

Original Article

Nursing Students' Views of the Nursing Process and its Challenges, and their Solutions: A Qualitative Study

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Abstract

Background: The nursing process is a systematic approach to identifying the care needs of healthy individuals or patients, and families and groups and to planning, implementing, and evaluating nursing interventions. Nursing students are also an integral part of it. Research, however, shows that they experience challenges at different stages of the nursing process

Objective: This study was conducted to investigate the opinions of nursing undergraduate students regarding the nursing process, challenges experienced in the nursing process and solution suggestions.

Methodology: The sample of this qualitative study consisted of 31 participants. Data were collected using a descriptive characteristics form and a semi-structured interview form between 20 and 24 January 2020. Qualitative data were analyzed using descriptive and content analysis. The study was approved by the Ethics Committee.

Results: The students stated that they have difficulties in many steps of the nursing process, they could not get sufficient feedback from the instructors and the instructors gave different messages. The duration of clinical practice is short, and therefore, students are assigned different patients each time they go to the clinic and cannot find the opportunity to put their care plans into practice.

Conclusions: Nursing students face different problems about nursing process. Therefore, the problems need to be solved.

Key Words: Nursing process, nursing students, nursing education.

Introduction

Nurses are concerned with individual, family, group, and social responses to health and illness. Such responses are one of the focal points of nursing care (Herdman & Kamitsuru 2014). The contemporary nursing approach holds that nurses should take on up-to-date roles and adopt a systematic approach to providing the best care (Urden et al., 2015) because effective and quality care integrated with up-to-date and evidence-based information is a fundamental nursing service (Olga, 2007; ANA, 2015). The nursing process is one of the most crucial aspects of

adopting a scientific and planned approach to nursing care (Pokorski et al., 2009; Horvath et al., 2015; Ackley et al., 2017).

The nursing process is a systematic approach to identifying the care needs of healthy individuals or patients, and families and groups and to planning, implementing, and evaluating nursing interventions (DeLaune et al., 2011; Ackley et al., 2017). It enables nurses to participate in all health-related practices as much as possible and to develop and use critical thinking, problem-solving, and analysis-synthesis skills (DeLaune et al., 2011; Black, 2017; Wilkinson et al., 2016).

The nursing process is based on a special and natural relationship in which nurses provide care and patients receive it (DeLaune et al., 2011; Black, 2017). The greatest advantage of the nursing process is that it promotes individualized and high-quality nursing care (Horvath et al., 2015; Fernandez-sola et al., 2011). The nursing process plays a key role in the nursing profession, and therefore, should be implemented properly. Nursing students are also an integral part of it. Therefore, it is of critical importance that they learn the nursing process and adapt it to their practices, and perform correct diagnosis and appropriate interventions for treatment. Research, however, shows that they experience challenges at different stages of the nursing process (Wagoro & Rakuom, 2015; Haoet al., 2013; Andsoy et al., 2013). Therefore, the challenges they face during nursing interventions as well as aspects they need to improve should be identified to design and present action plans for performance improvement. Identifying and solving those challenges can allow students to implement the nursing process more effectively, and therefore, to provide better quality care. The study sought answers to the following questions:

- What do nursing students think about the nursing process?
- What kind of challenges of the nursing process do nursing students face?
- What kind of solutions do nursing students propose for the challenges of the nursing process?

Methodology

Design and Setting

The aim of this qualitative study was to investigate undergraduate nursing students' views of the nursing process, and its challenges and their solutions. The study was conducted at the Faculty of Health Sciences of a university. Nursing students learn about the nursing process and then participate in clinical practice for the first time in the first semester of the second year. They use the nursing process to provide care and discuss cases in the following clinical practices.

Population and Sample

The study population consisted of 795 second-, third-, and fourth-year nursing students. Participants were recruited using snowball sampling. First, one student from each grade level was contacted, and then, potential participants recommended by them were

informed about the purpose of the study, and informed consent was obtained from those who agreed to participate. Initially, 12 students from each grade volunteered to participate, however, five of them were excluded because they were either unable to attend the interviews or withdrew from the study. Therefore, the final sample consisted of 31 participants (12 second-year; 11 third-year, and 8 fourth-year).

The inclusion criteria were (1) being a second-, third-, and fourth-year nursing student and (2) voluntary and (3) having taken the nursing process and case discussion course and (4) having participated in clinical practice. The exclusion criteria were (1) being a first-year nursing student, (2) not having taken the nursing process and case discussion course and (4) not having participated in clinical practice.

Instruments

Data were collected using a descriptive characteristics form and a semi-structured interview form. The descriptive characteristics form consisted of four items on socio-demographic characteristics and interpersonal relationships. The semi-structured interview form developed by the researchers consisted of four open-ended questions on students' views of the nursing process, challenges of the nursing process they faced during clinical practice, causes of those challenges, and their solutions. The items are as Table 1.

Data Collection

Data were collected between 20 and 24 January 2020. Three different focus group interviews were conducted by one moderator and two reporters. Each interview was held in a classroom with ten to eleven participants from all grades. The moderator had a PhD degree in nursing and qualitative studies. The participants, the moderator, and the reporters sat in a circle during the interviews. The moderator first informed the participants again about the study and obtained written consent from them. Prior to the interviews, participants were asked to complete the descriptive characteristics form. Afterwards, the moderator asked them the questions on the semi-structured interview form, and the reporters noted their responses. The interviews were audio-recorded to avoid missing data. Data collection was terminated by the moderator when more data did not add any new information or insight. The interviews lasted 70 to 90 minutes.

Table 1. The items of the semi-structured interview form

Items
<ul style="list-style-type: none"> • What do you think is the nursing process? What do you think about the nursing process? • Do you think the nursing process contributes to patient care and to personal development? If so, what are they? • What kind of challenges of the nursing process do you face? At what stages of the nursing process do you face challenges? • What solutions would you propose for those challenges? What aspects do you think should be improved?

Table 2. The descriptive characteristics of students

Characteristics	Second-year	Third-year	Fourth-year	<i>p</i>
	n(%)	n(%)	n(%)	
Age (Mead±SD)	19.3(0.65)	21.0(1.00)	21.6(1.30)	0.000
Gender				
Female	10(83.3)	11(100.0)	5(62.5)	0.090
Male	2(16.7)	0(0.0)	3(37.5)	
Education status				
Anatolian High School	12(100.0)	9(81.8)	7(87.5)	0.158
Imam Hatip High School	0(0.0)	2(18.2)	1(12.5)	
Working status				
Yes	2(16.7)	2(18.2)	0(0.0)	0.447
No	10(83.3)	9(81.8)	8(100.0)	

Data Analysis: Qualitative data were analyzed using descriptive and content analysis. The researchers listened to all interviews over and over again and transcribed them verbatim. They assigned numbers to participants to ensure confidentiality and to protect their anonymity. Afterwards, they developed subthemes and main themes based on descriptive and content analysis. Number, percentage, mean, and standard deviation were used for descriptive analysis.

Ethical Considerations: Permission was obtained from the faculty of health sciences of the university. The study was approved by the Social Humanities Ethics Committee of the university (Approval date/no: 2019/123). Students were informed about the purpose, procedure, and confidentiality of the study prior to participation. Written informed consent was obtained from those who agreed to participate.

Results

The data were analyzed under four themes. Table 3 shows the themes and sub-themes by grade.

Theme 1: Participants' Views of the Nursing process

Most participants regarded the nursing process as a guide for integrated, high-quality, and sustainable care.

"...The nursing process is the constellation of all the activities that we carry out to improve the quality of care." (Third-year student no 4)

Most second-year students stated that the nursing process helps them improve themselves and prepare for professional life, makes them more motivated to do multiple research and to read, and provides them with sound evidence and support, and also enables patients to make fewer medical errors thanks to recorded patient data.

"The nursing process is useful for both patients and nurses because it gives you data, I mean, you have something to turn to when, let's say, you deal with a forensic case." (Second-year student no 9)

Third-year students stated that activities involved in the nursing process go beyond the hospital and prepare patients for home life and make their post-discharge life easier and improve care quality.

“...I think that the nursing process makes post-discharge life more efficient and provide care accordingly.” (Third-year student no 2)

Fourth-year students stated that the nursing process provides multidisciplinary care, and when each step of it is performed correctly, it makes blind spots visible.

“...the nursing process provides multi-directional and multidisciplinary care, and allows us to see our own blind spots, and it gives us feedback and shows us what we have to do about those blind spots.” (Fourth-year student no 1)

Theme 2. Contribution of Nursing Process to Patient Care and to Personal Development

Most participants stated that the nursing process provides them with the opportunity to develop interpersonal communication and inquiry skills, thus making them more knowledgeable about their occupation.

“I now know better how to talk to patients, how to communicate with them. Patients are fragile individuals, and I now know how to talk to them.” (Second-year student no 10)

According to second-year students, the nursing process is especially useful for patients because it empowers them through care and training, but it also allows nurses to understand that every patient is an individual. They also stated that the nursing process brings professionalism to nursing and improves patients' trust in nurses.

“Patients don't really know about most things, I mean, let's say, the patient has diabetes but he doesn't know how to inject insulin. When we see that, we give him the right training and teach him how to do it, and so we change his life for the better” (Second-year student no 12).

Third-year students stated that the nursing process raises patients' awareness and provides them not only with physical care but also with psychological support. They also stated that making a difference in patients' lives makes them happier, and more satisfied, and self-confident.

“...The nursing process helps us show our patients that we are there for them and that we understand them better and care about them.” (Third-year student no 7)

Table 3. Themes, Subthemes, and Quotations

Themes	Subthemes			Quotations
	Second-year	Third-year	Fourth-year	
Participants' Views of the Nursing process	<ul style="list-style-type: none"> • An integrated care tool • Activities for high-quality and continuous care • A planned care process • A process that provides accessible data • A scientific evidence and reference tool • A tool for getting used to job environment • A tool to encourage research • A tool to encourage students to improve themselves • An individual care tool • A key role in bringing professionalism to nursing 	<ul style="list-style-type: none"> • An integrated care tool • Activities for high-quality and sustainable care • A tool that prepares patients for post-discharge life and making it easier • A process that helps to understand patients 	<ul style="list-style-type: none"> • An integrated care tool • Activities for high-quality and continuous care • A multidisciplinary care process • A process that allows students to see their shortcomings • A process that allows the individual to identify their problems • An attempt to be more useful to patients 	<ul style="list-style-type: none"> • <i>“Using the nursing process during care sets a holistic route for me.” (Fourth-year student no 3)</i> • <i>“...I find the nursing process useful because it helps us get familiar with and adapt to work environment where we are going to be working in the future.” (Second-year student no 2)</i> • <i>“...The nursing process is a holistic approach that allows for training and care from admission to discharge, and even after discharge” (Third-year student no 7)</i>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Contribution of Nursing Process to Patient Care and to Personal Development</p>	<ul style="list-style-type: none"> • Helping to develop interpersonal communication skills • Helping to develop research skills and gain knowledge • Providing care and training to empower patients • Recognizing individual autonomy • Making nursing professional • Increasing patients' trust in nurses 	<ul style="list-style-type: none"> • Helping to develop interpersonal communication skills • Helping to develop inquiry skills and gain knowledge • Raising patients' awareness • Providing patients with both physical care and psychological support • Making a difference in patients' lives • Increasing job satisfaction and self-confidence in nurses 	<ul style="list-style-type: none"> • Helping to develop interpersonal communication skills • Helping to develop inquiry skills and gain knowledge • Making connections between complex data • Helping students develop a holistic perspective • Understanding the roles of nursing • Enabling students to see their own shortcomings • Increasing job satisfaction • Reducing length of hospital stay and preventing complications • Increasing workload 	<ul style="list-style-type: none"> • <i>“....Before we inform an oncology patient about nutrition or chemotherapy or radiotherapy, we do some research ourselves to learn about it and to improve ourselves...As for us, it boosts our confidence.” (Third-year student no 5)</i> • <i>“.....I think that if we can effectively put the nursing process into practice, patients will stop looking at nurses as employees who do nothing else but insert IVs and give shots. After all, people see nurses as doctors' 'wingmen.' They think that nurses wouldn't know anything about medications or treatments, but when you come up with a care plan and involve the patient in it, then he sees you in a different light. So, people's perceptions are changing, I mean, we see that it's something that can be changed.” (Second-year student no 7)</i> • <i>“...Making a difference in someone's life and telling him what to do, I mean, guiding him makes us very happy, apart from that, telling him what he's been doing right or wrong and getting his life in order makes use happy.” (Third-year student no 5)</i> • <i>“The nursing process has allowed us to better understand the roles that a nurse should be able to play, I mean, like the difference between my first and latest clinical practice, like, what should a nurse do?, What role do I get? What roles should I play?” (Fourth-year student no 3)</i>
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<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Challenges of Nursing Process</p>	<ul style="list-style-type: none"> • Failure to put nursing diagnosis in order of priority • Having difficulty communicating with patients • Hesitating to ask questions about sex life • Patients who do not want to reveal information about themselves • Using fabricated data for fear of being graded • Little feedback from instructor due to excessive number of students participating in clinical practice • Making the same mistakes • Patient circulation and failure to implement care plan due to short duration of clinical practice sessions 	<ul style="list-style-type: none"> • Hesitating to ask questions about sex life • Difficulty making the right diagnosis • Using fabricated data for fear of being graded • Different expectations of instructors • Being afraid of instructors • Fear of oral exams 	<ul style="list-style-type: none"> • Different expectations of instructors • Inability of intern students to put their care plans into practice due to heavy workload at hospitals • Time-consuming data-recording for care planning 	<ul style="list-style-type: none"> • <i>“...It's fine for me to ask those questions, but it's just that it's a taboo in our culture, so patients' don't want to answer them.” (Second-year student no 12)</i> • <i>“...I skipped some questions during my first internship because patients wouldn't just give me any answer. So I thought, what if I submitted it anyway, would the instructor take points off? I checked my classmates' care plans, and I saw that they were all complete, but my patient didn't have any problems for me to write down, I thought what if I told the instructor the truth, that the patient refused to answer those questions, would he think that I cut corners?” (Second-year student no 12)</i> • <i>“...I sometimes get confused whether I should evaluate the goal or the intervention.” (Third-year student no 5)</i> • <i>“In my first clinical practice, I remember taking a data collection sheet and going up to a patient. The patient was like "Is she coming to do a survey on me?" Later on, he told me that that's exactly what he thought I was going for. But in my second clinical practice, I first got myself used to the questions and then I went up to the patient and asked them, like I squeezed them into the conversation because it was like we were having a conversation. I realized it was better that way.” (Second-year student no 10)</i> • <i>“Some instructors want to see descriptive factors, but others do not, and others want to see the date written on the evaluation section....” (Fourth-year student no 1)</i>
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<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Participants' Solutions to Challenges</p>	<ul style="list-style-type: none"> • Instructors giving written feedback • The whole group preparing for case discussions • Using rewards in case discussions • Clinical practice sessions for one week in a row instead of two days of the week • Making sure that instructors and clinical nurses are in harmony in terms of interventions and expectations 	<ul style="list-style-type: none"> • Instructors giving written feedback • Instructors holding a meeting and setting common expectations • Case discussions focusing more on interventions • Using a structured form on which to record data for time efficiency during care planning 	<ul style="list-style-type: none"> • Instructors giving written feedback • Instructors holding a meeting and setting common expectations • Case discussions focusing more on interventions • Using a structured form on which to record data for time efficiency during care planning • Implementing a web-based nursing process • Interns peer-mentoring second- and third-year students during case discussions 	<ul style="list-style-type: none"> • <i>“I would want the instructors to give me a copy of my care plan with their revisions and comments on it, or they could just gather us in a classroom and hand out our care plans and let us check them for ten minutes or something.” (Fourth-year student no 3)</i> • <i>“...Case discussions take place in groups of ten students, so I'm thinking maybe they all should come together and prepare for the case discussions, I don't know. I mean, here is what's going on, some students get to prepare a case discussion while others do not, so those who get to prepare end up learning better.” (Second-year student no 1)</i> • <i>“Let's say, I write down a risk as the first diagnosis, the instructor of the course A says that risks should always be at the end, but the instructor of the course B wants to see them at the top, which is so confusing; or a instructor wants to see an intervention written in a certain way while another wants to see it written completely the other way round.” (Fourth-year student no 1)</i>
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Fourth-year students stated that the nursing process helps them recognize connections between complex data, develop an integrated perspective, see their own blind spots, and better understand nursing roles. They also stated that it increases their job satisfaction and reduces complications and length of hospital stay in patients.

“I can make connections between data, and so I don’t miss anything. I get to see something complex as a whole thanks to the nursing process.” (Fourth-year student no 4)

Only one student stated that the nursing process results in increased workload.

“Yes, I’m sure it has some perks but nursing students already have so many things on their plate, so I think the nursing process increases their workload.” (Fourth-year student no 3)

Theme 3. Challenges of Nursing Process

Second-year students, who are engaged in clinical practice only twice and provide care for the first time, stated that they face challenges especially in the data collection stage. They stated that they have difficulty communicating with patients and refrain from talking to them. Some female students stated that they refrain from communicating especially with male patients. The most challenging part is talking to patients about sexual matters as they do not want to answer sex-related questions.

“I have a hard time collecting data. I hold off from talking to patients. There are some questions about sex that I’m supposed to ask to male patients but I just can’t, because I feel really embarrassed and I don’t know how to overcome that.” (Second-year student no 9)

Two students stated that they are unable to collect enough data from their patients, and therefore, they think that the care plan is inadequate. They also stated that they had fabricated data that had nothing to do with their patients as they were afraid to get low grades.

“...for example, a patient only had two symptoms, but two was too little, I mean, it was too little to come up with a care plan. I felt like I needed some more symptoms and so I added very simple

symptoms, like disturbed sleep, even though the patient did not have them.” (Third-year student no 7)

Students also stated that they face challenges in the stage of accurate diagnosis, identification of diagnostic and etiological factors, determination of goals and objectives, interventions, and evaluation. They stated that they have difficulty establishing the priority of nursing diagnoses and determining where in the order of priority a potential diagnosis should be.

“...I feel confused about diagnosis, I mean, for example, I’m never sure whether infection risks should go to the bottom or to the top of the list.” (Second-year student no 2)

Participants stated that they can discuss only a handful of cases with their instructors to plan care due to the excessive number of students during clinical practice. They think that group discussions prepared by groups of 3 to 4 students and carried out by the whole group is inadequate and that those who prepare and present cases understand the process better because instructors guide them and give them feedback. However, some participants stated that they have no idea what is right or wrong about their care plans and keep making the same mistakes over and over again because instructors do not give them any feedback on their care plans and do not tell them what they should do to make progress in care planning.

“A case is prepared by three or four students, and they always have better care plans prepared than the rest of us because they get direct feedback from the instructor while we pretty much participate as a spectator of the whole thing.” (Second-year student no 1)

The participants engaged in clinical practice two days a week stated that they feel demotivated because they are assigned new patients the next week, making them leave the care plans that they had prepared the week before half finished.

“.... I get up the courage to ask questions to a patient to collect data as much as I can, and I do it to a certain degree, but I get back to the clinic the next day only to see that my patient is already discharged.” (Second-year student no 11)

Second-year students stated that understand the process better as they have more experience in clinical practice and that they were very confused in their first clinical practice but did better in the second one.

“In the first clinical practice, I did not know what to ask and what to do, but in the second one, I knew a little more and felt more comfortable.” (Second-year student no 8)

Almost all third- and fourth-year students stated that they are confused about care planning because they are engaged in clinical practice with different academics from different departments, each of whom expects something different from them.

“...care planning changes from instructor to instructor, although there should actually be one care plan.” (Third-year student no 10)

Fourth-year students do clinical internship in groups of maximum two. They have a heavy workload and difficulty talking to patients to plan care during clinical practice. They use the functional health patterns model to plan care but find writing time-consuming, and therefore, demand that they be allowed to use a structured form and keep record by just marking on it.

“We don’t really have much time to provide proper care. We generally do that alone or with a colleague, which is very exhausting and way more than we can handle.” (Fourth-year student no 1)

Some students are afraid of clinical practice instructors and oral exams, and this bothers them.

“The first thing I think of when I go to the hospital is not my patients but it is whether I should make a care plan and submit it to the instructor, because I’m thinking he might want to grade me.” (Third-year student no 3)

Theme 4. Participants’ Solutions to Challenges

Participants stated that they should be allowed to check the care plans to see the instructors’ notes and feedback as they think that it is essential to avoid making the same errors in care planning.

“We had the same problems in the second clinical practice because we did not receive any feedback about the first one...I have no idea what I did right or

wrong, I’m tired of making the same mistakes.” (Second-year student no 7)

Second-year students recommended that they be allowed to perform clinical practice not just two days a week but every day for the whole week so as not to get stuck in the data collection stage and to be able to provide full care. They thought that case discussions help them better understand all the steps of the nursing process, and therefore, recommended that students be encouraged by rewarding them to achieve a more effective nursing process. While one student stated that it would be useful to get the whole group to participate in case preparation, the others thought that it would make things more difficult.

“We do clinical practice twice a week, and we have little time. We go there twice a week and then wait for five days to go back again only to see that our patients are already discharged. This is a big problem. I think we should go for six days back to back, even three days each for two weeks makes more sense.” (Second-year student no 7)

Fourth-year students, who stated that case discussions promote learning and communication, would like to participate as peer mentors in the case discussions of second- and third-year students, which they believe will be a win-win situation for all involved.

Peer education in laboratories is a very useful method that helps us remember the things we forget. Similar to that, it would be better if we explained cases to second- and third-year students. I think that that would be a win-win situation for them and also for us.” (Fourth-year student no 1)

Second-year students stated that instructor have similar expectations for the nursing process, whereas third- and fourth-year students, who are engaged in clinical practice in different departments, stated that each instructor gives different messages about and has different expectations for the nursing process, which makes them more confused and less motivated. Therefore, they would like the instructors to hold a meeting and reach a consensus and develop a common language. Third- and fourth-year students demand that case discussions place more emphasis on interventions and be held on a larger scale.

“I think that instructors should have a meeting and decide what kind of care plan they expect us to prepare or they should give us an example so that we get a better picture of what they have in mind.” (Third-year student no 3)

Third- and fourth-year students stated that it takes too much time to write a care plan, and therefore, would like to use a structured care plan on which to record data. Fourth year students stated that a web-based and technology-friendly format would make the process much easier.

“The nursing process should be technologically updated so that we wouldn’t waste time writing and instead spend more time on care.” (Fourth-year student no 8)

Discussion

The nursing process enables nurses to systematize care, to adopt an integrated approach to patients, and to take individuality into account when providing care (Andsoy, et al., 2013; DeLaune et al., 2011; Horvath et al., 2015). It also helps them develop critical thinking skills (Andsoy, et al., 2013; Ackley et al., 2017) and act as leaders, advocates, assistants, researchers, decision-makers, and educators to plan, implement, and evaluate care (Erer et al., 2017). Our participants regard the nursing process as a guide used to provide integrated care and to improve the quality and sustainability of care. The nursing process helps fourth-year students recognize connections between complex data, develop an integrated perspective, and see their own mistakes and also increases their job satisfaction. Zaybak et al. (2016) reported that nursing students (52.1%) believed that the nursing process improved their creativity and helped them establish causal relationships (41.6%).

The nursing process is useful for both patients and nurses, and therefore, should be implemented properly and in the best possible way. However, research shows that nurses and nursing students experience challenges at different stages of the nursing process (Ojowole & Samole 2017; Zaybak et al., 2016; Pokorski et al., 2009). Second-year students, who have recently started using the nursing process, face challenges especially in the data collection stage and have difficulty communicating with patients for they have little experience. Effective communication

is of significance at the data collection stage. Ineffective communication has negative consequences for both nurses and patients (Karadag et al., 2016; Jamshidi et al., 2016). Study evidences show that poor communication prevents nursing students from planning proper care (Akansel & Pallos 2020; Karabulut & Cetinkaya 2011). Since second-year students have little experience, it is not surprising that they have difficulty communicating with patients. However, fourth-year students are supposed to have developed communication skills and solved related problems. More courses on communication and more experience in clinical practice can help students develop communication skills.

The greatest challenge of the data collection stage is posing questions about sexual habits and reproductive patterns (Noh & Lee, 2015; Aydın & Akansel, 2013; Türk et al., 2013; Kong et al., 2009; Palese et al., 2009; Magnan & Norris, 2008). The most challenging part of the data collection stage for our participants is also talking to patients about sexual matters. Although students are provided with a semi-structured form for data collection, they can learn how to initiate conversation, when to ask which question, and how to earn patient trust only by experiencing real clinical practice. Taskin Yilmaz et al. (2015) also reported that students (36.4%) had difficulty asking the right questions to patients during the data collection stage. Most of our participants already think that the nursing process in real clinical settings helps them develop interpersonal communication and inquiry skills, and thus, learn more.

Participants face challenges in the stage of accurate diagnosis, identifying diagnostic and etiological factors, setting goals, and performing and evaluating interventions and have difficulty establishing the priority of nursing diagnoses and determining where in the order of priority a potential diagnosis should be. Research shows that students have problems in the stages of data collection, diagnosis, descriptive features, etiological factors, and determination, planning, and evaluation of outcome criteria (Zaybak et al., 2016; Wagoro & Rakuom 2015; Aydın & Akansel, 2013; Ito & Ejiri, 2013; Andsoy et al., 2013; Hao et al., 2013; Pokorski et al., 2009).

One of the significant criteria for students to adopt the nursing process is if they gain more and multiple experience in clinical practice. However,

as stated by participants as well, experience alone is not enough for students to learn better. Case discussions significantly help them fill the gaps in their knowledge and recognize and correct their mistakes. Although second-year students think that students who prepare and present cases learn the process better than those who do not, third- and fourth-year students did not make such comment, and therefore, we can state that case discussions, lectures, and clinical practice help students fill the gaps in their knowledge. Our participants recommend using peer mentoring in case discussions. In this process, peer educators (intern students) can exert effort to mentor the group, and thus, fill the gaps in their knowledge, while peer learners (students) learn from both instructors and their peers who have experienced the same process before. In this regard, peer mentoring may work out.

Third- and fourth-year students, who are engaged in clinical practice from different departments, complain that faculty members have different levels of knowledge and different expectations. In our institution, each department has its own clinical practice evaluation form, but not every department has a nursing care plan form. As a solution to this, participants suggest that faculty members hold a meeting and set common expectations. It is of paramount importance to make necessary arrangements for students who are confused about this issue. The teaching staff in each department can hold a meeting and offer training on the nursing process and talk about what they know and what they expect, and develop a nursing care plan form. However, Sendir et al. (2009) reported that for most students (74.3%), the nursing process practices change from course to course due to nursing process forms (60.6%) and stages (40.4%). In other words, having more than one form confuses students.

The nursing process makes nurses more productive and efficient (Yildirim & Koç, 2013). However, one participant thinks that the nursing process leads to an increased workload while a few consider having to write down all the steps of the nursing process to be a waste of time. In our institution, students are asked to complete data collection forms and plan care according to activities of daily living or functional health patterns. Therefore, participants recommend the use of a structured form on which to record data. Given the rapid advances and widespread adoption of new technologies, the care plan

process should be simpler to reach students, who belong to Generation Z. A structured form or a web-based application recommended by a participant can be useful.

Second and third-year students perform clinical practice in groups of 10 to 15 because departments have a high number of students. Moreover, departments have a low number of teaching staff, who therefore cannot spend as much time with their students as needed. Second-year students cannot receive enough feedback from instructors because clinical practice sessions involve too many students. Besides, students have to provide care to different patients in each clinic practice session because they go to the clinic only two days a week, and therefore, they cannot put their care plans into practice. Consequently, it takes students too much time to collect data and plan care. Although participants recommend that clinical practice be every day for a week, training on time management can also be an effective solution.

Conclusion and Suggestions

Nursing students face different problems at different stages of the nursing process. Instructors fail to provide enough feedback and have different expectations. The duration of clinical practice is short, and therefore, students are assigned different patients each time they go to the clinic and cannot find the opportunity to put their care plans into practice. It takes them too much time to record patient data because they have to write them down. The following are the suggestions made by participants:

- Instructors should hold a meeting and set common expectations.
- Instructors should provide students with written feedback on their care plans.
- Clinical practice should be carried out on consecutive days.
- Students should be allowed to use a structured form on which to record patient data in order to plan care.
- A web-based nursing process should be used.
- Peer mentoring should be used in case discussions.

In line with these suggestions, necessary improvements should be made to help students overcome the challenges of the nursing process.

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