

Developing core skill of
international nursing students
through simulation in Finland.

A literature review.

LAHTI UNIVERSITY OF APPLIED
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nursing students through simulations
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ABSTRACT

Tutoring has been one of the most efficient and frequently utilized means of introducing students into new study environments. It is often done by other students on a voluntary basis, and has been a popular practice for centuries. Over time, tutoring has evolved, and institutions as well as individuals have been exploring new ways to help serve students better.

Language acquisition has identified as one of the main problems responsible for the difficulties international nursing students encounter during clinical sessions and interaction with other medical members of staff, and these difficulties often lead to inadequate self-efficacy in students, as well as stunting their communication skills and critical thinking.

The aim of this thesis is to make provision for a better learning environment that supports and delivers the results envisioned by nursing institutions in Finland. The purpose of this thesis was to establish lasting solutions to help improve the level of communication, critical thinking and development of self-efficacy for international nursing students in Finland

The author uses literature survey as its primary methodology for this study, and ten other academic sources were also examined with five extracted from PubMed Central and the others accessed through EBSCO database.

Two forms of simulation were identified as the primary solutions to this problem of language acquisition as both of them enhance development of self-efficacy, critical thinking, as well as communication skills. The two forms of simulation are:

- The high fidelity simulation software
- The use of standardized patients

The authors would discuss these two simulation methods in details in subsequent chapters. Results of these findings will be useful to the tutors and also the international nursing students.

Key words: Self-efficacy, critical thinking, communication skills, International nursing student, tutors, and tutoring/ mentoring.

Lahden ammattikorkeakoulu

Hoitotyön koulutusohjelma

JALLOH, AMINA: GICHANGI, WAMBAIRE, GRACE

Hoitotyön opinnäytetyö

Kansainvälisten hoitotyön opiskelijoiden
ydinosaamisen kehittäminen
simulaatioiden avulla suomeksi

Kevät 2016

42 sivua, 4 liitesivua

TIIVISTELMÄ

Tutorointi on yksi tehokkain ja usein käytetty keino tutustuttaa opiskelijat uusiin oppimisympäristöihin. Tutorointi perustuu vapaaehtoisuuteen ja usein oppilaat tutoroivat oppilaita. Se on ollut suosittu käytäntö vuosisatojen. Ajan myötä tutorointi on kehittynyt ja toimielimet sekä yksityishenkilöt ovat tutkineet uusia tapoja, jotka auttavat palvelemaan opiskelijoita paremmin

Kielen omaksuminen on havaittu olevan yksi suurimmista ongelmista, kansainvälisen hoitotyön opiskelijoilla on vaikeuksia kohdata potilas kliinisen tutkimuksen aikana ja vuorovaikutus muun lääketieteen henkilöstön kanssa, ja nämä vaikeudet johtavat usein kykyjen riittämättömyyden tunteeseen sekä hidastaa viestintätaitojen oppimista ja kriittistä ajattelua.

Tässä työssä pyritään säätämään paremmasta oppimisympäristöstä, joka tukee ja antaa tuloksia, visioi hoitotyön koskevissa. Tässä työssä tarkoituksena oli luoda kestäviä ratkaisuja parantaa taso viestintä, kriittinen ajattelu ja kehityksen kykyihin kansainvälisen hoitotyön opiskelijoille Suomessa.

Tekijä käyttää kirjallisuuden tutkimuksen ensisijainen menetelmäänsä tässä tutkimuksessa ja kymmenen akateemisen lähteistä tutkittiin viisi uutetaan PubMed Keski ja toiset käyttää EBSCO-tietokanta

Tutkimuksessa tunnistettiin kahdenlaista simulointia, joissa todettiin, että ensisijaisesti auttaa kielen oppimisongelmaan sekä molemmat parantavat kykyjen kehittymistä, kriittistä ajattelua sekä viestintätaitoja. Kahdenlaiset simuloinnit ovat:

- Audio/ääni simulointi-ohjelmisto
- Käyttö standardoiduilla potilailla

Tekijät kertovat eri simulointimenetelmistä yksityiskohtaisemmin myöhemmissä luvuissa. Tuloksista on hyötyä tutoreille ja kansainvälisen hoitotyön opiskelijoille.

Asiasanat: kyky, kriittinen ajattelu, viestintätaidot, kansainvälinen hoitotyön opiskelija, ohjaaja / tutor ja tutorointi / ohjaus.

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1 INTRODUCTION

Lahti University of Applied Sciences has opened up the Nursing degree programme to international students since 2012, and this has made it imperative to develop an efficient means of helping students settle into their study environments. Lahti University of Applied Sciences has a total number of 109 international nursing students. (LAMK study guide 2016)

Tutoring has been one of the most effective measures used to introduce new students into their new study environment. It has also helped in enabling students settle well into their environments, as well as relieve any cultural shocks they may encounter as it prepares them for the life ahead by giving them formal and informal training on how to survive in their new habitat. (Bamford, J.K. 2008; Derrick, D. 2015)

International nursing students have always identified having tutors as one of the most rewarding experiences of their study life, as it enabled their transition into their immediate environment and tutors stand as the first point of contact should questions arise (Nurmilaukas, L. & Tefera, A. 2014). If tutoring isn't done appropriately, it affects the students adversely as it affects their settlement as well as studies. International nursing students in Finland experience similar challenges as the other students, but for the purpose of this study (Gauli A. & Xu M. 2015; Raiffee, G, et al, 2014).

Nursing educators and clinical supervisors emerge increasingly due to their demands in the social and health industry. In essence, the development of nursing education is affected by globalization and immigration in relation to cultural competence, which is integrated into the nursing education curriculum in Finland and many other EU member states in different parts. (Kokko, 2011) Categorically, the Finland nursing education is based on the directives of the European Union law (2005/36/EU), (Kilpelainen, 2010; Pratt, 2014) in which their competence lies. (Hedegaard et al, 2010; Pratt, 2014) It is no news that Finland has earned an amazing reputation in nursing education, with the combination

of a wide variety of programs being offered in English Language, which indeed motivates many international students choosing Finland as their primary place of study. (CIMO, 2003)

While that has been conducted throughout the history of the nursing education, there are challenges that continually face educators in their development of the capacity of the Finnish nurses. These challenges become even more magnified in the case of the international students who have to struggle with language acquisition problems and cultural incompatibility among other competency problems. More particularly, the capability to communicate more effectively, which involves listening, comprehension and providing culturally and contextually appropriate responses, is core to the entire learning process.

Communication becomes among the core problems for international nursing students because they have to take classes in Finnish and because in their workplace, most of the communication with patients occurs in Finnish. As such, the capability to communicate lies at the center of the skills required as it provides one with the confidence to apply the knowledge required more effectively and to deliver quality patient care. (Jason H. 2000: Kidd, J. et al 2005)

This leads to the need to identify the ways in which tutors can help in tackling the communication challenges in order to improve the overall competence of the nursing students. The overall aim of the training is the provision of a basis for general proficiency for instance functioning in the working life and the development of competencies including communication, ethical and self-development skills.

The authors were driven to write this thesis because there have been cases of some former students having their clinical practice cancelled because of their inability to communicate adequately in Finnish language. Hence, the mentor opts to stop working with the student because it's more timing consuming and wastage of resources because the student will not benefit. The aim of this thesis is to make provision for a better learning

environment that supports and delivers the results envisioned by nursing institutions in Finland. The purpose of this thesis is to establish lasting solutions that can improve the level of communication, critical thinking and development of self-efficacy for international nursing students in Finland.

2 BACKGROUND

This chapter discusses nursing programme in Finland, tutoring/mentoring, communication skills, critical thinking and self-efficacy in nursing and

2.1 Nursing programme in Finland

This programme is divided into different parts, and these parts consists of 210-270 ECTS (European Credit Transfer and Accumulation System) on completion and the study last for an approximate of 3.5 – 4.0 years with an estimated 60 credit points (ECTS) per year. One credit stands approximately for twenty-seven hours; therefore, the entire programme requires 5600 hours of study. On completion, students graduate with qualifications as registered nurses (RN) on 210 ECTS, public health nurses and paramedics on 240 ECTS and Midwives on 270 ECTS. These students can use the title “Bachelor of Health Care” (BSc) (European Commission in Finland 2014). Finnish Universities of Applied Sciences are currently under the authority of the Government that determines their educational mission, fields of education, student intakes and location. UASs however have autonomy over their internal affairs (Salminen & Ylä-Anttila 2010; MEC 2012).

Each UAS unit can formulate their curriculum independently based on similar principles of education according to the legislations of UAS hence there can be differences in structure and content of programs between UASs. Degree programmes in nursing are usually offered as full-time studies, however Adult education can be undertaken part-time (MEC 2012). Due to the flexibility of curriculum across the different universities offering nursing education to international students, the need to develop a competent framework to engage the students better in developing effective patient handling skills arose. This is to optimize both the mentorship and student experience with a view to synthesize a

comprehensive multicultural approach to nursing in Finland (Finnish Nurses Association, 2014; Råholm et.al. 2010, 2130-2134.)

Clinical practice is a major element in nursing education, accounting for usually about half of the program based on the EU directives. Finland a member of the EU, Finland has acknowledged, EU educational guidelines concerning theoretical and clinical nursing education (Smith, 2007). Finnish nursing education are conducted in degree-level undergraduate education programs offered in higher education institutions (HEIs) such as universities of applied sciences (UASs) or polytechnics. In Finland, there are 25 UASs or polytechnics, which has regulated by the Ministry of Education. Nursing education has also regulated by the national guidelines of nursing authorities. A nursing degree education program takes three and half years to complete successfully.

According to (Bjørk, I., T., Berntsen, K., Brynildsen K., G. & Hestetun, M 2014), the nursing educational environment demands the use of especially communication and critical thinking and the confidence that the nursing professional is able to handle the problem at hand in a more effective way. This means that the process of educating the nurses has to instill this level of confidence and help the students' in assessing their communication skills from time to time in order to identify areas of improvement. At the same time, the system has continued to cater for the students' critical thinking in the solution of day-to-day problems facing nurses in their work environment. This would in turn help in building up their capacity. (Benner, P., Hughes, R.G. & Sutphen, M. 2008.)

2.2 Tutoring/Mentoring

Tutoring is an age-old practice. There are other definitions that describe a tutor as someone who guards, protects and watches over or has the care of another individual. It is a big responsibility and requires dedication. Referring to Ross MacDonald guidebook, "The Master" Tutor MacDonald

R.B (1998) refers to tutoring as an act which facilitates or provides a structure for another's learning. The main purpose of tutoring is to help a student to become independent or to take them to a point where they can become self-learners. A tutor according to the dictionary is a person who gives an individual or a group of people professional instructions (Oxford learner's dictionary 2016.)

Mentoring can also be viewed as both a method and facilitative actions such as helping, guiding, and developing the growth and expertise of a person's skills, knowledge, attitudes, and professional attributes. It usually takes the form of supporting and encouraging a person to achieve her/his personal goals (Clutterbuck 2004, Miller 2004, Kay & Hinds 2009). A mentor can be also defined as "an experienced person who advises and helps somebody with less experience over a period of time" (OALD 2012)

2.2.1 Communication skills.

Communication skills are skills of adaptation that can help in modulating job stress. They refer to behaviors, which have the capability to enable individuals express their needs and feelings adequately and as such accomplish their personal goals. (Casey & Willis 2011; Webb & Holland 2012.)

The competency in the skills of communication is shown through the capability of communicating effectively and clearly. Effective communication is described, as one with meaning in which the providers of healthcare and patients have exchanged information in ways that patient is able to participate actively in their care. (Casey & Willis 2011) Communication involves two way reception and expression in a way that the healthcare provider's responsibility and message is understood. The communication between the provider of healthcare and a patient is defined as the particular responses and behaviors employed in a therapeutic relationship (Merckaert I, Libert Y, & Razavi D. 2005.)

Evans, C. & Stevenson, K. (2011) indicate that the professional

competence in nursing does not just involve skills on psychomotor or clinical diagnosis but also requires proficiency in communication and interpersonal skills. There is an expectation that registered nurses should communicate in a specific way. Communication is considered among the standards of nursing and is addressed in four standards including collaboration, assessment, environmental health and implementation (Salmon, P. & Young, B. 2011.) Effective communication is described as one with meaning in which the providers of healthcare and patients have exchanged information in ways that patients are able to participate actively in their care. Communication involves two way reception and expression in a way that the healthcare provider's responsibility and message is understood. To improve the effectiveness of learning, there has to be an alternative way in which the core and practical skill in nursing can be obtained by the students in a manner and context that makes them feel a part of the entire process of learning and as such encourage them to develop and practice the core nursing skills (Salmon, P. & Young, B. 2011)

2.2.2 Importance of communication skills in nursing

Anne L., Salminen, L., Kaartinen, M., & Leino-Kilpi H. , (2013) indicates that the skills of communication for a long time have been recognized as being of importance in nursing education and practice- The establishment of effective communication is of importance in ensuring quality in nursing practice. The research, which addresses the client-nurse therapeutic relationship, has contributed greatly towards the comprehension of the role of communication in-patient and is a cornerstone in the practice of nursing. (Wikström, B.M, Svidén G. 2011)

The significance of communication in the life of humans is to the degree that experts that individual defects, human development and progress are dependent on communication put a belief forward. A number of experts hold the belief that the capability to establish accurate communication is among the most significant attributes of the healthcare staff (Papadantonakis A. 2006.). Correct communication impacts positively on

patients through the improvement of vital signs, the increase of patient satisfaction, and the promotion of health outcomes, enhances the participation of the patients in the treatment programs and provides relief to anxiety and pain. On the contrary, when communication is impaired, it results in diagnostic errors, the reduction of the level of information that is provided by the patients and their involvement in treatment programs (Ageeva & Jaanisalo 2013; Papadantonakis A. 2006.).

Competency in communication is of importance to nurses in their evaluation of the patients' needs. The communication skills are also of importance for the purpose of enabling the resolution of communication conflicts, which cannot be avoided in certain situations involving communication circumstances between the patient and the clinician (Råholm, Hedegaard, Löfmark & Sletteb 2010.), stated that In accordance with the theory of conflict, the occurrence of conflict comes about due to the differentials in power, culture or values. Given that such variations and especially with regard to hierarchy and power are more evidenced in settings of healthcare, conflicts are embedded in the services provided by healthcare professionals. (Råholm, Hedegaard, Löfmark & Sletteb2010.)

Communication has an impact on factors for instance patient anxiety, satisfaction, clinical outcomes and adherence to medication. Families and patients need clarity of information. (Grönroos & Perälä 2008) challenges the providers of healthcare to make efforts towards establishing a partnership that shows solidarity, respect as well as empathy. Through the use of complex skills of communication, the nurse has the capability of incorporating the domains of quality of life for instance the psychological, social, physical and spiritual dimensions in addressing the needs of patient care. Skilled communication is vital to nurses for the purpose of sustaining sensitive and effective relationships with patients and other medical staff. This is evidenced through the studies that relate the communication skill level of nurses to their job satisfaction, patient trust and recovery (Conner et al., 2010).

2.2.3 Problems with communication skills

Studies regarding the perception of caregivers and patients indicate that the problems in the establishment of communication skills are an important concern for the consumers of health and show that there is need for effective communication in nursing practice. (Bowle E.J.A., et al 2008: Eklöf, Hupli & Leino-Kilpi 2015) further mention that learning how to communicate on the job is not enough for the mastery of the needed skills. Nevertheless, the training in communication has been proved to result in the acquisition of skill and the enhancement of the patient outcomes. For the purpose of establishing effective communication, there is a need for the nurses to learn the skills required for the establishment of relationships with patients and other members of the medical team. (Bowle E.J.A., et al 2008: Eklöf, Hupli & Leino-Kilpi 2015)

Practical as well as theoretical learning have the capability of causing increased meaning in learning. According to Hinno, Partanen & Vehviläinen-Julkunen (2012), the development in communication skills in learning requires training to be both experiential and participatory. In Finland, the low level of language by the international students impairs this participatory nature. Given that Finland has two official languages: Finnish and Swedish, the acquisition of the languages for foreign students and especially those from English speaking countries take time. (Partanen & Vehviläinen-Julkunen 2012),

A study conducted by Mattila et al (2010) in Finland involves in-depth interviews among 14 nursing students from Asia and Africa. The authors established that the main barrier to communication was the Finnish language. The participants had feelings of either giving up or taking the chance, they had during training to see if they can succeed in their clinical practice. The respondents reported observing the staff more given that they were either ignored or did not receive to take part in meaningful learning (Mattila et al 2010).

The students also reported to stay for the purpose of earning credits only in order to complete their studies. Moreover, the patients were not encouraging and especially in cases where care was to be provided by international students. Moreover, they had to deal with staff and mentors that were not supportive who did not communicate much with them within the clinical learning setting because of their language skill. A circumstance in which students do not feel welcome has the possibility of creating stress, which has an impact on their overall learning (Mattila et al 2010: Perry & Potter, 2010).

Although not many studies have been carried out which detail the experiences of international nursing students in Finland, the above-mentioned study indicates some level of struggles with the mastery of the Finnish language which adversely affect the students' communication with tutors and patients and as such reducing their capability to receive effective training. As such, tutoring has to include there are more vigorous ways of addressing the mastery of the Finnish language and cultural contests in order to enhance the quality of learning

2.3 Critical thinking

Critical thinking is a term that has been defined by philosophers in varied ways, which give an indication of its complex nature. Dunn, Osborne & Link (2014) define critical thinking as considering a belief in a careful, active and persistent manner based on supporting grounds and further concluding on its tendency. Critical thinking is one of the most significant concepts within the field of education. Allowing students to think in a critical manner enables the survival, development and promotion of scientific societies within institutions (Moattari, M., et al, 2014).

According to Chen (2011), the explosive nature of the knowledge available today has led to the development of a situation in which the achievement of nursing students in accomplishing their needs has become difficult making critical thinking of importance. In nursing, critical thinking can be

defined as a process that involves interactive, purposeful reasoning and judgment and criticism regarding what is believed and done (Shelestak, Meyers, Jarzembak & Bradley, 2015).

In the recent decade dramatic changes resulting from technological and knowledge advancement have occurred. This presents the need for nurses to develop their reasoning and thinking skills for the purpose of meeting the caring needs of families and patients in collaboration with the other professionals in healthcare (Azizi-Fini, I. et al, 2015). As health professionals, nurse need to have creativity, self-direction and critical thinking in order to come up with the right decisions and provide solutions for clinical problems (Papathanasiou, I.V et al, 2014). Yardley, Irvine & Lefroy (2013) conducted an investigated the attitudes of clinical nurses and nursing educators toward critical thinking and established that both believed that critical thinking is crucial because of the increase in the complexity of healthcare in the modern day. Furthermore, the nurses ought to have skills in critical thinking and reasoning and have the capability of appraising new knowledge; this was stress by Park, et al. (2013)

2.3.1 Critical thinking skills

Goodstone, et al. (2013) stated that nurse's act in an independent manner without the employment of critical thinking given that numerous decisions are made on the basis of habit and the nurses reflect on their behavior to a minimum level. This means that increased level of critical thinking is only utilized in situations in which new needs or ideas are shown in order for a decision to be made beyond routine.

The reasons for learning critical thinking are that it is important for problem solving and to have the capability to make major decisions in a quick and independent manner Kourkouta L, & Papathanasiou IV, (2014). The skills of critical thinking enable the identification of necessary data and differentiation of the problems that need immediate intervention from those

which do not threaten the life of patients. As such, nurses with critical thinking a skill has the capability to make considerations regarding the possible consequences of each of the actions and decide rightly (Shelestak, Meyers, Jarzembak & Bradley, 2015).

In the efforts toward the implementation of critical thinking, nurses ought to develop methods and cognitive skills needed in decision-making, analysis and problem solving. The skills include critical analysis, justification and the arrival at a valid conclusion, the differentiation of opinions from facts and the evaluation of the credibility of the information source, concepts and the recognition of the existing conditions (Eklöf, Hupli & Leino-Kilpi, 2015). Evaluating the information's level of reliability enables the confirmation of how accurate the information is through checking the informants and evidence (Grönroos & Perälä, 2008). The person that uses critical thinking, works towards the development of thought independence, humility in the intellect, the postponement of crisis, fairness, perseverance, spiritual courage among others. (Grönroos & perälä 2008)

2.3.2 The development of critical thinking skills

Despite the argument by Franklin, (2015) that teaching methods have been established in order to reinforce critical thinking; Park, et al. (2013) indicates that no strong evidence exists as it pertains to the link between the content of the nursing programs and the critical thinking styles of nursing students (Hinno, Partanen & Vehviläinen-Julkunen, 2012). The traditional teaching techniques have the capability to hinder the critical thinking learning that was based on research, which is a teaching technique, which increases the critical thinking skills. (Dunn, Osborne & Link 2014)

The development of critical thinking skills requires continuous dialogue between instructors and learners. Moreover, the development of the skill of critical thinking is related to the level of education, clinical experience and the age of the nursing student. This means that in the case that the dialogue between the instructor and the learner is reduced, and if the

international students are not given an opportunity to have that clinical experience, then this leads to a lower level of critical thinking. (Davis, Davis & Williams, 2010).

It has been identified that international students do not regularly have access to the clinical experience due to language acquisition problems. Additionally, the international students rarely have regular interactions with staff. This means that for them, the development of the basic nursing skills for instance critical thinking is deferred. Although there are no studies which compare the level of critical thinking of international versus the local students and which directly provides empirical evidence of their reduced level of critical thinking skills, it is evident from the reasoning that there is no sufficient and conducive environment for the development of the skill among the international students. (Ward, C. 2001)

2.4 Self-efficacy

Self-efficacy is the belief of an individual in their ability to organize and execute actions for the achievement of goals (Soudagar, S. et al 2013). It refers to the belief that one has regarding the person's capability to cope in particular situations and is critical for the performance of skill in nursing (Negin, 2014). Self-efficacy can also be defined as the level at which nursing professionals feel able to carry out duties assigned to them by using knowledge and practice already gained (Soudagar, S. et al 2013: Negin, 2014.)

Generally, the level of self-efficacy of nurses is correlated with empowerment and professional autonomy. Nurses having very high degrees of self-efficacy regard barriers as chances as opposed to threats. Moreover, individuals having sufficient belief in their level of self-efficacy have the goal of overcoming the hard situations as opposed to avoidance. They have a better capability to cope with specific situations and have a higher likelihood to carry out a task to the point of achieving excellence. (Soudagar S et al 2013)

Self-efficacy differentiates the thoughts of individuals, their actions and feelings. Persons having high levels of self-efficacy choose the performance of tasks which are more challenging, begin and continue with activities, accomplish positive results, and have higher objectives for them. This in the end leads to the increase in their level of commitment towards the aims. Self-efficacy leads to the development of motivation and enhances performance. Additionally, high degrees of self-efficacy lead to the increase in the sense of self-control and outcomes and enables carrying out tasks at higher degrees. Self-efficacy impacts performance by being the link between the previous actions and exposures. Contrary to this, persons lacking self-efficacy have a higher likelihood of facing problems in carrying out particular activities (Davis, Davis & Williams, 2010).

Generally, self-efficacy is impacted on by numerous factors. For instance, social experiences have an impact on self-efficacy and enable the determination of whether one has a low or high level of self-efficacy. According to (Chen 2011), the belief of people in their capability to carry out particular behaviors significantly predict their manner of functioning as it regards choice behavior, thought patterns, emotional reactions and effort use. The experiences of mastery promote feelings of confidence and eventually self-efficacy (Maki, Ichiro & Miyako 2012). On the contrary, task failure results in lower levels of self-efficacy. Self-efficacy is linked with personal attributes and those older nurses with urban backgrounds and who have experience have higher degree of efficacy in their care behavior (Yardley, Irvine & Lefroy (2013).

2.4.1 Developing self-efficacy

The increase in the level of self-efficacy may lead to the enhancement of the confidence and independence. According to Goodstone, et al. (2013), the intention to stay and job satisfaction is improved by strong feelings of practice self-efficacy. Students having low degrees of self-efficacy have the tendency of avoiding circumstances, which in the past resulted in

failure. In the case that this takes place in nursing, the result would be educational catastrophe. It results in the situation in which students avoid certain duties, which they have the perception that may lead to failure in course of their learning. Such students would have lower clinical self-esteem and have a higher likelihood of leaving their profession (Park, et al. 2013.).

In the case that students have belief in their abilities, they will employ their highest level of efforts in varied circumstances. Self-efficacy is highly necessary for clinical nurses and nursing students and as such, nurses having a low level of self-efficacy would not undertake the required actions. In the present time in which making errors in nursing may lead to serious consequences, such people with a low level of self-confidence may not start duties in which they do have the surety of their capabilities in order to avoid making mistakes. (Seyedfatemi, N., Tafreshi, M. & Hagani, 2007.)

To avoid this, Goodstone, et al. (2013) states that students need to visualize success on tasks that they thought they would fail. Park, et al. (2013) argues that increased level of occupational self-efficacy has the ability to predict significantly higher rates of completion of programs. The verbal validation of the student learning, the provision of feedback and supporting the students in a positive manner has the ability to raise the self-efficacy of students. (Goodstone, et al. 2013: Park, et al. 2013)

Moreover, Soudagar S et al (2013) stated that students need to have the chance to practice the clinical skills under the supervision of an educator; students ought to receive feedbacks in a continuous and effective manner throughout their study period; clinical educators ought to provide different clinical experiences for their students; and lastly, students require encouragement to act in an independent manner and under the indirect supervision of the clinical educators till they arrive at a specific level of competency. (Cunningham, J., Wright, C. Baird, M.)

3 AIM, PURPOSE AND RESEARCH QUESTIONS

The aim of this thesis is to make provision for a better learning environment that supports and delivers the results envisioned by nursing institutions in Finland.

The purpose of this thesis is to establish lasting solutions to help improve the level of communication, critical thinking and development of self-efficacy for international nursing students in Finland.

In order to achieve the stated aims of this thesis, the authors have formulated several research questions that this study aims to answer and these questions are as follows:

1. How can the level of communication skills in international students be improved?
2. How can critical thinking skills acquisition level be improved?
3. How can development of self-efficacy be promoted in these students?

4 METHODOLOGY

This chapter is dedicated to the processes through which such techniques were deduced by the use of literature review as methodology.

4.1 Literature review as a research methodology

Current research in nursing studies on clinical problems is supposed to be established and carefully analyzed by a researcher so as to come up with useful materials for the study. Literature review structure is crucial in any scientific study. Coughlan (2008) describes Literature review structure as a way of coming up with review topics, literature search and reading, criticizing, analysing and writing.

Literature review was used because it's currently highly used in health related and medical studies. According, to Salkind (2010, 726) literature review enables the researcher to search, analyze, synthesize and understand past studies conducted in his/her area of study. This approach integrates the related available literature to help in solving the current problem under a study. Systematic literature review research was used because it will enable as to answer the research in a well-focused manner and using a more defined approach. This approach will further give a more comprehensive understanding of the research. This will enable the drawing of conclusion from multiple studies. (Garrard 2014, 4 Cronin, Ryan & Coughlan 2008, 39)

According to Cronin (2014, 21), the practical and theoretical backgrounds used by a researcher in a study needs to be carefully assessed so as to weigh the available alternatives in other to come up with a helpful material for a clinical study. In this study, literature review was paramount for identifying research questions and investigating the correct answers by the analysis of available literature work. This was achieved through utilization of the systematic methods of literature review.

The research used the integrative literature proposed by Whitemore & Knafel (2005) for the purpose of providing a greater comprehension of the

facts and for enhancement of its validity. The literature review included the studies that have been conducted both theoretically and empirically.

4.1.1 Data collection

According to, Rosenberger (2001) this study looked keenly on literature materials done in the past by researchers from various learning and research institutions, Government agencies and industrial researches. Academic search elite Elsevier, EBSCO, Science Direct, books and PubMed databases were highly used in this study to come up with old and current research regarding the aforementioned area of research. The authors focused on search terms such as "Self-efficacy", "critical thinking", "communication skills", "International nursing student", or "Tutoring and mentoring". The search terms were entered and searched in the databases to find out the existing research materials containing used search words.

The authors used the inclusion and exclusion criteria (Table 1) Inclusion: the articles that are published between 2006-2015 and articles that are more relevant to the current situation and the study. Articles containing the key words and addressing the techniques discussed because they contain content that can help in solving the problems and support the study. Articles written in English as the study is in English. Articles available as free text because they are available for anyone. Articles available as full text because they enable thorough analysis. Exclusion: The articles that are published within this time frame are not relevant to the current situation and the study. Articles have key words but do not address any techniques discussed because they are not relevant to the study. Articles, in other languages (not relevant). Articles are not free because they are not available for everyone. Articles available only as abstracts do not enable thorough analysis.

Firstly, in (Table 2) the authors' obtained 20 titles from Elsevier, 1467 title from PubMed, 983 titles from EBSCO and 73 titles from science direct, it resulted in a total of 2533 articles. Titles of the articles were read and

some were excluded, some articles appear in two or more different databases and were discarded leaving 100 articles to be examined.

Secondly, abstracts of the relevant articles were read and the suitable articles were selected for the literature review. Selections of the relevant articles based on the topic and the research questions were chosen, and it was thoroughly examined and scrutinized was carried out, the authors. Inclusion and exclusion criteria were implemented to get the results.

The final sample comprised 10 scholarly reviewed journals. The criteria of inclusion and exclusion are indicated in the table 1.

Criteria for inclusion	Criteria for exclusion
Articles published between 2006 and 2015	Articles published earlier than 2006.
Articles containing the key words and addressing the techniques discussed	Articles having key words but do not address any techniques discussed
Articles written in English	Articles in other languages
Articles available as free text	Articles that are not free
Articles available as full text	Articles that are only available as abstracts

TABLE 1: The criteria for inclusion and exclusion

TABLE 2: Results of literature search

Database	Key terms	Results	Chosen on basis of title and abstract	Relevant studies
1. Elsevier	Self-efficacy, critical thinking, communication skills	20	10	6
2. PubMed	Self-efficacy or critical thinking or communication skills or international nursing student and Finland	1467	20	10
3. EBSCO	International nursing student, tutors, and tutoring/ mentoring	98	10	0
4. Science direct	Self-efficacy, critical thinking, communication skills	73	10	0

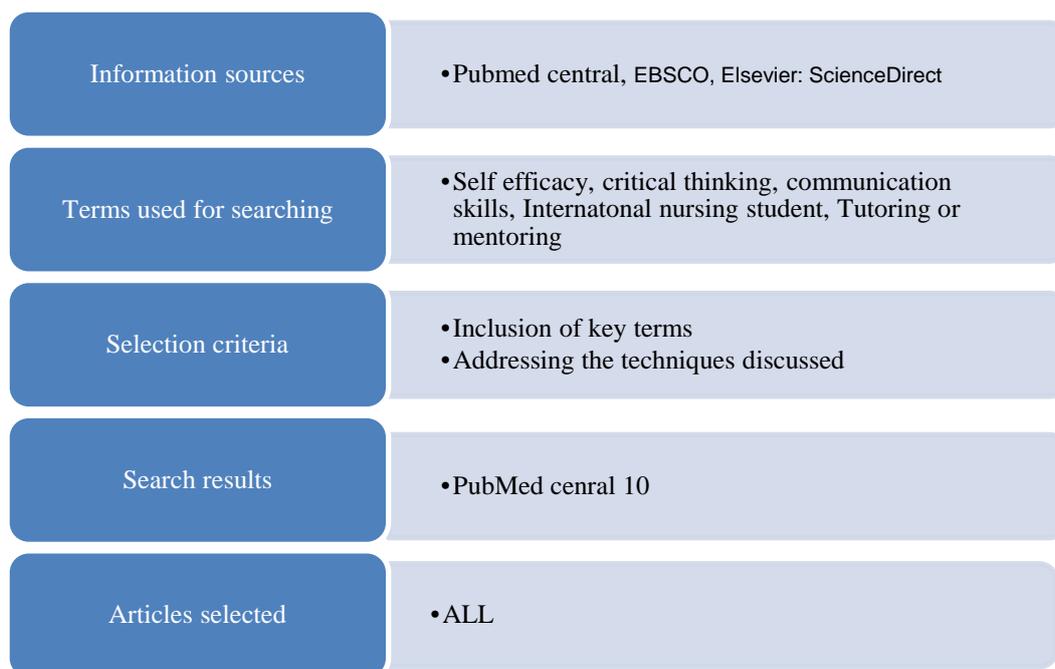


FIGURE 1: The process of data search, the terms used, the criteria of selection, search results.

4.1.2 Data analysis

The goal for the analysis of the data was to assist the authors to test the theoretical issues to enhance understanding of the data.

An inductive content analysis of the available articles was carried out; each article was read on the basis of its relevance to the research topic, articles between year 2006 - 2015 selections were implemented based on how relevant the article is to the research work.

Inductive Content analysis is the categorization of data analysis; it is also a way of analyzing some means of communication. Ideas are motivated, through scrutinizing forms the theme of the data that can be words or phrases (Yang, 2008, 689).

Inductive content analysis approach can be changed from specific to general the inductive content analysis is done in three phases which are preparation, organizing and reporting. First phase is an open coding articles were read several times and notes taken to get the main ideas.

Second, phase creation of category to get the main ideas the data had to be compared and summarized. Then last phase to get the main category the articles with similar content had to be put together (Elo & Kyngas 2007,109-110.)

According to inclusion criteria the abstract were read several times to be confirm that the studies were related. Then the ones that are relevant to communication skills or critical thinking skills or self-efficacy were selected. Articles, which got selected for the final time, were read and re-read through over and over again the selected articles were checked and analysed. Articles that were scrutinized are the ones that answer the questions, which were highlighted. The ones that are similar were coloured and coded, then put into the subcategories. Lastly, subcategories comprises of four main categories. Figure 2 shows the data analysis process below:

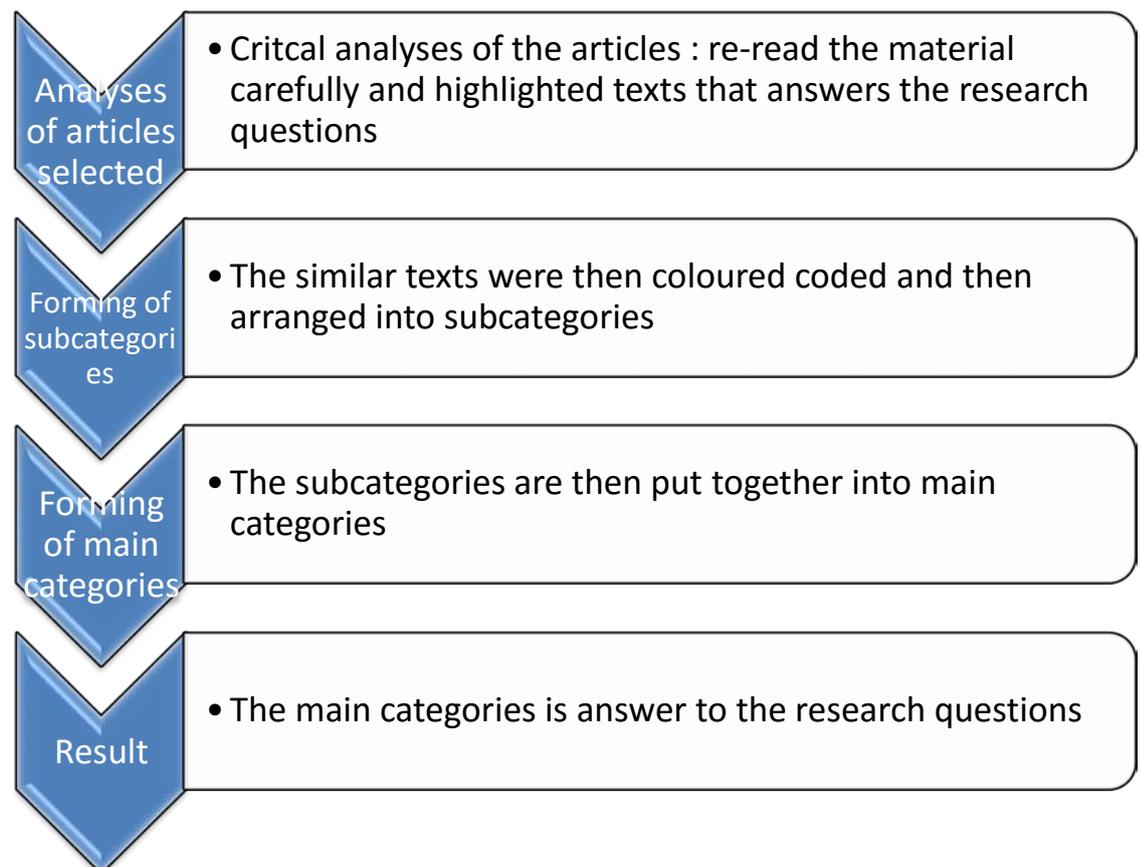


FIGURE 2: The analysed data analysis process

5 FINDINGS

The charters contain 10 literatures reviewed by the authors. The results are arranged in accordance with the studies reviewed beginning with the studies that address the alternative techniques of developing all the three skills that address the research question: Communication skills, critical thinking and self efficacy.

TABLE 3. The results of the literature search were grouped according to the research questions.

Sub-Category	Main Category	Research Question
Standardized patients Clinical skill laboratory Human patient simulation	Simulation	Communication skills
Human patient simulation High fidelity simulation context Virtual patients	Simulation	Critical thinking

High fidelity simulation context		
Virtual patients	Simulation	Self-Efficacy a
A mixed methods approach		

5.1 Development of communication skills

Standardized patients

Simulation conducted by with standardized patients.is one of the best means for development of communication skills, (Carvalho, et al. 2014: Fay-Hillier, Regan & Gallagher 2012 & Bagnasco, et al. 2014). First, the standardized patients can aid the development of effective approaches to the delicate interpersonal circumstances for instance the conversations that are practice related, and have the capability of rehearsing the effective responses for situations that are ethically problematic without risking exacerbating an ethical dilemma (Carvalho, et al. 2014) Furthermore Fay-Hillier, Regan & Gallagher (2012) found that 65% of medical errors were linked to communication breakdowns. Further supported by the results reveal that the topics covered during the simulation sessions are not replaceable and that the methods used were highly satisfying and the students all desired to take part in such an activity in the future (Bagnasco, et al. 2014).

Human patient simulation

The study conducted by Fay-Hillier, Regan & Gallagher (2012) was the only one that mentioned human patient simulation. Based on the 65% of medical errors were linked to communication breakdowns. They indicate that the techniques can be employed in promoting the communication skills of patients, teams and peers. They were also discovered to have the

capability of promoting care that is centred on the patient as well as interdisciplinary communication. Based on the argument that simulation results in increased self-confidence (Fay-Hillier, Regan & Gallagher 2012.)

High fidelity simulation context

This was demonstrated by the study carried out by Lewis, Strachan & Smith (2012), which was, based on the need to address the development of skills for instance leadership, teamwork, communication skills and decision making for the purpose of enhancing patient care.

Clinical skill laboratory

Another aspect of simulation is the clinical skill laboratory, which is a facility with the aim of supporting the acquisition, enhancement and the maintenance of healthcare students' clinical skill. Healthcare professionals and students acquire the information technology, clinical and communication skill up to a certain competence level prior to meeting real patients on a one to one basis or updating new competencies during their professional life (Watters, et al. 2015: Rickles, Tieu, Myers, Galal & chung 2009.)

5.2 Development of critical thinking

Human patient simulation

Given the availability of many simulation techniques, and especially as it regards to computer programs, Johnson, Flagg & Dremsa (2008) compared the effectiveness of the use of HPS™ simulator and CD-ROM in different levels of thinking and cognition. The group of students that had used the HPS™ simulator performed significantly better than those that used the CD that used the CD ROM on higher levels of critical thinking and cognition and critical thinking but there were no variations as it regards to the low level cognition and critical thinking. The major benefit of using virtual patients is their capability to promote the skills of clinical reasoning (Rickles, Tieu, Myers, Galal & Chung 2009).

High fidelity simulation context

The study of Lewis, Strachan & Smith (2012), was the results found in high fidelity simulation context. Which indicated that there was a great significant improvement of which demonstrated critical thinking?

Virtual patients

The use of virtual patients is another aspect of simulation that was used it's a type of electronic-learning resource whereby the learner becomes a nursing professional and diagnoses and treats patients in an interactive manner. Such many times provide multimedia for instance video clips and audio clips which help in showing the findings of the procedures. The major benefit of using virtual patients is their capability to promote the skills of clinical reasoning. (Rickles, Tieu, Myers, Galal & Chung 2009),

5.3 Improvement of self-efficacy

High fidelity simulation context

Watters, et al. (2015) study reveals there was an observed increased in the levels of confidence of the doctors and nurses. Furthermore, from the perspective of communication and teamwork, the inter-professional training was found to be better than the unprofessional. (Watters, et al. 2015)

Lewis, Strachan & Smith (2012) put it that, it has also been linked to improved performance of teams in managing crisis situations, leads to the building up of effective leadership skills and enhances the critical thinking ability of the students and the development of the self-efficacy and confidence of students. The raids to developed the students' self-efficacy and confidence in their clinical abilities (Lewis, Strachan & Smith 2012).

Human patient simulation

Valizadeh, Amini, Fathi-Azar, Ghiasvandian & Akbarzadeh (2013) conducted a C-scale the results show that there was a notable increase in

the self-confidence of the students in the simulation group compared to other groups. The authors conclude that simulation has the capability of increasing the self-confidence of student nurses.

Furthermore, Shinnick, Woo & Evangelista (2012) conducted t-tests, ANOVA and stepwise regression analyses. The covariates in the analyses comprised the baseline self-efficacy, critical thinking, and gender, learning style, age, group membership and school, and it was an effective outcome.

Generally, it has been proved that making use of simulation and practical technique boosts the assimilation potential, self-confidence, critical thinking and cognition, as well as interpersonal and communication skill of international nursing students in Finland.

6 DISCUSSION

The main aim of the thesis is to make provision for a better learning environment that supports and delivers the results envisioned by nursing institutions. To achieve this the authors had to answer three questions: improvement of communication skills, improvement of acquisition level of critical thinking and promotion of development of self-efficacy.

The aim was well achieved as the articles analysed presented how the development of core skills in nursing can be achieved. The purpose was also reached in that the authors were able to establish solutions to help in the improvement of communication skills, critical thinking and development of self-efficacy for international nursing students in Finland.

The studies reviewed were carried out as scientific publications. Simulation has been used over the years and the changing of the simulations has led to a greater improvement of the skills of the students because they have had practical situations of manikins that mimic real life and hence putting the student in a real life situation boosting their self-efficacy

The variations between the results obtained from using real patients and those from using the standardized patients were not significant. The lack of significant differences between the two programs means that teaching and practicing communication skills and especially for international nursing students using the standardized patients would not lead to lower level of skill acquisition in comparison with their colleagues who are native Finnish speakers who can interact freely with the real patients.

Because many times nurses work in teams, the training of nurses using the simulation techniques need to include some level of inclusion of different professionals. In order to protect the level of inclusion of the international nursing students, the different teams of professionals can comprise faculty members who are more tolerant with their language acquisition problems and their accent than professionals from out of the learning institution.

The use of real and standardized patients in the development of nursing students' communication skills is that the situations in which the standardized patients may be used may vary and as such escaping the checklists used in the evaluation of performance. Even though research has shown that students react in the same way to real and simulated patients, the interaction with standard patients may therefore be different in comparison with real patients in terms of the manner in which the communication skills are applied. The instruments that adapt well in one circumstance may not in another.

The involvement of real patients in the development of these skills can lead to the feeling of being coerced and standard patients can prevent this problem. This is because; the standardized patients are instructed to give consistent and focused feedback for all the students. This is done in real time, and as such, the students can connect the feedback they get with the context of study and this is more valued in comparison with the feedback that students obtained from examinations.

Simulation enables the contextualization of various types of circumstances for clinical practice with the most common being the provision of the chances to present patients with situations that are deteriorating. Learners therefore require recognition, interpretation and integration of new knowledge with the previous for the purpose of deciding on what to do.

After the simulation, debriefing sessions allow for the learners to be challenged and to review their process of decision making in a critical way and to recognize their learning needs. The learning experiences therefore encourage the students to develop the skills of critical thinking and enable the learners to be more competent in patient care and complex circumstances. This process also parallels the development of self-efficacy among the students.

The study result is in connection with previous studies using different types and methods of simulation programs. Former studies have also revealed

some optimistic results of learning outcome has been developed which has been seen remarkable to enhance the international nursing students.

Furthermore, this study delivered a new perspective in dealings with the students' learning motivations, through the implementation of various simulations. Nonetheless, this simulation will be useful in the development of learning for a restored studying atmosphere that supports and brings the results foresaw by nursing institutions in Finland. Nevertheless, of the students' study will be highly motivated. Hence, our findings will inspire the tutors to provide more time on simulation activities. The study result also shows that simulation facilitates the process of learning different skills will help the international nursing students more better and in turn they can develop more communication skills, critical thinking and also improve on self efficacy before going for clinical placement.

6.1 Reliability and validity

From the number of studies carried out in respect to these problems and the careful analysis using adequate methodology in this study, the findings are valid and reliable. Most data were gotten from the right sources, like prior journals, relevant websites, government statistics and findings from other researchers. Each data was tested and verified before use.

The topic and the searching keywords were coherent and this led to getting good answers from the research questions. The data used was from publication that had been done during 10-year period of the current year of the thesis. In answering of our question there was consistency. The authors choose only those previous studies that had similarities.

All the data presented was from the previous studies that have been done and so the author did not come with anything new that had not been done.

6.2 Limitations

Little limitations were encountered as statistics change monthly due to the dynamism of the subject matter; also, the use of other methods together with simulation in some higher institutions made it slightly impossible to measure the degree of effectiveness of simulation in some instances.

The authors did not get a lot of information as expected because they were not a lot of writers in regard to the topic. There were good materials and sources but it was unfortunate that we could only access them until we bought.

We changed the topic and the research questions more than 3 times because we were not getting the answers to our research questions.

Finnish databases had sources but it was difficult to use since the authors are not well conversant with the Finnish language, which was unfortunate because the people it was to address includes the tutors.

6.3 ETHICAL CONSIDERATION

Given that this study reviews the literature that is already available in the public domain, the ethical guidelines of confidentiality, prevention of harm and informed consent do not apply. However, the individual studies reviewed were experiments conducted where the authors used humans as primary subjects. Care has to be taken in experimental studies to ensure that the participants' information is protected and that the participants remain anonymous. None of the studies indicate any breach of confidentiality. As a matter of fact, in each of the studies, the authors clearly provided pre precise but detailed data. No participant was mentioned in person and the demographic variables provided were simply given in summarized and descriptive forms.

7 CONCLUSION

The aim of this thesis is to make provision for a better learning environment that supports and delivers the results envisioned by nursing institutions in Finland. The provision was found to be surrounding the problems of language acquisition that make it difficult for the students to fit in the clinical sessions and in the interaction with other medical staff. This division by both staff and patients in the real clinical sessions was further found to reduce significantly their level, of self-efficacy, communication skills and critical thinking.

The findings also show that students favor simulation experiences, that they are rated as being more helpful compared to real environment, and that the differences between professionals that learn through field work and those who learn through the simulation environment is statistically insignificant. Also, due to continued interactions within the simulation environments, there is a possibility that the students who are exposed to these early enough will eventually develop better language and communication skill and become accepted within the Finish clinical setting by the patients and the medical team. As such, continual exposure to simulation is an effective way of providing training as it ensures skill development and ultimately eradicates the deficiencies that make the international nursing students not accepted in the real clinical setting. It therefore has double solution effect.

The authors recommend that simulation to be carried more frequently, for instant monthly. Also, the mentors/tutors at the clinical should be invited to watch or even participate along with the international nursing students if possible. The tutors should introduce the various types or methods of simulation to be performed. This in turn will help the international nursing student improve self-efficacy; develop critical thinking skill and communication skills.

This thesis suggests that further studies should be done to find out the best strategies that tutors and mentors can use in helping international

nursing students, to overcome the challenges they are facing in communications, critical thinking and to be self-efficacy.

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APPENDICES 1

Moreover, the journals reviewed are sampled in the table 4

Authors, Country, date and title of article	Research Aim	Number of Participants	Method used	Results
<p>Carvalho, I. P., et al. Portugal (2014) Teaching communication skills in clinical settings: comparing two</p>	<p>It has been implemented to improve healthcare providers' communication skills</p>	<p>Twenty-five healthcare professionals participated in the program in 2008 and another 20 enrolled in 2009</p>	<p>All interviews were videotaped with participants'</p>	<p>Improvements were statistically significant in both years in all measures except in simulated patients' assessment of the 2008 group. Differences between the two samples were</p>

<p>applications of a comprehensive program with standardized and real patients</p>				<p>non-significant. Differences between interviews with standardized and with real patients were also non-significant.</p>
<p>Rickles, N.M., Tieu, P., Myers, L., Galal, S. & Chung, V. America (2009) The Impact of a Standardized Patient Program on Student Learning of</p>	<p>On how to determine the quantitative and qualitative value of a lecture-laboratory course with standardized patients on student communication skills.</p>	<p>Counseling tapes of 127 students.</p>	<p>Lecture-laboratory course with standardized patients were conducted.</p>	<p>A lecture-laboratory course with standardized patients had a significant impact on student communication skills across time, was well received by students, and standardized patients</p>

Communication Skills.				
<p>Lewis, R., Strachan, A. & Smith, M.M. (2012)</p> <p>United Kingdom</p> <p>Is High Fidelity Simulation the Most Effective Method for the Development of Non-Technical Skills in Nursing?</p>	<p>To review the literature on the use of simulation in the development of non-technical skills in nursing</p>		<p>High fidelity simulation innovative education and training methods (A systematic search of the literature)</p>	<p>Simulation is positively associated with significantly improved interpersonal communication skills the effective development of transferable, transformational leadership skills, and has also been demonstrated to improve students' critical thinking and</p>

				clinical reasoning in complex care situations, and to aid in the development of students' self-efficacy and confidence in their own clinical abilities.
Watters, W., et al. United Kingdom (2015) Does interprofessional simulation increase self-efficacy: a	To compared uniprofessional and interprofessional versions of a simulation education intervention, in an attempt to understand more about whether it	One hundred and fifteen nurses and midwives along with 156 doctors,	A mixed methods approach utilised precourse and postcourse questionnaires	Simulation training enhances participants' self-efficacy in clinical situations.

comparative study	improves trainees' self-efficacy.			
Bagnasco, A., et al. Italy (2014) The role of simulation in developing communication and gestural skills in medical students.	To assess student satisfaction with laboratory training in an Advanced Simulation Center.	261 hird-year students of the Medical School	Advance laboratory sessions an anonymous questionnaire was designed based on literature review	Results showed a high level of satisfaction with the methods used, the instruments developed, and with the expertise and approachability of the educators.
Johnson, D., Flagg, A. & Dremsa, T. L.	To examine if there were statistically significant differences	99 active duty and reserve healthcare	Use of HPS, TM use of the CD-ROM, or the	The HPS TM is superior to using CD-ROM and should be

<p>United State of America (2008)</p> <p>Effects of Using Human Patient Simulator (HPS™) versus a CD-ROM on Cognition</p>	<p>in HPS™ and CD-ROM educational strategies in lower-level, higher-level cognition and critical thinking.</p>	<p>volunteers</p>	<p>control group</p>	<p>considered as the choice in teaching</p>
<p>Fay-Hillier, Regan and Gallagher</p>	<p>To examine the students taking a Mental Health course</p>		<p>Using a standardized patient simulation</p>	<p>The students achieved the NESF learner outcomes of</p>

<p>United State of America</p> <p>(2012)</p> <p>Communication and Patient Safety in Simulation for Mental Health Nursing Education</p>	<p>in a Bachelor of Science in Nursing (BSN) Program to support their practice of patient and professional communication, as well as, collaboration skills with a patient-centred approach using a standardized patient simulation.</p>			<p>skill achievement in nurse- patient communication, team communication, and peer feedback in an undergraduate mental health nursing court</p>
<p>Valizadeh, L., Amini, A., Fathi-Azar, E., Ghiasvandian, S. and Akbarzadeh, B.</p>	<p>To review the effect of the simulation teaching method on nursing students' self-</p>	<p>45 nursing students in their 5(th) and 6(th) semester</p>	<p>Simulation teaching method and practical training.)</p>	<p>Results revealed a significant increase in self-confidence of nursing students</p>

<p>Iran (2013)</p> <p>The Effect of Simulation Teaching on Baccalaureate Nursing Students' Self-confidence Related to Peripheral Venous Catheterization in Children: A Randomized Trial</p>	<p>confidence related to peripheral venous catheterization in pediatrics patients.</p>			<p>related to peripheral venous catheterization in paediatric patients by simulation</p>
<p>Shinnick, M.A., Woo, M. & Evangelista, L.S. United State of</p>	<p>To investigate the gains in knowledge and self-efficacy using</p>	<p>162 students (age = 25.7 ± 6.6, gender = 85.5% female)</p>	<p>Teaching methodology were not known</p>	<p>HPS; is an effective teaching methodology for prelicensure</p>

<p>America (2012)</p> <p>Predictors of Knowledge Gains Using Simulation in the Education of prelicensure Nursing students</p>	<p>human patient simulation (HPS) in the education of prelicensure nursing students</p>			<p>nursing students regardless of age, learning style, or critical thinking ability</p>
<p>Raurell-Torredà, et al. Spain (2015)</p> <p>Case-Based Learning and Simulation: Useful Tools to</p>	<p>To compare skills demonstrated by students with no previous clinical practice (undergraduates) and nurses with clinical</p>	<p>101 undergraduates</p>	<p>Human patient simulator and cases validated by the National League for Nursing,</p>	<p>Case-based learning improves the patient assessment skills of undergraduate nursing students, thereby preparing them for clinical</p>

enhance Nurses' Education? Nonrandomized Controlled Trail	experience enrolled in continuing professional education (CPE)			practice
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