and learning transition. The results of this study highlights the need to create a safe and positive clinical learning environment for quality gerontological nursing clinical practicum, so hospitals and nursing schools need to make efforts to promote clinical sites as an educational learning environment in collaborative relationships.*

**Keywords:** Clinical Practicum, Clinical Learning Environment, Learning Transition, Satisfaction, Gerontological

### 1. INTRODUCTION

South Korea officially entered an aging society in 2017 with the number of older people (age≥65 years) exceeding 14%, and is expected to become a super-aged society with the number of older people (age≥65 years) reaching 24.3% by 2030 [1]. The increase in the ageing population will lead to an increase in demand for nurses providing quality older adult care. Also, nursing education needs to provide sufficient education and training for care of older adults. In particular, nursing educators in undergraduate programs should provide nursing students with a high-quality education to learn and practice knowledge and skills to meet the diverse and unique needs of older adults [2].

Undergraduate nursing students should have clinical practice, applying theories and clinical skills to older adults in clinical settings. During clinical practices, they are allowed to learn as clinical experts and practice what they learned from theoretical education. Thus, the clinical practice in nursing education curriculum should be developed to provide students with practical environments in clinical settings, so nursing students can practice and improve professional nursing knowledges and skills [3-4]. During the clinical practice, nursing students will have the opportunity to integrate nursing knowledge with practice, practicing problem-solving, decision-making, and organizational and time management as professionals [5].

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Nursing students are reported to experience stress in a variety of areas, including lack of expertise and skills, tension over patient care, burden of excessive tasks, adaptation to an unfamiliar clinical environment, fear of mistakes, and difficulties in interpersonal relationships with colleagues and clinical practice leaders and medical staff. Thus, learning activities in high-quality clinical learning environments is important to improve nursing students' satisfaction with clinical practice [6].

The clinical learning environment is a concept that focuses on the climate and overall atmosphere of the clinical education environment [7]. Rof and McAleer (2001) have emphasized the importance of the climate in which learning occurs [8]. Recently, evaluation of clinical learning environment in clinical education is considered important in accreditation of healthcare professionals' education [9]. Optimal clinical learning occurs only, when nursing students perceive mental and emotional well-being in a psychologically safe environment [10]. Nursing students believe that the psychologically safe environment supports individual learning needs and the relationship between supervisors and nursing students is rooted in trust [11]. Thus, it is needed to gain insight into the educational functions of the clinical learning environment by exploring these environments [12], so it can help improve nursing students' learning opportunities and improve their satisfaction with learning.

A recent study has reported that nursing students' clinical practice experience with older adults was more positive in evaluating the clinical learning environment for those considering employment in the field of older adult nursing [13]. Also, nursing students reported that the supervisory relationship has the most significant impact on satisfaction with the clinical learning environment, and educational atmosphere within the nursing team was related to their satisfaction [6]. On the other hand, the atmosphere and the leadership style of management in wards were reported as less important factors in learning [12].

Little research on the clinical learning environments of nursing students, particularly for older adult nursing, has been conducted in South Korea. Supportive and educational clinical learning environments are major concern regarding the quality clinical practice experience [6]. Thus, in order to improve the quality of clinical practice for older adult nursing, it is needed to investigate nursing student' clinical learning environments, attitude and experience in clinical practices of older adult nursing.

This study examined the impact of the clinical learning environments and learning transition experienced by nursing students in clinical practice course of older adults on the satisfaction with clinical practice. It could contribute to the improvement of the clinical learning environment of older adult nursing and the satisfaction of clinical practice in undergraduate education curriculum. The specific research aims are as follows: 1) To identify the clinical learning environments, learning transition, and satisfaction with clinical practice in the clinical practice course of older adult care; 2) to identify the clinical learning environments, learning transition, and satisfaction with clinical practice according to the participants' general and learning-related characteristics; and 3) to identify the influence of the clinical learning environments and learning transition on satisfaction with clinical practice for older adult care.

## **2. METHODS**

### **2.1 STUDY DESIGN AND PARTICIPANTS**

This study used a descriptive survey design. This study was conducted in one College of Nursing at one private university in D Metropolitan City, South Korea. The sample size was calculated, using the G\* Power 3.1.2 program. It was calculated by setting the effect of the medium size for multiple regression analysis ( $d_z$ ) = .15, power  $(1-\beta) = .95$ , significance  $\alpha = .05$ , 10 independent variables, and the number of samples was calculated as 172. Thus, the uniform resource locator (URL) survey response rate was 70%, and 230 4<sup>th</sup> year nursing students who had the gerontological nursing clinical practicum were conveniently recruited.

## **2.2 INSTRUMENTS**

### **2.2.1 CLINICAL LEARNING ENVIRONMENTS**

This study used the clinical learning environment, supervision and nurse teacher (CLEST) scale [14-15] to measure the clinical learning environments. This scale [15] is a five-point Likert scale of 34 questions. It is indicated that the higher nursing students score, the better the clinical environments are. For the use of the CLEST scale in Korean, back-translation was conducted. Bilingual nursing professors translated it into Korean and bilingual researchers back-translated it into English. The researchers reviewed it to ensure content validity. The Cronbach's alpha of the original CLEST in a previous study was .95 and the reliability of the five sub-categories is .83-.95 [14]. The Cronbach's alpha of the CLEST in this study was .96 and internal consistency of each subscale of clinical learning, unit manager's leadership, ward's nursing care, relationship with clinical instructor, and instructor's role was reported high: .88; .88; .79; .95; .94, respectively.

### **2.2.2 LEARNING TRANSITION**

This study used a seven-question tool [16] to measure the learning transition in actual clinical practices. The Cronbach's alpha coefficient in a previous study was .90 [16], and Cronbach's alpha coefficient in this study was .90.

### **2.2.3 SATISFACTION WITH A GERONTOLOGICAL NURSING CLINICAL PRACTICUM**

This study used a five-point Likert scale [17] to measure satisfaction with a gerontological nursing clinical practicum. It consists of five sub-categories: practice contents; practice guidance; practice environment; practice time; and practice evaluation. We used 21 of 27 items, excluding the items not related to satisfaction with clinical practice of a single subject, older adult nursing. It is indicated that the higher nursing students score, the higher they are satisfied with clinical practice. Cronbach's alpha in Kim's (2002) study [18] was .77, and Cronbach's alpha in this study was .87.

## **2.3 DATA COLLECTION**

The study collected data from October to December 2019. An online questionnaire was formed to understand the purpose of the study and provided a URL to those who agreed to participate in the survey voluntarily. A total of 230 people were recruited conveniently, and 211 respondents participated in the survey.

## **2.4 DATA ANALYSIS**

The collected data was analyzed using the SPSS/WIN 25.0 program, and the details are as follows; 1) The participants' general and learning-related characteristics were analyzed by frequency and percentage, and the clinical learning environments, learning transition, and satisfaction with clinical practice were analyzed by average and standard deviation; 2) Independent t-test and ANOVA were analyzed to analyze the difference between clinical learning environments, learning transition, and satisfaction with clinical practice according to the participant's general and learning-related characteristics; 3) Person's correlation was analyzed to analyze the correlation between clinical learning environments, learning transition, and satisfaction with clinical practice; and, 4) Multiple regression analysis was used to understand the effect of the clinical learning environments and learning transition on satisfaction with clinical practice.

## 2.5 ETHICAL CONSIDERATION

Ethical approval was obtained from the C University's Institutional Review Board (IRB) (Approval No. 1040271-201910-HR-028). All participants gave informed written consent prior to participating in this study.

## 3. RESULTS

### 3.1 GENERAL CHARACTERISTICS OF PARTICIPANTS

The majority of participants were female (84.4%,  $n=187$ ) with the age of 23.11 years. Satisfaction with nursing majors was 55.9% with 44.1% of dissatisfaction. More than half of the participants (51.2%) had 3.5 or higher of grade point average (GPA).

More than half of the participants (51.9%) had gerontological nursing clinical practicum at geriatric hospitals. The majority of the participants (80.6%) reported no job experiences in older adult nursing. Almost thirty percent of the participants (29.4%) said they were willing to work for older adult nursing (Table 1).

**Table 1. General Characteristics of Participants**

Variables	Categories	n(%)	Mean±SD
Gender	Male	33(15.6)	
	Female	178(84.4)	
Age(yr)	≤22	149(70.6)	23.11±3.53
	23 ~ 25	43(20.4)	
	≥25	19( 9.0)	
Personality	Introverted	106(50.2)	
	Extroverted	105(49.8)	
Interpersonal relationship	Average	77(36.5)	
	Good	134(63.5)	
Satisfaction with nursing	Dissatisfaction	93(44.1)	
	Satisfaction	118(55.9)	
Grade point average(GPA)	<3.0	22(10.4)	
	3.0 ~ 3.4	81(38.4)	
	≥3.5	108(51.2)	
Institution of clinical practice for geriatric nursing	University hospital	42(20.0)	
	Geriatric hospital	109(51.9)	
	Residential nursing care hospital	59(28.1)	
Experiences in nursing job for elderly	Yes	41(19.4)	
	No	170(80.6)	
Working experiences in nursing assistant	Yes	12( 5.7)	
	No	199(94.3)	
Employment intention in geriatric nursing	Yes	62(29.4)	
	No	149(70.6)	

### 3.2 THE CLINICAL LEARNING ENVIRONMENT, LEARNING TRANSITION, AND SATISFACTION WITH A GERONTOLOGICAL NURSING CLINICAL PRACTICUM

The clinical learning environment was 3.67 points. Among the sub-categories of the clinical learning environments, the leadership style of the nursing unit manager was the highest at 4.05 points on average. The average score of the learning transition was 3.94. The average score of the satisfaction with clinical practice was 3.44 points. (Table 2).

**Table 2. Descriptive Statistics of Clinical Learning Environment, Learning Transfer, and Satisfaction with a Gerontological Nursing Clinical Practicum**

Variables	Possible range	Mean±SD	Min	Max
Clinical learning environment				
Pedagogical atmosphere	1 ~ 5	3.44±0.69	1.44	5.00
Leadership style of the ward manager	1 ~ 5	4.05±0.72	1.00	5.00
Nursing care on the ward	1 ~ 5	3.78±0.64	1.75	5.00
the supervisory relationship	1 ~ 5	3.68±0.85	1.00	5.00
Role of the nurse teacher	1 ~ 5	3.69±0.78	1.22	5.00
Total	1 ~ 5	3.67±0.59	1.38	4.88
Learning transfer				
Satisfaction with clinical practice	1 ~ 5	3.44±0.42	2.52	4.52

### 3.3 THE CLINICAL LEARNING ENVIRONMENTS, LEARNING TRANSITION, AND SATISFACTION WITH A GERONTOLOGICAL NURSING CLINICAL PRACTICUM ACCORDING TO THE GENERAL CHARACTERISTICS OF PARTICIPANTS

Table 3 provides the results of the clinical learning environments for older adult nursing, learning transition, and satisfaction with clinical practice according to the participants' general characteristics. Those who are willing to work in the field of older adult care are more aware of the clinical learning environment for older adult care than those who are not willing ( $t=2.25, p=.03$ ).

There was no significant difference in the learning transition depending on the participants' general characteristics. Regarding satisfaction with clinical practice, those who intend to work in the field of older adult nursing are more satisfied with gerontological nursing clinical practicum than those who do not ( $t=2.30, p=.02$ ).

### 3.4 CORRELATION BETWEEN CLINICAL LEARNING ENVIRONMENTS, LEARNING TRANSITION, AND SATISFACTION WITH A GERONTOLOGICAL NURSING CLINICAL PRACTICUM

The satisfaction with a gerontological nursing clinical practicum was significantly correlated with clinical learning environments ( $r=.45, p<.001$ ) and learning transition ( $r=.37, p<.001$ ). The clinical learning environments were significantly correlated with learning transition ( $r=.32, p<.001$ ) (Table 4).

**Table 3. Clinical Learning Environment, Learning Transfer, and Satisfaction with a Gerontological Nursing Clinical Practicum According to the General Characteristics of Participants (N=211)**

Variables	Categories	Clinical learning environment		Learning transfer		Satisfaction with clinical practice	
		Mean±SD	t/F (p)	Mean±SD	t/F (p)	Mean±SD	t/F (p)
Gender	Male	3.61±0.57	-0.67	4.00±0.51	0.58	3.46±0.35	0.33
	Female	3.68±0.60	(.50)	3.93±0.62	(.56)	3.44±0.43	(.75)
Age(yr)	≤22	3.71±0.61		4.01±0.60		3.44±0.42	
	23 ~ 25	3.60±0.57	0.86 (.43)	3.79±0.59	2.72 (.07)	3.46±0.45	0.07 (.93)
	≥25	3.58±0.47		3.80±0.57		3.44±0.37	
Personality	Introverted	3.69±0.54	0.49 (.63)	3.96±0.56	0.45 (.66)	3.44±0.40	-0.24 (.81)
	Extroverted	3.65±0.64		3.93±0.65		3.45±0.44	
Interpersonal relationship	Average	3.61±0.64	1.17 (.24)	3.87±0.58	1.28 (.20)	3.42±0.43	0.54 (.59)
	Good	3.71±0.56		3.98±0.62		3.45±0.41	
Satisfaction with nursing	Dissatisfaction	3.76±0.56	1.93 (.06)	3.94±0.63	0.02 (.99)	3.43±0.43	-0.34 (.73)
	Satisfaction	3.60±0.61		3.94±0.58		3.45±0.41	
Grade point average(GPA)	<3.0	3.66±0.53		3.82±0.57		3.55±0.42	
	3.0 ~ 3.4	3.71±0.55	0.33 (.72)	3.98±0.57	0.61 (.54)	3.48±0.40	1.82 (.17)
	≥3.5	3.64±0.63		3.94±0.63		3.39±0.43	
Institution of clinical practice for geriatric nursing	University hospital	3.82±0.49		3.96±0.61		3.42±0.46	
	Geriatric hospital	3.63±0.60	1.73 (.18)	3.92±0.57	0.13 (.88)	3.44±0.41	0.07 (.94)
	Residential nursing care hospital	3.63±0.63		3.97±0.66		3.45±0.41	
Experiences in nursing job for elderly	Yes	3.75±0.62	0.97 (.33)	3.95±0.55	0.09 (.93)	3.43±0.39	-0.24 (.81)
	No	3.65±0.58		3.94±0.62		3.45±0.43	
Working experiences in nursing assistant	Yes	3.80±0.57	0.80 (.43)	3.86±0.51	-0.51 (.61)	3.40±0.43	-0.32 (.75)
	No	3.66±0.59		3.95±0.61		3.45±0.42	
Employment intention in geriatric nursing	Yes	3.81±0.56	2.25 (.03)	3.92±0.63	-0.31 (.76)	3.54±0.40	2.30 (.02)
	No	3.61±0.60		3.95±0.59		3.40±0.42	

**Table 4. Correlation among Clinical learning environment, Learning transfer, and Satisfaction with a Gerontological Nursing Clinical Practicum (N=211)**

Variables	Clinical learning environment	Learning transfer	Satisfaction with clinical practice
Clinical learning environment	1	.32**	.45**
Learning transfer		1	.37**
Satisfaction with clinical practice			1

\*  $p < .01$ , \*\*  $p < .001$

### 3.5 FACTORS INFLUENCING SATISFACTION WITH A GERONTOLOGICAL NURINSG CLINICAL PRACTICUM

In order to identify factors affecting participants’ satisfaction with clinical practice, enter method of multiple regression was conducted based on the intention of employment in the field of older adult nursing and five sub-categories of the clinical learning environments, which were confirmed to have significant differences in satisfaction with clinical practice (Table 5). The intention of employment in nursing for older adults was treated as a dummy variable as a category variable and used for regression analysis.

The variable that had a significant impact on clinical practice satisfaction was the role of subject instructor and learning transition. To measure the multicollinearity between the variables, the variance inflation factors (VIF) were 1.04-2.35, indicating no problem with multicollinearity. Also, the Durbin-Watson value was 1.857, confirming the independence of the residual without the autocorrelation of the error term. Clinical practice satisfaction by independent variables in the regression model was 28.5% explanatory (F=12.96, p<.001). The most influential factor on satisfaction with clinical practice was learning transition (t=4.57, p<.001), followed by the role of the instructor in the clinical learning environments (t=3.92, p<.001).

**Table 5. Factors influencing satisfaction with a Gerontological Nursing Clinical Practicum (N=211)**

Variables	B	$\beta$	t	p	VIF
(constant)	1.66		7.98	<.001	
Employment intention in geriatric nursing* (reference=no)	0.10	0.11	1.84	.07	1.037
Pedagogical atmosphere	-0.06	-0.09	-1.14	.26	1.957
Leadership style of the ward manager	0.02	0.03	0.37	.71	2.121
Nursing care on the ward	0.082	0.13	1.59	.11	1.914
The supervisory relationship	0.06	0.11	1.28	.20	2.345
Role of the nurse teacher	0.15	0.27	3.92	<.001	1.406
Learning transfer	0.20	0.29	4.57	<.001	1.176
R=.56, R <sup>2</sup> =.31, Adj. R <sup>2</sup> =.29, F=12.96, p<.001, Durbin-watson=1.86					

Dependent variable : satisfaction with clinical practice

Predictors : (constant), employment intention in geriatric nursing, pedagogical atmosphere, leadership style of the ward manager, nursing care on the ward, the supervisory relationship, role of the nurse teacher, learning transfer

\*treated dummy variable

## 4. DISCUSSION AND CONCLUSION

This study sought to examine the effect of clinical learning environment and learning transition nursing students experienced during the clinical practice for older adult care on satisfaction with clinical practice. This study found that nursing students had the highest satisfaction with practice environment and practice time and had the lowest satisfaction with practice guidance in clinical practice for older adult care. These results were different from the previous study [19-20] indicated that the nursing students' satisfaction with clinical practice was the highest in practice subjects, and was the lowest in practice contents. In this study, nursing students might perceive that they did not receive sufficient gerontological nursing clinical practicum guidance from supervisors. Thus, nursing educators need to make specific gerontological nursing clinical practicum guidelines for each schedule and provide supervisors with orientation on it before clinical practicum, so

supervisors can provide sufficient guidelines.

Also, this study found that the satisfaction with clinical practice was significantly higher if nursing students intended to get a job in the field of older adult nursing. This indicates that nursing students were easily interested in older adult nursing and were motivated if they wanted to get a job in the field of older adult nursing in the future. Thus, it is necessary for nursing educators to consider the desired employment field of nursing students in the future, when allocating and planning their gerontological nursing clinical practicum courses.

This study found that the clinical learning environment was an influencing factor in the clinical practice satisfaction of nursing students, which is consistent with the previous studies [6, 20]. Papastavrou et al. (2016) reported that learning activities in a quality clinical learning environments were important factors in improving nursing students' satisfaction with clinical practice [6]. Lee's study (2019) also stated that the clinical learning environment was a major factor in the clinical practice satisfaction of nursing students [20]. In particular, the supervisory relationship has the greatest impact on nursing students' satisfaction in the clinical learning environments. Also, the educational climate was pivotal when it comes to students' learning activities and competency development within the clinical environment [6]. Thus, the clerkship culture and environment need to promote nursing students' learning and motivation, and can add value to the community [21].

A supportive clinical learning environment is the most important aspect of the teaching process [22]. It means that the learning environment needs to be supportive of individual learning needs and that the relationship between supervisors and nursing students is based on trust [11]. When nursing students perceives that they are psychologically safe in the supportive clinical environment, optimal learning can happen [11]. Establishing a positive clinical learning environment is a major strategy to reduce clinical practice stress and anxiety [23]. The positive learning environment supports the nursing students' learning, being welcoming, collaborative, and respectful [24-26]. Thus, it is necessary to create a safe psychological learning environment, so that nursing students have positive experiences during clinical practicums. It is recommended that hospitals strive to establish a policy and organizational culture for clinical practices, so nursing students experience it in supportive and positive clinical learning environments in collaboration with nursing schools [27]. For example, it is necessary to develop learning activities to allow nursing students as learners to participate in patient safety and quality improvement activities, to share clinical learning experiences and exchange feedback with each other, and to consider win-win measures jointly run by universities and clinical fields, which are the main agents of the clinical learning environments.

In this study, learning transition had significant positive correlations with clinical learning environments in the order of the leadership of the unit manager, relationship with clinical instructor, educational environment of clinical learning, and ward's nursing care. In order to improve the performance of individuals, learning transition is referred to the process of applying and maintaining knowledge, skills, and attitudes acquired through education to actual practices effectively [28]. These results indicate that if a quality clinical learning environment is created, nursing students will enhance their learning effectiveness by promoting learning transition in clinical practice. These results are consistent with the previous workplace learning research [29-30] describing learning as a social process. In previous studies [29-30], transferring what one person learns to another in the workplace occurs through collaboration and participating in work activities together, exchanging information, receiving guidance, being coached, and observing and imitating behaviors [29]. Thus, it is necessary to provide nursing students with opportunities to perform in clinical practices. In order to promote learning transition, it is required to set up a supportive learning environment related to the learning content along with a clear learning objective [31].

In conclusion, it is needed to create safe and positive clinical learning environments for quality



gerontological nursing clinical practicum, so hospitals and nursing schools need to make efforts to promote clinical sites as an educational learning environment in collaborative relationships.

## REFERENCES

- [1] Statistics Korea. (2018). Statistics on the Aged [Internet]. Daejeon: Statistics Korea; 2018[cited 2020 May 17]. Available from: [http://kostat.go.kr/portal/korea/kor\\_nw/1/1/index.board?bmode=read&aSeq=370779](http://kostat.go.kr/portal/korea/kor_nw/1/1/index.board?bmode=read&aSeq=370779)
- [2] H.E. Yeom, "Review of educational strategies to facilitate desirable attitudes toward gerontological nursing", *Journal of the Korea Academia-Industrial cooperation Society*, Vol. 17, No. 1, pp.561-172, 2016. M. Franklin and S. Zdonik, "A Framework for Scalable Dissemination-Based Systems," in Proc. 9th IEE SP Workshop on Statistical Signal, pp. 232-235, Sep.14-16, 2008.
- [3] S.Y. Jeon, S.H. Park, K. R. Kong, and M. I. Lee, "A Study on Improvement of Nursing Clinical Practice Education: Focusing on in-school practical education (fundamental nursing and health assessment)", *The Journal of Korean Nursing Research*, Vol. 4, No. 1, pp. 51-64, 2020. DOI: 10.34089/jknr.2020.4.1.51
- [4] S. Spurr, J. Bally, and L. Ferguson, "A framework for clinical teaching: a passion-centered philosophy", *Nurse Education in Practice*, Vol. 10, No. 6, pp. 349-54, 2010.
- [5] V. M. Nishioka, M. T. Coe, M. Hanita, and S. R. Moscato, "Dedicated education unit: nurse perspectives on their clinical teaching role", *Nursing Education Perspective*, Vol. 35, No. 5, pp. 294-300, 2014.
- [6] E. Papastavrou, M. Dimitriadou, H. Tsangari, and C. Andreou, "Nursing students' satisfaction of the clinical learning environment: a research study", *BMC Nursing*, Vol.15, No. 1, pp. 1-10, 2016. DOI 10.1186/s12912-016-0164-4
- [7] J.M. Genn, and R.M. Harden, "What Is Medical Education here really like? Suggestions for Action Research Studies of Climates of Medical Environments", *Medical Teacher*, Vol. 8, No. 2, pp. 111-124, 1986. <http://dx.doi.org/10.3109/01421598609010737>
- [8] S. Roff, and S. McAleer, "What is educational climate?", *Medical Teacher*, Vol. 23, No. 4, pp. 333-334, 2001. <https://doi.org/10.1080/01421590120063312>
- [9] L. Gruppen, D.M. Irby, S.J. Durning, and L.A Maggio, "Interventions Designed to Improve the Learning Environment in the Health Professions: A Scoping Review", *MedEdPublish*, Vol. 7, No. 211, 2018. DOI: <https://doi.org/10.15694/mep.2018.0000211.1>
- [10] S. Turner, and N. Harder, "Psychological safe environment: A concept analysis", *Clinical Simulation in Nursing*, Vol. 18, pp. 47-55, 2018. <https://doi.org/10.1016/j.ecns.2018.02.004>.
- [11] K.J. Caverzagiea, M.G Goldenbergb, and J.M. Halle, "Psychology and learning: The role of the clinical learning environment", *Medical Teacher*, Vol. 41, No. 4, pp. 375-379, 2019. doi: 10.1080/0142159X.2019.1567910.
- [12] E. Papastavrou, E. Lambrinou, H. Tsangari, M. Saarikoski, and H. Leino-Kilpi, "Student nurses experience of learning in the clinical environment", *Nurse Education in Practice*, Vol. 10, No. 3, pp. 176–182, 2010. doi:10.1016/j.nepr.2009.07.003
- [13] E. Carlson, E. Idvall, "Who wants to work with older people? Swedish student nurses' willingness to work in elderly care-A questionnaire study", *Nurse Education Today*, Vol. 35, No. 7, pp. 849-853, 2015. <http://dx.doi.org/10.1016/j.nedt.2015.03.002>
- [14] M. Saarikoski, and H. Leino-Kilpi, "The clinical learning environment and supervision by staff nurses: developing the instrument", *International journal of nursing studies*, Vol. 39, No. 3, pp. 259–267, 2002. [https://doi.org/10.1016/s0020-7489\(01\)00031-1](https://doi.org/10.1016/s0020-7489(01)00031-1)
- [15] M. Saarikoski, H. Isoaho, T. Warne, and H. Leino-Kilpi, "The nurse teacher in clinical practice:

- developing the new sub-dimension to the Clinical Learning Environment and Supervision (CLES) Scale”, *International journal of nursing studies*, Vol. 45, No. 8, pp. 1233–1237, 2008. <https://doi.org/10.1016/j.ijnurstu.2007.07.009>
- [16] I. Lee, C.S. Park, “Factors Influencing Confidence in Performance Competence of Core Basic Nursing Skills by Nursing Students”, *Journal of Korean Academy of Fundamentals of Nursing*, Vol. 22, No. 3, pp. 297-307, 2015. DOI: <https://doi.org/10.7739/jkafn.2015.22.3.297>
- [17] S.J. Lee, “Level Satisfaction on Clinical Practice of Baccalaureate Nursing Students”, *Journal of Korean Academy Nursing*, Vol. 10, No. 2, pp. 41-52, 1980.
- [18] G.S. Kim, “A Study on Satisfaction with Clinical Practice of Nursing Students”, *Chunhae University Journal*, Vol. 14, No. 1, pp. 221-237, 2002.
- [19] H.J. Lee, “Convergence Study on Nursing Students' Stress and Satisfaction with Clinical Practice”, *Journal of the Korea Convergence Society*, Vol. 7, No. 4, pp. 75–83, 2016. <https://doi.org/10.15207/JKCS.2016.7.4.075>
- [20] S.M. Lee, “The Effect of Clinical Learning Environment, Experiences of Core Basic Nursing Skills, self-Directedness on Clinical Practice Satisfaction of Nursing Students”, Master’s thesis, Kongju National University, Kongju, 2019.
- [21] J. Lave, and E. Wenger, “Situated Learning: Legitimate Peripheral Participation”, Cambridge, UK: Cambridge University Press, 1991.
- [22] J. Preethy, J.R. Erna, and V.G. Mariamma, “A comparative study to assess the perception of doctors, nurses, faculty of nursing and nursing students on ideal clinical learning environment”, *International Journal of Nursing Education*, Vol. 16, No. 1, pp. 208-212, 2014. DOI: 10.5958/j.0974-9357.6.1.042
- [23] E.Y. Kim, S.H. Yang, “Effects of Clinical Learning Environment on Clinical Practice Stress and Anxiety in Nursing Students”, *Journal of Korean Academy of Nursing Administration*, Vol. 21, No. 4, pp. 417-425, 2015. <http://dx.doi.org/10.11111/jkana.2015.21.4.417>
- [24] Y. Chinthammitr, and N. Chierakul, “Learning environment and resident achievement”, *Journal of the Medical Association of Thailand*, Vol. 97, No. 12, pp. 1269–1273, 2014.
- [25] S. Tackett, S. Wright, R. Lubin, J. Li, and H. Pan, “International study of medical school learning environments and their relationship with student well-being and empathy”, *Medical education*, Vol. 51, No. 3, pp. 280–289, 2017. <https://doi.org/10.1111/medu.13120>
- [26] T.A. Janz, S.A. Pyke, “A scale to assess student perceptions of academic climates”, *Canadian Journal of Higher Education*, Vol. 30, No. 1, pp. 89-122, 2000.
- [27] S. Shin, E.B. Yang, E.H. Hwang, Y. Kim, and D. Jung, “Current Status and Future Direction of Nursing Education for Clinical Practice”, *Korean Medical Education Review*, Vol. 19, No. 2, pp. 76-82, 2017. <https://doi.org/10.17496/kmer.2017.19.2.76>
- [28] E.G. Bae, M.Y. Jang, D.Y. Kim, “Learning Transfer and Its Determinant Factors in Different Types of Organization: Company, School, Hospital in Incheon”, *Andragogy Today: Interdisciplinary Journal of Adult & Continuing Education*, Vol. 12, No. 2, pp. 29-60, 2009.
- [29] M. Eraut, “Learning from other people in the workplace”, *Oxford Review of Education*, Vol. 33, No. 4, pp. 403–422, 2007.
- [30] G. Cheetham, G. Chivers, “How professionals learn in practice: An investigation of informal learning amongst people working in professions”, *Journal of European Industrial Training*, Vol. 25, pp. 247–292, 2001.
- [31] L.A. Burke, and H.M Hutchins, “Training transfer: An integrative literature review”, *Human resource development review*, Vol. 6, No. 3, pp. 263-296, 2007.