Role of preceptors in the development of student agency of student nurses during work-integrated learning

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Nursing students are supervised by clinical experts (preceptors) during work-integrated learning (WIL). Students can exercise agency during this process and this agency enables them to problem solve and reflect, while they apply their learning. This qualitative study explores the influence that preceptors, and the context of WIL, have on the agency development of student nurses as they navigate the work environment as part of their education. Data was elicited from 25 students' all of whom were studying in the same Irish University and 11 preceptors who were tasked with supporting them through diaries and interviews. This paper contributes to the understanding of agentic engagement within the clinical placement component of nurse education. Nursing students identified that without adequate preceptor support from their preceptors, they can feel disempowered, disrespected and even marginalized, resulting in a negative effect on the development of their agency.

Keywords: Nursing education, work-integrated learning, mentorship, agency

Within the structure of the nursing qualification, it is well recognized that clinical placement is critical for sustainable quality care to prevail (Soler et al., 2021) and that supporting clinical learning cultures can positively impact practice (Henderson et al., 2010). Students need a safe environment (Hashemiparast et al., 2019) in which to apply their learning under the supervision of clinical experts, known as preceptors, who teach nursing students in addition to meeting their existing responsibilities and patient care. Preceptors are responsible for supervising the experience of students who are undertaking a placement or other work-integrated learning (WIL) activity (Winchester-Seeto et al., 2016), as well as clinical assessment, and are regarded as the 'gatekeepers' of the profession (Hunt et al., 2012, p. 351). In practice, preceptors set objectives, provide work-based affordances (Billett 2002) for students, assist them in learning the practice of nursing, give regular feedback, and evaluate students' performance (NMBI, 2016).

Within Ireland, the pre-registration nursing apprenticeship model changed as nursing education progressed and, in 1987, the Irish Nursing Board (formerly An Bord Altranais and currently renamed Nursing and Midwifery Board Ireland [NMBI]) adopted a policy decision to move all nursing education into higher education institutions. Consequently, current preceptors within the nursing environment were educated either under the apprenticeship model (pre-1987) or the more formal higher education qualifications. There was some hostility apparent in relation to moving the profession into academia and this influenced preceptors in terms of their approach to teaching and learning (McKendry et al., 2012).

Internationally the 'theory-practice gap' is recognized (Saifan et al., 2021, p. 1) along with the imperative that nursing students can transfer their undergraduate knowledge and skills into practice to become competent practitioners (Saifan et al., 2021). In addition, the quality of clinical learning is identified as

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a long-standing challenge in nursing education (Munangatire et al., 2023) and further research into this process can add understanding to these challenges. During this time, students are on the periphery of their profession, or the nursing community of practice (CoP), and they are often on the sidelines of the practice in an observational role (Lave & Wenger, 1991). This is referred to as Legitimate Peripheral Participation (LPP), and it is through a gradual transition that the newcomer (student nurse) becomes a full participant (qualified nurse) and eventually graduates to become a full member of the nursing community. Full members of a CoP (preceptors) have a mentorship role (Ferrier-Kerr, 2009) during this process, and without this, effective learning would be impossible (Spouse, 1998). This student-preceptor relationship forms an integral element of this process and allows the student, as the newcomer, to feel part of a team within the workplace (Ajeigbe et al., 2013). Conversely, if students are not supported through mentorship or inclusion in teamwork, it can be a source of stress for them (Portoghese et al., 2014).

As student nurses progress through their formal education and WIL, they are at the threshold of 'identifying as' or 'becoming' a nurse (Jackson, 2016). Indeed, their identity transitions from student nurse to qualified nurse; they can evolve from identifying with a role of junior member of staff (Kumaran & Carney, 2014) to a role assuming substantial responsibility, resulting in increased confidence. However, this transition is not without challenges and, within this context, preceptors need to recognize the psychological distress that students can face. Examples include adversity or malaise in relation to clinical assessment and clinical staff relationships (Deasy et al., 2011), that can increase the likelihood of nurses making errors that may negatively impact patient outcomes (Sahay & Willis, 2022). Consequently, the psychological distress may result in poor student performance, disengagement with the area of study, or withdrawal from academic study (Jones, 2007).

Ideally, the WIL or clinical placement environment should allow students to increase control of their own learning (Patall, 2024) and behavior ensuring good practice, indeed sometimes challenging practice, and meeting patient needs that are critical components of nursing student development. A "supportive relational learning space promotes the trust and openness necessary to co-construct and try out new knowledge and practice" (Mentis et al., 2016, p. 67), which can empower their agency development (Cook-Sather et al., 2021). When students demonstrate independent thinking, agency can empower student nurses to be agents of their own experiences, which can be enabling (Giddens, 1991). This provides them with the capability to resist conforming to cultural norms (Barbalet, 1985). Agency should allow them to complete tasks and engage in problem-solving where they can reflect on practice and apply what they have learned in future practice (Stalmeijer et al., 2009), which can effect change (Karp, 1986). This exercising of power is integral to agency, which requires a practical awareness of expectations around behavior to conform; reflective monitoring of individual behavior; and a knowledge of the contexts in which individuals operate (McPhee, 2004). Patall (2024, pp. 228-229) explains that:

> Research on agentic engagement within educational settings is in its infancy, and … much more work needs to be done to better understand the nature, function, antecedents, consequences, and circumstances of agentic engagement as we consider how it might be leveraged to improve people's outcomes across a variety of settings.

This study sought to understand, discover, and interpret the lived experience of both the preceptors and the student nurses in Ireland during clinical placement, and the preceptors' influence on agency development. This research adds to the work of Patall and others in further developing an

understanding of agency and agentic engagement. This was addressed through the research question, namely: Do preceptors empower agency among students and, if so, how?

METHODOLOGY

A qualitative approach was deemed to be most suitable to the aims of the study. According to Silverman (2022), qualitative methodologies are appropriate for exploring the particular situations and experiences of individuals. Qualitative approaches to research help to gain an "understanding of the social world though examination of the interpretation of that world by its participants" (Bryman, 2016, p. 392), and to capture the real lives of those involved (Miles, 2015). Ethical approval was received from the hospitals and healthcare facilities where the participants worked. The ethics approval from the relevant HEI in which the student participants studied and, the HEI where the researcher studied, was provided (ECM 3 (0) 07/05/19). Consent from participating students and preceptors was also obtained.

Data Collection Method

The diary-interview method offered an observation by proxy approach to source data (Hyers, 2018). The researchers approached students to complete nine phases of research over a two-year period. Phases 1-7 required the students to maintain a diary for various weeks of their third- and fourth-year clinical work placements in relevant healthcare settings. The students were provided, with clear instructions, within the diary, on what reflections were required on their identity formation, their sense of becoming a nurse, how they found the process of progressing from student to nurse, to describe the workplace culture, and how they found the preceptorship model for example.

The same students were interviewed after their work placements forming phases eight and nine of the research. The interview questions allowed the researcher access to respondents' feelings, motives, behavior and thoughts, similar to observation itself. The reflections captured did not form part of the students' coursework.

Participants and Recruitment

The participants were a purposive-selected sample of nurses recruited from a single Irish Educational Institute and participating preceptors worked in various clinical settings where the students completed their placements. A total of 24 students were recruited to engage in the research, reflecting on their final third-year placement and their final fourth-year internship. Interviews were designed after reviewing the completed diaries that were administered to students. Therefore, the resulting data collected from the diaries informed the design of the interviews. Of the students who participated, 15 were studying for the BSc in General Nursing and nine were studying for the BSc in Mental Health Nursing. Eleven preceptors were interviewed and those who participated worked with students who were on placement from the Institute in the Southwest of Ireland. Preceptors' years of experience varied from five years to over thirty years. Four preceptors worked in the Mental Health sector, while seven worked in General Nursing. Participants were given codes to protect their anonymity where S1-S24 referred to students and P25-P35 referred to preceptors.

Data Analysis

Thematic analysis (Braun & Clarke, 2006) was adopted to analyze the data and diaries, and transcribed interviews were read and reread to gain an understanding of data and concepts. These documents were then manually analyzed in Lumivero's NVivo (v.11) by the primary researcher, which was useful

for thematic ordering of data. However, subsequent analysis of diary and interview data was conducted by the research team. Firstly, using the key thematic areas identified through NVivo, the data from the diaries and the subsequent interviews were thematically ordered and analyzed. Utilizing Harrington et al.'s (2012) iterative and recursive process, the authors searched the data for consistent narratives. This recursive process captured consistent aspects of participant experiences, which were coded.

The importance of the preceptors' role in supporting student agency development emerged as a key theme. The two factors influencing how they support the agency development of student nurses while on clinical placement were identified as, a) the approach they took in relation to their preceptorship role, and also, b) the context of the clinical placement itself. The data and emerging themes were reviewed manually to reduce bias and ensure consistency. Participant quotes were selected by the research team for use in this paper based on their representativeness and consistency in aligning with the themes and subthemes. The study findings were peer-reviewed by an external researcher familiar with qualitative research but not involved in the actual study.

RESULTS

Factors enabling student agency development while on clinical placement were identified as the preceptor's approach to their role and the context of the clinical placement. These factors will be examined within this section.

Preceptor Approach to their Role

The preceptor's approach to supporting students was a key factor within the students' experience. Student experience and agency development was "dependent on the competence of the preceptor" (P25), and a positive student experience was determined by whether "the preceptor is someone who is interested in being a preceptor" (P36). The preceptor's approach also influenced student's retention as, for example, one student explained that,

> if it wasn't for that preceptor and that team I would have walked straight out that door and never have come back. It was the fact that I had their support ... and I could cry if I wanted to. (S9)

In turn, other students identified the open culture that existed between nurses and students, the kindness that preceptors demonstrated, and that speaking openly was facilitated in the work environment. When preceptor support was not apparent, there was a clear impact on the student experience and their agency development. One student observed that "they [older nurses] have forgotten, along the way, the friendly smile" (S18). Other students observed that experienced preceptors were complacent, set in their ways, resistant to change, and were task oriented. Preceptors also observed this negativity where one reflected (P27) that "old style nurses" existed and another spoke of a "toxic" work environment (P25). This negatively impacted the students' learning and their ability to assert themselves, where, for example, one student reflected that "you are looked at more like a pair of hands" (S22). At times, students felt like "a bit of a nuisance" (S11) to other healthcare professionals or that they were not taken seriously. Similarly, they were "treated more like a health care assistant" (S13), and yet another who explained that the preceptor "rolled her eyes and walked away from me ... that was particularly demoralizing" (S3). It was clear that the experiences of students were dependent on the teaching style adopted by the preceptors. A form of deferential learning emerged where, for example, the preceptor reflected that "I like to keep them [students] quite close and make sure they are shadowing me" (P33, Interview), which would not be conducive to student agency

development. Another student mentioned that "they are teaching us one thing here [in college] and it is so different in placement. It isn't the reality when we go out" (S9, Interview). This resulted in a variance of knowledge imparted to students.

Preceptors observed that student agency was necessary to be an effective nurse "especially when they hit fourth year … they are not relying on someone to be watching over them all the time … so working independently is important at that level anyway" (P31). Another preceptor explained "…they almost stand a bit taller, they are just sure of themselves which is nice…just to give them that confidence" (P27). Preceptors also recognized how the nursing role required expertise, the ability to diminish stigma, to prioritize, delegate, and work competently. This expertise required students to make independent decisions and exert agency and one student noticed that they were "working off my own clinical judgment, making decisions regarding patient care" (S3). There was a sense that becoming a professional was recognized by students when they were, for example, invited to sit at the nurses' station and considered as part of the nursing team, while on clinical placement.

The Context of the Clinical Placement

There were times when the reality of the nursing profession, particularly in relation to the work environment, was at odds with the students' original perceptions/expectations. This affected their learning and their ability to develop agency within the work environment. For example, students and preceptors identified sectoral wide difficulties such as the lack of staffing, the shortage of available time, and an overall system failure as barriers preceptors faced when teaching students. The students reflected on the perceived additional supports that preceptors needed – there were situations where the students perceived that the preceptors themselves were not supported. For example, students reflected that the preceptorship model seemed to be imposed on nurses, "it [teaching] is forced on nurses as well ... they all have to be preceptors but not everyone is interested. It should be a choice because some people just don't want us" (S13), with another student observing that "it [teaching] is forced on nurses" (S13) and that the preceptors' workload "would leave the nurse with little or even no time at all to teach the students anything".

It was evident from the research that the role of the preceptor was not always beneficial to the clinical placement. Within the work environment "sometimes they [preceptors] are a source of stress for students as opposed to being a source of support" (P25). Compounding these difficulties was the perceived limited agency that preceptors themselves have within their own profession, which was evident within the placement site, with one student observing that nurses were caught up in ranking their position. A preceptor explained that "you see the more experienced nurses as I will call them … are very much caught up in seniority and 'I am senior and you are junior, and I have moved on from there'" (P25). Another preceptor observed that an outdated hierarchy existed in the work environment. Likewise, this had implications for students where they "were not given enough responsibility or a broad enough scope to practice things that we could be doing on internship so like taking bloods or cannulation" (S8).

Another contextual challenge was the impact of the differences in nursing qualifications within the workplace. One student explained that "they [nurses who qualified in a previous generation] did more apprenticeship style ... learning on the ward. There was no, or maybe less, time in the classroom so you were learning way more at a younger level" (S4). They also observed that as the teacher/learner relationship develops, they would seek students' opinions on latest techniques, which could provide a sense of agency for the students. Mutual learning resulted when one preceptor reflected that "you

would [learn from students] because they would have the most current knowledge, they have the most up to date knowledge from learning it in class" (P28). Preceptors reflected on the sense of agency that students could aspire to within their profession. For example, one preceptor explained that,

> [a nurse] has to prioritize what she could delegate to the health care assistant, and they could go and dress the bed or … learning about prioritizing, delegating and the competence to do that because I know that can be an issue as well." (P27, Interview)

And from a student, "that is not what nursing is about [making cups of tea] … you are doing the drugs, changing dressings … interacting with the doctors on their actual treatment. It is not doing the bed baths and everything" (S22, Interview).

It was clear that students wanted to learn and they actively sought out opportunities to learn new skills such as doing catheterization, for example. This required exercising agency, as one preceptor explained that "the student nurse has to go from different place to different place … with their initiative to learn new skills and new environments" (P27). Another student observed that "This year then you have your own caseload and you can experiment with different things. A bit of trial and error really, I think. You don't really get that opportunity when you are just observing" (S27). Students began to take control of their own learning when they entered the third and fourth year of their education, when, for example, they approached preceptors and asked for learning opportunities. One preceptor explained that students engaged by "asking the nurse to explain it … going home and doing research … then the protocol and procedures … you would go home and look up the drugs" (S22).

There were, however, instances where students did not feel they were learning appropriate nursing skills, as one student explained that they were not included in drugs rounds but were "sent off to make beds" (S17). They saw this as a result of a lack of agency within their learning, affordances, and an absence of a sense of responsibility. The development of student agency was evident when students felt encouraged and empowered to learn; when they felt part of a team and could share problems, and that they were considered an equal member of staff. It was evident that the role of the preceptor in guiding the students was key to agency development, where a preceptor reflected that "[students bring] fresh energy, enthusiasm, new ideas and pro-activeness" (P30), and that "they [students] are always asking questions so you [preceptors] have to keep updating them and your own knowledge" (P33). A student recalled the preceptor "telling me make sure you put yourself forward for things" (S19), and preceptors recognized the importance of this in their approach "before we start, I would make sure I am including them as part of the team and that they are not just figuring it out for themselves … you know making sure they are involved in the report (P36)".

DISCUSSION

There is evidence in this research that when students were newcomers to the nursing work environment (Hashemiparast et al., 2019) they adapted to existing cultures. They were engaging in Legitimate Peripheral Participation (LPP) which involved their transition to becoming a full member of the nursing Community of Practice (Lave & Wenger, 1991). The students, at times, struggled in 'becoming' a nurse (Jackson, 2016) and with forming their identity as a student nurse. This was evident in the student reflections that they perceived they were "more like a pair of hands" (S22) or "a bit of a nuisance" (S11) to other healthcare professionals or that they were not taken seriously.

Initially, students often conformed to this culture and its embedded structures, resulting in a feeling that they were being treated as visitors rather than being embraced into the community (Baumeister &

Leary, 2017, Johnston, 2016) by preceptors. This often led to a feeling of uncertainty in relation to students' perceived level of autonomy in using their initiative (Kennedy, 2016), as preceptors' approach to their role determined the level of student independence. Preceptors did not always engage with students, often sending students away or treating them in a derogatory way. In other instances, preceptors were seen as standoffish or, indeed, a source of stress. Consequently, students' ability to demonstrate resilience and continue their clinical placement posed more of a challenge than the learning itself.

The hierarchy on the placement site did not go unnoticed by either the students or the preceptors. Exposure to rules, codes, and standards within which the preceptors worked was important in the process of becoming a nurse (Brown et al., 2012). Preceptors worked to ensure that students knew what was appropriate for nurses and that they would conform to this both implicitly and explicitly. Consequently, a form of deferential learning emerged where students were expected to follow preceptors. Often students became frustrated when they were not granted enough responsibility. While these examples evidence control within the preceptor/student relationship, there was also evidence of resistance on the part of students, which is recognized as a prerequisite for the establishment of agency (Foucault, 1978, 1979, 1984). The ability to question and assert agency emerged where, for example, students began to reflect on actions of negotiating, persuading, and delegating. At times, this would affect their ability to exercise agency within the work environment. However, even if they complied with existing work environment power structures, it emerged as they progressed within the environment that they could also question these, challenge the legitimacy of power, and ultimately resist it (Barbalet, 1985).

As the students became more comfortable in their work environment, they became more confident, allowing them to demonstrate such agency. Instances emerged of students challenging the status quo with students seeking out what they considered to be relevant affordances and even rejecting those they considered as not helpful. As such, the research demonstrated how agency and assertiveness are evident on the part of students when 'becoming' a nurse. This was evident when they began to take the initiative, taking control of their own learning (Patall, 2024), resulting in a growth of their confidence as they sought out learning opportunities (Munangatire et al., 2023). They also identified their own skill deficits and demonstrated an increased ability to assert themselves (Bruce et al., 2019). Preceptors enhanced the agency of student nurses by encouraging the students to take responsibility, particularly as they progressed into their final clinical placements. Students regarded this as respect from colleagues and their preceptors. They also perceived that their opinion was valued (Patall, 2024) and their skills were recognized and trusted. A degree of initiative was also evident when students had to determine what their role was in a given situation.

For successful student learning, preceptors needed to approach their teaching as an investment in the future of nursing, that is, taking the time to teach the students appropriately. When this was not the case, students felt disrespected (Portoghese et al., 2014), particularly when they felt that they were not provided with the learning opportunities they felt they deserved. It was evident that the relationship between student and preceptor was often difficult to navigate, never more so than when unequal power relations emerged (Kennedy, 2016). Preceptors needed better training and more time and resources to shift to a more positive practice of mentoring/supervising (and probably better resourcing for nursing in general). Support for preceptors would, in turn, provide positive support for students to reach their potential and develop the skills to initiate change when required. When experienced preceptors were complacent, set in their ways, resistant to change, and were task oriented, this contributed to what students considered to be a negative work environment.

In contrast, a positive learning environment was evident when relevant work-based affordances prevailed (Billett, 2002) that students observed when, for example, they had opportunities to learn practical skills such as completing a catheterization and helping with a drugs round. When such affordances materialized for students, they enhanced their sense of belonging and met their own identified learning deficits (Billett & Choy, 2013). There were, however, instances where students were dissatisfied when they did not access what they regarded to be appropriate learning opportunities, instead completing tasks that were aligned to that of what they considered to be a more junior position such as Healthcare Assistant (HCA). This resulted in students being somewhat derisive about the affordances presented to them, feeling that their skills were not being utilized. This in itself was interesting, as it indicated that the students were starting to align themselves to the profession they considered as perhaps a 'higher status' profession than HCAs. Students, in this case, chose to dis-identify with the practices they had no choice but to engage with (Hodges, 1998). The students' sense of agency was evident when they intentionally engaged, or not (Billett & Choy, 2013). The latter occurred when they considered that their ideas, concerns, or points of view were disregarded and when they felt that they were not learning nursing skills due to a lack of agency within their learning, lack of affordances, and an absence of a sense of responsibility.

Indeed, preceptors recognized how the role of nursing required expertise and that this expertise made it necessary for students to make independent decisions and exert agency. As students progressed in their education, preceptors identified a growth in competence. Students were more actively engaged when they believed their skills would assist in career progression (Tynjälä, 2013) and such opportunities existed in the workplace for learning. For student nurses, the guidance of preceptors and other registered healthcare professionals was essential to accessing opportunities to listen and observe (Billett & Boud, 2001). A characteristic of this positive work environment was one where student learning was encouraged, and an open environment was developed. Students relied strongly on feedback (Portoghese et al., 2014), reflecting positively when the preceptor demonstrated that they cared about the student and respected the student's role as learner. This interaction between the preceptor and student enhanced their sense of belonging to the nursing profession and increased the student's sense of agency within the work environment.

Preceptors could see how students contributed to a healthy learning environment and the growth in their agency. This agency (Cook-Sather et al., 2021) was demonstrated when students brought new ideas and knowledge to the workplace and when they asked the preceptors questions. This environment was, in part, established by the preceptors working with the students, ensuring students shared responsibility and decision making. What is clear is that the students looked to their preceptors for respect during their learning and were influenced by what was deemed to be important to their preceptors (Hashemiparast et al., 2019).

The students' perspective on how preceptors viewed them had an impact on the development of their value as nurses (Salminen et al., 2017) and how students perceived they were respected within the profession. This perception that students had of themselves gave them confidence to teach preceptors that enabled a mutual relationship of skills development, an exchange of current knowledge, development of reflective practice, teaching of ICT skills, and new injection techniques, for example. This mutual learning and peer learning in the student/preceptor relationship was clear to both parties. It was evident, as time passed within the teacher/learner relationship, that the preceptor would seek students' opinions on latest techniques (Keerthirathne, 2020). Thus, the students were effectively teaching preceptors, resulting in a mutually beneficial relationship (Greystone, 2018).

Furthermore, teaching students prompted preceptors to reflect on their ability, competence, and the prospects of upskilling, which encouraged them to nurture best practice. Reciprocal learning, therefore, had the potential to lead to the transformation of nursing practice. The students and preceptors were both changed through the process of teaching and learning, while the sociohistorical structure of work environment was also open to change. There were situations where preceptors were not supported, and a contributing factor to the difficulties that both students and preceptors experienced could have been due to large volumes of tasks in the workplace. It was clear that preceptors were carrying heavy workloads and, as a result, both teaching and student agency development was affected. In short, providing affordances added to an already heavy nursing workload and time pressures (Leiter et al., 2010; McSharry & Lathlean, 2010).

Limitations of the Research

The data collected did yield valuable insight worthy of inclusion but should incorporate a caveat that they were broader in focus than initially intended. There were difficulties in capturing tacit knowledge in diaries and, to an extent, within interviews, as students' recall could not always be clarified. However, with the interview method, there was an opportunity to further probe the participant to further refine their recall. Additionally, there could have been a considerable amount of experience taken for granted, which participants could have excluded. The respondents may believe a detail was unimportant and as a result have omitted it from either the diary or interview.

CONCLUSION

This paper addressed an under-researched topic of agency development within nursing education and emphasizes the substantial role that the preceptors had in supporting and influencing students' agency during their clinical placements. This research contributes to the work of Munangatire (2023), Patall (2024), Saifan et al. (2021) and others in gaining an understanding of agentic engagement within the crucial clinical placement component of student nurse education. As students progressed through their program and placements, a change was evident among student nurses. This was observed particularly in their later years, when they exercised agency, as they transitioned from student nurse to qualified nurse. The role of the preceptor in the development of the students cannot be underestimated given their critical role in encouraging students to be agents of their own learning. Their shared knowledge influences students in taking responsibility, engaging in peer learning, sharing new ideas and questioning practice, and showing initiative. Student agency should be commended by staff in the workplace when they negotiate, persuade, delegate, seek out affordances, and reject those they considered not helpful.

Preceptors empowered the students and provided an open culture and were usually inclusive. The work environment was not always easy to navigate, and it was clear that the students regarded the preceptors as being their first point of contact, where they would manage any difficulties that arose. This added pressure to the preceptors who were already burdened with many tasks and responsibilities and, as a consequence, they often did not have the capacity to lend support to the students. There is a need to build the preceptor role explicitly into the job description of the more senior practitioner who is required to take on this role. This will allow for them to engage in a clear role discussion on capacity and provide the opportunity for them to be formally recognized for this critical role. Additionally, embedded hierarchies hindered the student/preceptor relationship. It is, therefore, important to clearly acknowledge that the preceptors also need support while teaching the next generation of nurses to

enhance motivation and the quality of teaching. Preceptors need additional time to provide this support and their workload, as well as their responsibilities, should be adjusted to meet this.

As many of the findings within this study are not limited to situation-specific circumstances, they can be applied to models of education within other healthcare professions. As contemporary work environments require cross-discipline learning, the ability to work across boundaries and to engage in a variety of settings to actively learn (Fuller et al., 2007) is required within the healthcare environment. The findings provide an overview of the workplace and the formation of the 'bigger picture' such as relationship nuances and developments, which can enable evaluation and interventions (Kropp & Wagner, 2010), and so need to be considered in the development of policy. This research has sought to inform learning that can be shared across disciplines, particularly in other areas of applied healthcare that use the same learning models such as physiotherapy, medicine, and midwifery.

DISCLOSURE OF THE USE OF GENERATIVE-AI

No Artificial Intelligence was used in this publication.

REFERENCES

Ajeigbe, D. O., McNeese-Smith, D., Leach, L. S., & Phillips, L. R. (2013). Nurse-physician teamwork in the emergency department: impact on perceptions of job environment, autonomy, and control over practice. *The Journal of Nursing Administration*, *43*(3), 142-148. https://escholarship.org/uc/item/37s1405k

Barbalet, J. M. (1985). Power and resistance. *British Journal of Sociology*, *36*(4), 531-548. https://doi.org/10.2307/590330

Baumeister, R. F., & Leary, M. R. (2017). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. In R. Zukauskiene (Ed.), *Interpersonal Development*. Routledge. https://doi.org/10.4324/9781351153683-3

Billett, S. (2002). Toward a workplace pedagogy: Guidance, participation, and engagement. *Adult education quarterly*, *53*(1), 27-43. https://doi.org/10.1177/074171302237202

Billett, S., & Choy, S. (2013). Learning through work: Emerging perspectives and new challenges. *Journal of Workplace Learning*, *25*(4), 264-276. https://doi.org/10.1108/13665621311316447

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in psychology*, *3*(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Brown, J., Stevens, J., & Kermode, S. (2012). Supporting student nurse professionalisation: the role of the clinical teacher. *Nurse education today*, *32*(5), 606-610. https://doi.org/10.1016/j.nedt.2011.08.007

Bruce, R., Levett-Jones, T., & Courtney-Pratt, H. (2019). Transfer of learning from university-based simulation experiences to nursing students' future clinical practice: An exploratory study. *Clinical Simulation in Nursing*, 35, 17-24. https://doi.org/10.1016/j.ecns.2019.06.003

Bryman, A. (2016). *Social research methods. 5th edition*. Oxford Press University. Cook-Sather, A., Allard, S., Marcovici, E., & Reynolds, B. (2021). Fostering agentic engagement: Working toward empowerment and equity through pedagogical partnership. *International journal for the scholarship of teaching and learning*, *15*(2), 3. https://doi.org/10.20429/ijsotl.2021.150203

Deasy, C., Doody, O., & Tuohy, D. (2011). An exploratory study of role transition from student to registered nurse (general, mental health and intellectual disability) in Ireland. *Nurse education in practice*, *11*(2), 109-113. https://doi.org/10.1016/j.nepr.2010.11.006

Ferrier-Kerr, J. L. (2009). Establishing professional relationships in practicum settings. *Teaching and Teacher Education*, 25, 790-797. https://doi.org/10.1016/j.tate.2009.01.001

Foucault, M. (1978). *The history of sexuality* (Vol. 1). Random House.

Foucault, M. (1979). *Discipline and punish: The birth of the prison*. Vintage. Random House.

Foucault, M. (1984). The subject and power. In B. Wallis, (Ed.), *Art after postmodernism*, David R. Godine Publishers.

Fuller, A., Unwin, L., Felstead, A., Jewson, N., & Kakavelakis, K. (2007). Creating and using knowledge: an analysis of the differentiated nature of workplace learning environments. *British Educational Research Journal*, *33*(5), 743–759. http://dx.doi.org/10.1080/01411920701582397

Giddens, A. (1991). *Modernity and self-identity: Self and society in the late modern age*. Stanford University Press.

Greystone, R. (2018). How to build a positive, multigenerational workforce. *The Journal of Nursing Administration*, *49*(1) 4-5. https://doi.org/10.1097/NNA.0000000000000698

Harrington, S., Rayner, C., & Warren, S. (2012). Too hot to handle? Trust and human resource practitioners' implementation of anti-bullying policy. *Human Resource Management Journal*, *22*(4), 392-408. https://doi.org/10.1111/1748-8583.12004

Hashemiparast, M., Negarandeh, R., & Theofanidis, D. (2019). Exploring the barriers of utilizing theoretical knowledge in clinical settings: A qualitative study. *International journal of nursing sciences*, *6*(4), 399-405. https://doi.org/10.1016/j.ijnss.2019.09.008

Henderson, A., Creedy, D., Boorman, R., Cooke, M., & Walker, R. (2010). Development and psychometric testing of the clinical learning organisational culture survey (CLOCS). *Nurse Education Today*, *30*(7), 598-602. https://doi.org/10.1016/j.nedt.2009.12.006

Hodges, D. C. (1998). Participation as dis-identification with/in a community of practice. *Mind, Culture and Activity*, *5*(4), 272-290. https://doi.org/10.1207/s15327884mca0504_3

Hunt, L. A., McGee, P., Gutteridge, R., & Hughes, M. (2012). Assessment of student nurses in practice: a comparison of theoretical and practical assessment results in England. *Nurse Education Today*, *32*(4), 351-355. https://doi.org/10.1016/j.nedt.2011.05.010

Hyers, L. L. (2018). *Diary methods*. Oxford University Press.

Jackson, D. (2016). Re-conceptualising graduate employability: The importance of pre-professional identity. *Higher Education Research & Development*, *35*(5), 925-939. https://doi.org/10.1080/07294360.2016.1139551

Johnston, D. H. (2016). 'Sitting alone in the staffroom contemplating my future': Communities of practice, legitimate peripheral participation and student teachers experiences of problematic school placements as guests. *Cambridge Journal of Education*, *46*(4), 533–551. https://doi.org/10.1080/0305764X.2015.1069793

Jones, A. (2007). Still crazy after all those years. *Nurse Education Today, 27*(5), 365-366. https://doi.org/10.1016/j.nedt.2007.04.006

Karp, I. (1986). Agency and Social Theory: A Review of Anthony Giddens [Review of new rules of sociological method: A positive critique of interpretative sociologies; central problems in social theory: action, structure and contradiction in social analysis; a contemporary critique of historical materialism. Vol. 1. Power, property and the state]. *American Ethnologist, 13*(1), 131–137. http://www.jstor.org/stable/644591

Keerthirathne, W. K. D. (2020). Peer learning: An overview. *International Journal of Scientific Engineering and Science*, *4*(11), 1-6.

Kennedy, S. (2016). *An exploration of empowerment amongst final-year undergraduate nursing students while on clinical placement in Ireland using Social Domain Theory* (Doctoral dissertation, University of Salford).

Kropp, C., & Wagner, J. (2010). Knowledge on stage: Scientific policy advice. *Science, Technology, & Human Values*, *35*(6), 812-838. https://doi.org/10.1177/0162243909357912

Kumaran, S., & Carney, M. (2014). Role transition from student nurse to staff nurse: Facilitating the transition period. *Nurse education in practice*, *14*(6), 605-611. https://doi.org/10.1016/j.nepr.2014.06.002

Lave, J., & Wenger, E. (1991). *Situated learning: Legitimate peripheral participation*. Cambridge University Press.

Leiter, M. P., Price, S. L., & Laschinger, H. K. S. (2010). Generational differences in distress, attitudes and incivility among nurses. *Journal of Nursing management*, *18*(8), 970-980. https://doi.org/10.1111/j.1365-2834.2010.01168.x

McKendry, S., McKay, G., Boyd, V., & Andrew, N. (2012). The route in to the academy: The liminal state of the nursing and construction professions? *Teaching in Higher Education*, *17*(2), 181-192. https://doi.org/10.1080/13562517.2011.611867

McPhee, R. D. (2004). Text, agency, and organization in the light of structuration theory. *Organization, 11*(3), 355-371. https://doi.org/10.1177/1350508404041997

McSharry, E., & Lathlean, J. (2017). Clinical teaching and learning within a preceptorship model in an acute care hospital in Ireland; a qualitative study. *Nurse Education Today*, *51*, 73-80. https://doi.org/10.1016/j.nedt.2017.01.007

Mentis, M., Holley-Boen, W., Butler, P., Kearney, A., Budd, J., Riley, T., & Bevan-Brown, J. (2016). Māwhai: Webbing a professional identity through networked interprofessional communities of practice. *Teaching and teacher education*, *60*, 66-75. https://doi.org/10.1016/j.tate.2016.08.008

Miles, R. (2015). Complexity, representation and practice: Case study as method and methodology. *Issues in Educational Research*, *25*(3), 309-318.

Munangatire, T., Tomas, N., & Asino, H. M. (2023). Nursing students' experiences and expectations of clinical learning: A qualitative study. *Nurse Education Today*, *124*, 105758. https://doi.org/10.1016/j.nedt.2023.105758

Nurses and Midwifery Board of Ireland (NMBI). (2016*). Guidelines on the key points that may be considered when developing a quality clinical learning environment*. https://www.nmbi.ie/Publications/Standards-and-Guidance

Patall, E. A. (2024). Agentic engagement: Transcending passive motivation. *Motivation Science*,*10*(3), 222. https://doi.org/10.1037/mot0000332

Portoghese, I., Galletta, M., Sardu, C., Mereu, A., Contu, P., & Campagna, M. (2014). Community of practice in healthcare: An investigation on nursing students' perceived respect. *Nurse Education in Practice*, *14*(4), 417-421. https://doi.org/10.1016/j.nepr.2014.01.002

Sahay, A., & Willis, E. (2022). Graduate nurse views on patient safety: Navigating challenging workplace interactions with senior clinical nurses. *Journal of Clinical Nursing*, *31*(1-2), 240-249. https://doi.org/10.1111/jocn.15902

Saifan, A., Devadas, B., Daradkeh, F., Abdel-Fattah, H., Aljabery, M., & Michael, L. M. (2021). Solutions to bridge the theory-practice gap in nursing education in the UAE: A qualitative study. *BMC medical education*, *21*, 1-11. https://doi.org/10.1186/s12909-021-02919-x

Salminen, L., Rinne, J., Stolt, M., & Leino-Kilpi, H. (2017). Fairness and respect in nurse educators' work–nursing students' perceptions. *Nurse education in practice*, *23*, 61-66. https://doi.org/10.1016/j.nepr.2017.02.008

Silverman, D. (2022). *Doing qualitative research*. SAGE.

Soler, O. M., Aguayo-González, M., Gutiérrez, S. S. R., Pera, M. J., & Leyva-Moral, J. M. (2021). Nursing students' expectations of their first clinical placement: A qualitative study. *Nurse Education Today*, *98*, 104736. https://doi.org/10.1016/j.nedt.2020.104736

Spouse, J. (1998). Learning to nurse through legitimate peripheral participation. *Nurse education today*, *18*(5), 345-351. https://doi.org/10.1016/0021-8634(92)80002-A

Stalmeijer, R. E., Dolmans, D. H., Wolfhagen, I. H., & Scherpbier, A. J. (2009). Cognitive apprenticeship in clinical practice: Can it stimulate learning in the opinion of students? *Advances in health sciences education 14*(4), 535-546. https://doi.org/10.1007/s10459-008-9136-0

Tynjälä, P. (2013). Toward a 3-P model of workplace learning: a literature review. *Vocations and learning*, *6*(1), 11-36.

Winchester-Seeto, T., Rowe, A., & Mackaway, J. (2016). Sharing the load: Understanding the roles of academics and host supervisors in work-integrated learning. *Asia-Pacific Journal of Cooperative Education*, *17*(2), 101-118. https://doi.org/10.1007/s12186-012-9091-z

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About the Journal

The International Journal of Work-Integrated Learning (IJWIL) publishes double-blind peer-reviewed original research and topical issues related to Work-Integrated Learning (WIL). IJWIL first published in 2000 under the name of Asia-Pacific Journal of Cooperative Education (APJCE).

In this Journal, WIL is defined as:

> *An educational approach involving three parties – the student, educational institution, and an external stakeholder – consisting of authentic work-focused experiences as an intentional component of the curriculum. Students learn through active engagement in purposeful work tasks, which enable the integration of theory with meaningful practice that is relevant to the students' discipline of study and/or professional development* (Zegwaard et al., 2023, p. 38*).

Examples of practice include off-campus workplace immersion activities such as work placements, internships, practicum, service learning, and cooperative education (co-op), and on-campus activities such as work-related projects/competitions, entrepreneurships, student-led enterprise, student consultancies, etc. WIL is related to, and overlaps with, the fields of experiential learning, work-based learning, and vocational education and training.

The Journal's aim is to enable specialists working in WIL to disseminate research findings and share knowledge to the benefit of institutions, students, WIL practitioners, curricular designers, and researchers. The Journal encourages quality research and explorative critical discussion that leads to the advancement of quality practices, development of further understanding of WIL, and promote further research.

The Journal is financially supported by the WILNZ, WACE, WIL Australia, and the University of Waikato.

Types of Manuscripts Sought by the Journal

Types of manuscripts sought by IJWIL are primarily in two forms: 1) *research publications* describing research into aspects of WIL and, 2) *topical discussion* articles that review relevant literature and provide critical explorative discussion around a topical issue. The journal will, on occasions, consider good practice submissions.

Research publications should contain; an introduction that describes relevant literature and sets the context of the inquiry. A detailed description and justification for the methodology employed. A description of the research findings - tabulated as appropriate, a discussion of the importance of the findings including their significance to current established literature, implications for practitioners and researchers, whilst remaining mindful of the limitations of the data, and a conclusion including recommendations.

Topical discussion articles should contain a clear statement of the topic or issue under discussion, reference to relevant literature, critical and scholarly discussion on the importance of the issues, critical insights into how to advance the issue further, and implications for other researchers and practitioners.

Good practice and program description papers. On occasions, IJWIL seeks manuscripts describing an example of good practice, however, only if it presents a particularly unique or innovative practice or it was situated in an unusual context. There must be a clear contribution of new knowledge to the established literature. Manuscripts describing what is essentially 'typical', 'common' or 'known' practices will be encouraged to rewrite the focus of the manuscript to a significant educational issue or will be encouraged to publish their work via another avenue that seeks such content.

By negotiation with the Editor-in-Chief, the Journal also accepts a small number of *Book Reviews* of relevant and recently published books.

Reference
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