Aalborg Universitet

AALBORG UNIVERSITY
DENMARK

Clinical supervisors' perceptions and use of the fundamentals of care framework in supervision of nursing students

Voldbjerg, Siri Lygum; Nielsen, Gitte Nordendorff; Klit, Mona Oestergaard; Larsen, Karen Lyng; Laugesen, Britt

[Link to publication from Aalborg University](#)

ORIGINAL RESEARCH: EMPIRICAL
RESEARCH - QUALITATIVE

JAN
Leading Global Nursing Research
WILEY

Clinical supervisors' perceptions and use of the fundamentals of care framework in supervision of nursing students

Siri Lygum Voldbjerg[1,2,3] | Gitte Nordendorff Nielsen[3] | Mona Oestergaard Klit[4] |
Karen Lyng Larsen[5] | Britt Laugesen[1,6]

[1]Clinical Nursing Research Unit, Aalborg University Hospital, Aalborg, Denmark

[2]Department of Clinical Medicine, Aalborg University, Aalborg, Denmark

[3]Department of Nursing Education, University College North Denmark, Aalborg, Denmark

[4]Aalborg University Hospital, Denmark

[5]Department of Quality and Patient Safety, North Denmark Regional Hospital, Aalborg, Denmark

[6]Center for Clinical Guidelines, Department of Clinical Medicine, Aalborg University, Aalborg, Denmark

Correspondence
Siri Lygum Voldbjerg, Clinical Nursing Research Unit, Aalborg University Hospital, Søndre Skovvej 15, 9000 Aalborg, Denmark.
Email: s.voldbjerg@rn.dk

Abstract

Aim: To explore clinical supervisors' perceptions and use of the Fundamentals of Care framework in supervising nursing students in clinical placement in hospital settings.

Design: A qualitative study using focus group interviews. Reported in accordance with Consolidated Criteria for Reporting Qualitative Research.

Methods: Twelve clinical nurse supervisors working in medical, surgical or psychiatric wards in hospitals in Denmark participated in four focus groups conducted from September to November 2020. Data were analysed using thematic analysis.

Results: Clinical supervisor's perceptions and use of the framework are described in three themes: structuring students' clinical learning, supporting tool for learning what nursing care is and developing own supervision practice.

Conclusion: Supervisors perceive the Fundamentals of Care framework positively and use it as a supporting tool to structure and facilitate students' reflection on what nursing is and requires. They perceive that having a shared framework across school and clinical setting contributes to a safe and positive learning environment. Furthermore, using the framework develops their own practice as clinical supervisors.

KEYWORDS
clinical placement, clinical supervision, critical reflection, education, fundamentals care, nursing, nursing student, theory–practice gap

1 | INTRODUCTION

Fundamental nursing care is multidimensional and complex and a prerequisite for safe patient care and treatment (Feo & Kitson, 2016). In a nursing education context, it is therefore imperative to integrate pedagogical initiatives in curricula that support the teaching of the complexities of fundamental care. However, existing studies have underlined that nursing students find it difficult to identify fundamental care needs, such as physical, psychosocial, and relational elements of care (Jangland et al., 2018), and there is lack of education on basic nursing care at the bachelor level (Huisman-de Waal et al., 2018). Thus, there is a need to explore curricular and educational initiatives that are aimed at developing nursing students' understanding of what fundamental nursing care is and requires.

Clinical placements are an essential part of the pre-registration nursing program. In the European Union, clinical placements constitute a minimum of 50% of nursing programs and is therefore central

to students' learning and professional development as nurses (EU directive 2005/36/EC). Nursing students' clinical placements are known to influence students' understanding of nursing care (Huisman-de Waal et al., 2018). Furthermore, clinical supervisors, also referred to as mentors, facilitators, peer instructors and preceptors, play important roles in students' professional development and are often seen as role models by students (Jack et al., 2017). Nursing students' experiences with clinical placements are well researched; however, there are fewer studies exploring how clinical supervisors are supported in their supervision of nursing students' professional development (Hilli & Sandvik, 2020). This study explores clinical supervisors' perceptions of a conceptual framework that has been introduced in nursing curricula to support an increased focus on fundamental care.

1.1 | Background

Recent international studies have underlined that fundamental nursing care is under pressure due to shortage in nursing staff, increased workload and increase in the complexity of nursing care (Feo & Kitson, 2016). This results in missed nursing care elements such as oral care, toileting, ambulation, nutrition, mobility, communication, information sharing, respect and emotional and psychological care among hospitalized patients (Chaboyer et al., 2020). Missed care, which may result in a higher risk of adverse events, prolongs the length of hospital stays as well as increases the risk of hospital re-admission and unacceptable patient deaths (Chaboyer et al., 2020). The challenges with the delivery of fundamentals of nursing care have resulted in nursing schools and universities refocusing on how fundamental nursing care can be prioritized, incorporated into nursing education curricula, and taught to nursing students (Alderman et al., 2018; Feo et al., 2018; Jangland et al., 2018; Lillekroken, 2019; Voldbjerg et al., 2020; Huisman-de Waal et al., 2018). Nurses' professional identities, including their understanding of the complexity and importance of fundamental nursing care, develop throughout nursing education (Arreciado Marañón & Isla Pera, 2015). To enhance nursing students' understanding of what fundamental nursing care is and requires, the School of Nursing, University College UCN, integrated in 2016 the conceptual Fundamentals of Care (FoC) framework (International Learning Collaborative) into the nursing curricula (Voldbjerg et al., 2018). The framework was generated on the basis of empirical studies and systematic reviews and is continuously being validated and tested (Feo & Kitson, 2016; Kitson et al., 2014). The framework addresses the complexity of delivering fundamental care and demonstrates what is required to deliver safe, effective, high-quality care (Feo & Kitson, 2016; Kitson et al., 2014). The FoC framework presents concepts and elements required for the delivery of high-quality fundamental nursing care in three core dimensions (Figure 1). The inner dimension reflects elements important to the nurse–patient relationship, the second dimension presents the integration of physical, psychosocial and relational aspects in nursing care and the third and outer dimension highlights organizational

---

IMPACT

What problem did the study address?

- International challenges with the delivery of fundamentals nursing care calls for Nursing Schools to refocus on how fundamental care is incorporated in nursing education curricula.
- Nursing students experience a theory–practice gap.
- Few studies have explored how clinical supervisors are supported in their supervision of nursing students' professional development.

What were the main findings?

- Using the framework generated a focus on the complexities of fundamental nursing and person-centred care.
- Using the framework was perceived to create a positive and familiar learning environment that both supported the nursing students learning as well as the supervisors' own development as clinical supervisors.
- Using the framework may reduce the perceived theory–practice gap.

Where and on whom will the research have impact?

- The findings can inspire to develop clinical supervisors' supervision of nursing students in clinical placements.

---

and contextual factors that may influence the delivery of fundamental care (Kitson et al., 2014).

Nursing students at the School of Nursing at the University College Northern Denmark are required to work with the FoC framework in lectures, case-based work, simulation laboratories and in their clinical placements. The framework is concurrently introduced and integrated in clinical settings at the university hospital, as well as the regional hospitals in Northern Denmark. The intention with a shared framework across clinical practice and school settings is to establish and support a shared understanding of what nursing is and requires and ultimately reduce students' and newly graduated nurses' perceptions of a theory–practice gap. An example of a theory–practice gap students and newly graduated nurses have reported experiencing is that although they are being taught theories, methods and models, they do not recognize them readily in clinical practice and have a hard time seeing the relevance of them (Voldbjerg, 2016). The clinical supervisors at the university hospital and regional hospitals are advised to draw on the FoC framework in their supervision of nursing students in clinical placements; however, their use of the framework has been unexplored.

The FoC framework was not delivered with a manual or guidance as to how it can be introduced and used in an educational
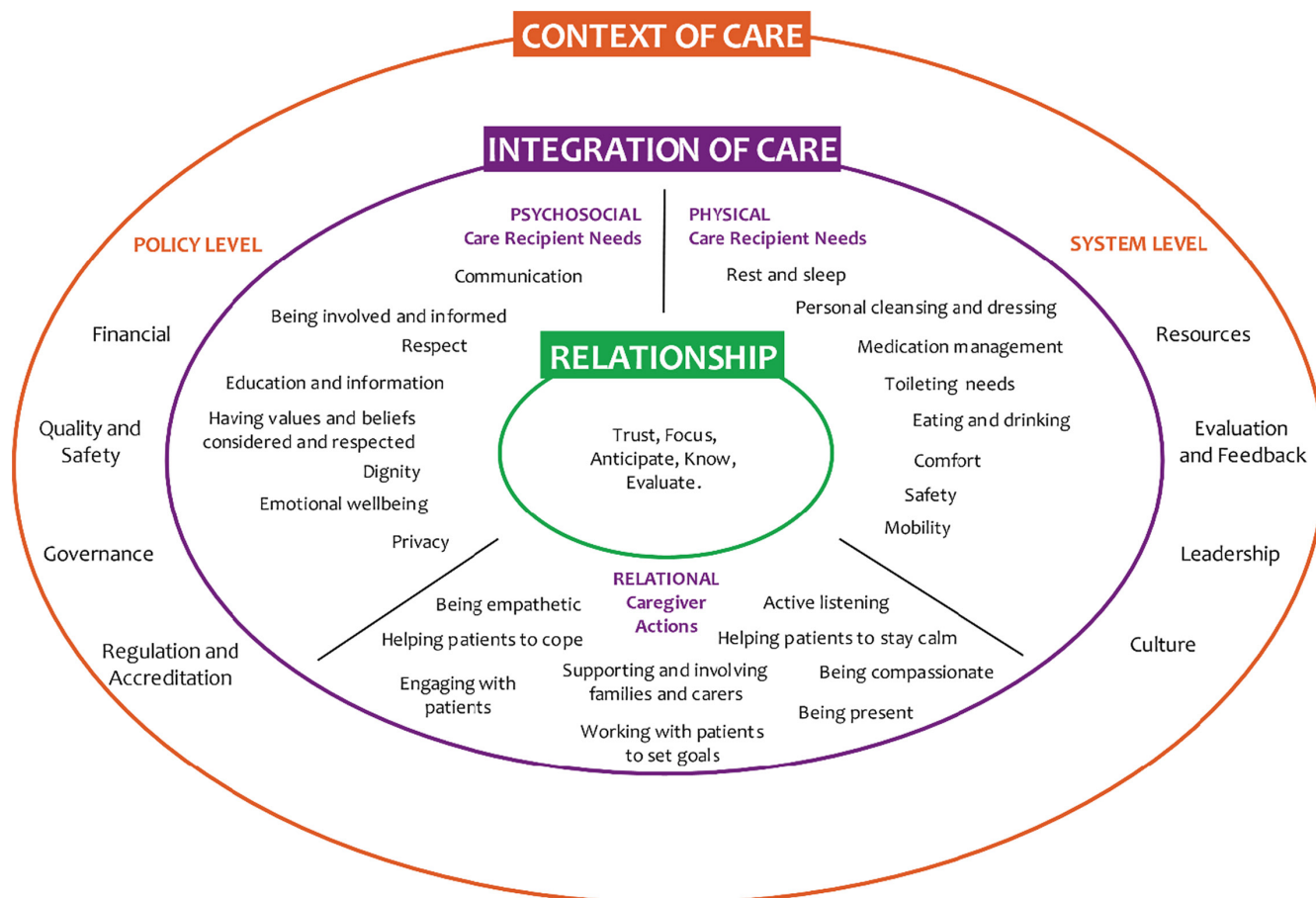
FIGURE 1 Fundamentals of care framework. Image obtained from https://ilccare.org/the-framework/. Content within image derived from Feo et al. (2017).

setting. Several researchers internationally have therefore engaged in exploring different ways of using the framework in nursing education. In previous studies on the integration of the FoC framework in the context of nursing education, the focus has been on using the framework to guide teaching and shaping students' understandings of fundamental nursing care (Alderman et al., 2018), nursing students' perceptions of the integration of the framework in simulated learning environments (Lillekroken, 2019), and students' and lecturers' experiences of using the framework in case-based work. Jangland et al. have explored how postgraduate nursing students use the framework in a written assignment based on a clinical situation and described their learning process in using the framework (Jangland et al., 2018). The embedding of the FoC in nursing curricula has also been described and discussed (Feo et al., 2018; Voldbjerg et al., 2018), and Rey et al. (2019) have suggested using the FoC practice process in a nursing home promotes nursing students' critical thinking and holistic, person-centred care (Rey et al., 2019). Findings underline that using the framework in an educational setting may support critical reflection, draw attention to the complexities of integrated fundamental nursing care and the importance of the nurse patient relationship and improve the nursing students' ability to see the relevance of and use theories in nursing practice. Overall, the results of previous studies have been positive, showing

the applicability of using the FoC framework in nursing education; however, the ways that clinical supervisors perceive and use the framework in the context of students' clinical placements had not yet been explored.

2 | THE STUDY

2.1 | Aim

The aim of this study was to explore clinical supervisors' perceptions and use of the Fundamentals of Care framework in supervising nursing students in their clinical placements in hospital settings.

2.2 | Design

Focus groups were conducted to gain insight into clinical supervisors' perceptions of the FoC framework and how they use it in supervising nursing students. In focus groups, data are derived from interactions among informants in groups where the discussion is led by the researchers (Morgan, 2018). The method was seen as appropriate and useful because the study focused on examining

clinical supervisors' accumulated opinions and experiences. Focus groups allow for the generation of data created through interactions between participants where they stimulate and challenge perceptions, beliefs and assertions through questions and comments (Morgan, 2018). Assembling the clinical supervisors in focus groups allowed them through interactions to share and compare their experiences on using the framework in supervising nursing students. Examples of how interactions influenced the findings are presented in the results section.

2.3 | Participants and settings

Twelve nurses working in medical, surgical, or psychiatric wards at a university hospital and a regional hospital geographically located on three settings in Denmark participated in the focus groups. The nurses' ages ranged from 26 to 60 years, the nurses had between 16 and 35 years of experience, and they held the position of clinical supervisor at their ward, supervising students in clinical placements in their first, second and sixth semesters. The clinical supervisors were purposefully sampled for the focus groups to ensure that they had experiences related to the phenomena of interest. Clinical supervisors are employed by the hospital and work as registered nurses at hospital wards. They are required to have a diploma in supervision (10 ECTS). A certain percentage of their working hours are allocated to the supervision of nursing students. The supervisors have an ongoing contact and collaboration concerning the nursing students with the school of nursing. Inclusion criteria were a diploma in supervision, working as clinical supervisors and using the conceptual FoC framework in the supervision of nursing students. There were no criteria as to age, sex, professional experience and clinical setting. The informants were recruited through leading nurse researchers and nurse managers at the wards. The participants received an e-mail with information and a request to participate. Sixteen nurses volunteered for the interviews; however, four nurses did not have the opportunity to participate due to heavy workloads at their wards.

2.4 | Data collection

Data were collected via four focus groups from September to November 2020. The four focus groups—FG 1 ($n = 4$), FG 2 ($n = 2$), FG 3 ($n = 4$) and FG 4 ($n = 2$)—were conducted by five researchers (authors of this paper). Two are insiders into both the educational and clinical fields, and three primarily have insights into the clinical field. Each focus group was conducted by two members of the research group and consisted of one insider and one outsider to the educational field. One moderated the focus groups and guided the discussions using a semi-structured theme guide (Table 1), and one observed the discussions and interactions between the nurses and took fieldnotes. The focus groups lasted between 60 and 90 min. Three of the interviews were undertaken in an undisturbed meeting room at the hospitals. Due to COVID-19 restrictions, the fourth interview was conducted using an online video conferencing tool. The interviews were audio-recorded and transcribed verbatim. Transcripts and other data on the informants were anonymized, and audio recordings were deleted following transcription.

2.5 | Ethical considerations

The informants received oral and written information about the study. They were informed that they could withdraw from the project at any time without further explanation or consequence. A consent form was signed by all informants. The study was carried out in accordance with the Code of Ethics of the World Medical Association (WMA Declaration of Helsinki, 2013). The project was reported to the Data Protection Agency for Health Scientific research in the North Region, Denmark (Project ID-number 2019-141).

2.6 | Data analysis

To make sense of shared experiences and create meaning across the data set, thematic analysis was carried out using Braun and Clarkes's

TABLE 1 Theme guide

Overall themes	Central questions
FoC in general	• What are your general perceptions of the FoC framework? • Do you use the FoC framework in other situations than supervision of students at the ward you work in? If yes, how do you use the framework?
FoC in supervision of nursing students	• How do you use the FoC framework in supervision of nursing students at first, second and sixth semester? • Please describe concrete activities/situations where you use the FoC framework in supervision of students at different semesters. • What is the purpose of using the FoC framework in supervision of students? • What are your experiences of using the FoC framework in supervision of students at first, second and sixth semester?
FoC and nursing students' learning	• What are your thoughts on using the FoC framework in relation to students' learning in clinical placement?
Other issues	• Is there anything else you would like to add or elaborate on regarding the use of the FoC framework in supervision of nursing students?

approach, which involves six iterative phases (Braun & Clarke, 2006). In phase 1, the interviews were listened to and transcribed. The transcribed interviews and participant observations were then read and re-read several times, and reflections were noted by all authors. Phase 2 consisted of the generation of initial and open codes by all authors. Subsequently, the first and last author organized the codes into meaningful groups reflecting how the clinical supervisors used the framework, how they perceived using it, and their purpose in using it. In phase 3, relationships between the groups and codes were identified, and the overarching themes were generated. The preliminary themes and sub-themes were conceptualized, and initial drafts of the findings were discussed with the research team. Based on the discussions, three main themes and their attendant sub-themes representing the phenomena of interest were identified. In phases 4 and 5, the candidate themes were reviewed, defined, and named to identify the essence of each theme. In phase 6, the final analysis is reported in a narrative structure in the present article. NVivo was used as a data management tool to assist in the analysis. An example of the relationship between the main theme, sub themes, and overall codes in theme one is shown in Table 2.

2.7 | Validity and reliability

To ensure the trustworthiness of findings, various methodological strategies were applied to the research process. To enhance the credibility of the study, triangulation was used (Miles et al., 2019). Two nurse researchers and three nurses with academic degrees collected and analysed the data. Using researcher and analyst triangulation enabled discussions, critical reflection, and alternate interpretations of the data. Furthermore, the triangulation of sources, with the inclusion of clinical supervisors from three different hospital settings, was applied to challenge and explore the consistency of the data. To assure the dependability of the study, transparency in its reporting is imperative (Miles et al., 2019). The research process is here reported in a structured and transparent manner, and the themes are supported by citations from the data set. This allows for readers to assess consistencies and inconsistencies in the study.

3 | FINDINGS

Clinical supervisors' perceptions and use of the FoC framework in the supervision of nursing students in clinical placements are described according to three themes: *structuring students' clinical learning*; *supporting tools for learning what nursing care is* and *developing one's own supervision practice*.

3.1 | Structuring students' clinical learning

The clinical supervisors' perceptions of the FoC framework were predominantly positive. Although it had taken a while for them to

familiarize themselves with the framework, they generally embraced the framework and welcomed it as an applicable tool to support their supervision of nursing students. The supervisors agreed that the framework is meaningful and illustrative of clinical practice and that it supports them in structuring students' learning. Overall, they expressed the following:

> The learning becomes more focused and structured. (FG2)

> The FoC framework assists in structuring and helps me focus on learning objectives relevant to the students' level. (FG1)

The structure contributed to more focused supervision and supported the supervisors in clarifying what was expected from the students each semester. The framework was perceived to give the supervisors an overview and a sense of direction as to which elements to focus on in daily supervision. Furthermore, the elements and dimensions of the framework supported them in arranging an overall plan for what students in different semesters should accomplish in their clinical placements.

In structuring students' learning, the supervisors highlighted the advantage of the framework being used in both school settings and clinical placements:

> There seems to be a red thread through all semesters...it is a shared framework used across school and placement in clinical practice. A practice which is sometimes a completely new world to enter. It provides a certain comfort. (FG2)

As the framework is used across school and clinical contexts, it is well known to students and provides structure and consistency in their learning trajectory. Students are familiar with the elements and dimensions of the framework and as such, they are aware of what aspects to include in reflections on nursing care. The supervisors expressed that the students' familiarity with the framework gave them, as supervisors, and the students a safe starting point for learning about nursing in sometimes unknown settings and specialties. Some supervisors expressed that this was an opening for students to take the lead on reflections on nursing care:

> ...it [the framework] gives me an overview, which guides me, and then I can allow the student to be kind of the first mover. (FG3)

The FoC framework constituted a shared entry point that stimulated both students and supervisors to initiate and lead reflections on nursing care.

Prior to using the FoC framework, the supervisors felt that drawing on theories in supervision and reflection with students was done at random and that they sometimes were in doubt about how and when to refer to them. One supervisor described this as 'bumping

TABLE 2 Example of the relationship between main theme, sub-themes and overall codes in theme 1

Main theme	Sub-themes	Overall codes
Structuring students' clinical learning	The FoC frameworks contributes to focus, structure and consistency in supervision The FoC framework provides a structure for including theories in reflection exercises Familiarity of the FoC framework enhances a safe learning environment	Positive perceptions of FoC FoC as an applicable tool to focused and structured learning FoC provides an overview and direction for each semester FoC provides consistency in supervision A red thread between school and clinical placement FoC helps clarify expectations FoC gives a starting point FoC supports inclusion of theory in reflections FoC inspires and guides supervision

against a wall' (FG3). However, interactions in the focus group (FG) interviews showed that the elements of the framework inspired supervisors to include theories in reflection exercises with nursing students more consciously:

> Supervisor 1: I like the structure of the framework, which gives you something more concrete to draw on theories from. (FG2)

> Supervisor 2: The framework gives a starting point, for example., the five elements in the inner circle… it is more concrete when you can ask: Are there any theories on this? (FG2)

The framework provides a structure for including theories in reflections, and the supervisors asked the students to include theory inspired by the elements of the framework. Using the framework to initiate reflections and drawing on theories were highlighted as important factors in improving students' reflective competencies and learning in clinical practice.

3.2 | Support tool for learning the fundamentals of nursing care

The supervisors perceived that the framework was relevant and useful in supervising nursing students. Overall, they used the framework regularly, either on a daily basis or at planned weekly supervision meetings with their students. By using the framework, the supervisors attempted to make nursing care more tangible for the students and support them in gaining a firm understanding of what nursing care is

> It makes it more concrete and clearer. It is like the nursing process, but more tangible. I think that helps the students. (FG4)

The simplicity of the construct of the framework was reported as helpful in giving the students an overview and insight into the complexities of nursing. Already in the first semesters of the students'

clinical placements, the supervisors used the framework to highlight central elements of nursing care:

> We are very conscious of using it often in the beginning [beginning of clinical placement]. So, initially where they might think, 'I'm a novice, and I do not know anything, I do not know the specialty, I do not know people's names, and so on. However, by using the framework, we can make them realize that what they are doing is about nursing care, such as making contact with the patient. (FG3)

The framework was used to illustrate that a common task like establishing contact and a relationship with a patient is a central aspect of nursing care that is not often reflected on. This is a task that requires professional attention when undertaken in the context of a patient–nurse relationship. By using the framework, the supervisors triggered the students' awareness of and reflections regarding what nursing care is—for example, by underlining that establishing a relationship is essential and an integral aspect of nursing, the supervisors facilitated the students' courage to communicate and interact with patients.

The supervisors reported that the students displayed a different awareness of the importance of person-centredness than previous students who had not been introduced to the framework. The supervisors perceived that the patient was drawn into primary focus rather than other aspects of daily work:

> I think FoC is really nice, and there has been a lot more focus and attention on the patient–nurse relationship. We perceive and sense it very clearly at the ward. The students are 'fostered' differently than before. They simply have much more focus on the patient relationship. (FG1)

Using the framework with its attention drawn towards the nurse–patient relationship enhanced students' opportunities to gain insight into patient resources, which seemed to support students' ability to prioritize care:

> The framework can help with prioritizing nursing care tasks—based on the relational perspective and the patients resources you then prioritize nursing care. (FG2)

Furthermore, the framework presented opportunities for reflections around how contextual factors influence nursing care and how the factors may guide or influence how care is prioritized:

> It [the framework] helps visualize that there are other factors that influence the care we can deliver. That even though we would like to prioritize differently there are external barriers. (FG3)

The supervisors reported that incorporating the framework in reflections on nursing care stimulated the students' clinical reasoning:

> It [the framework] is used to support the argumentation for nursing care—what is a nurse's responsibility? (FG2)

By improving the students' awareness about nursing through the FoC framework, the supervisors perceived that the students improved their ability to discuss and argue for a patients' need for nursing care.

With an awareness of their position as role models, the supervisors used the framework to visualize and illustrate their own nursing practices and exemplify and verbally express what nursing care is:

> Well, in the situation I tried to establish a trustful relation with the patient and I tried to articulate this to the student to explain that I actually use it [FoC framework] in my interaction with the patient. (FG3)

Using the framework to visualize care given in real-life situations accentuated that the framework was useful in the supervisor's own practice. Furthermore, the supervisors expressed that using the framework as a tool to support reflection may develop nursing students' professional identity:

> I think it [the framework] supported the students in finding their professional identity. (FG2)

This was a professional identity developed with a greater focus on the nurses' professional role and responsibility through visualization, articulation and reflection.

3.3 | Developing one's own supervision practice

The FoC framework was used as a supporting tool to have students reflect on what nursing is and requires. The supervisors perceived that using the framework also developed their own supervision practice. Previous challenging issues in supervision seemed easier to work with when using the framework. Some of the supervisors expressed and agreed with one each other in that they previously had the feeling of being unstructured in their supervising, without an overall plan and direction:

> It provides a good overview, and yes previously you were more unclear and did not know exactly where you were going. (FG3)

A lack of direction and overall plan could make them feel insufficient, and left them with a perception of missing important aspects of nursing care in their supervision; yet, by using the FoC framework, the supervisors felt less inadequate:

> I feel that when using the framework, I ensure drawing in all important aspects and I do not feel inadequate in supervision. (FG3)

Using the framework to be reminded of taking the complexities of nursing care into consideration when supervising students gave them a sense of confidence and a feeling of providing sufficient and adequate supervision. Furthermore, the supervisors felt that the 'supervision reached a higher professional level' (FG3). A professional level that was understood as a more specific focus on nursing care, founded in research evidence and theory.

The concepts and elements in the framework were used as cues to start reflection on nursing care and the factors influencing nursing care:

> When you look at it [the framework], then the political level and what influence it has on nursing care or... legislation or...things I would completely forget about if the framework was not here. (FG3)

The supervisors found themselves discussing and reflecting on the influence of political and organizational factors on daily nursing practice. These were aspects they reported previously forgetting to reflect on and discuss with nursing students. Furthermore, the supervisors perceived that they had been given a framework that assisted themselves in expressing, elaborating on, and defining what nursing is and requires

> What is nursing? What is psychiatric nursing? It is very unclear, and I really think we have been given a tool that provides words and concepts we can use. (FG4)

Concepts and elements in the framework made it easier not just to put words to and talk about what nursing is, but also what a specialized field such as psychiatric nursing entails.

The supervisors used the framework to create a positive and acknowledging atmosphere. One nurse reasoned as follows regarding drawing on elements and concepts in the framework together with students:

> To give them a positive experience of how much nursing they provided and how well they did. (FG3)

The supervisors used the framework to help students realize and recognize what they had learned and achieved. The supervisors expressed that the framework gave them an opportunity to work more constructively on a pedagogical level:

> Yes, I totally agree that the supervision is more constructive and on a higher pedagogical level. (FG2)

Drawing on the framework helped supervisors to focus on the nursing care situation rather than being focused on students' competencies or lack of competencies. Feedback situations were centred around the case rather than the person, and thereby in some situations, feedback became more constructive and professional.

4 | DISCUSSION

The aim of this study was to explore clinical supervisors' perceptions of the conceptual FoC framework and how they use it in supervising nursing students in clinical placements. The findings showed that clinical supervisors have a positive approach to using the FoC framework in their supervisor practice. They used the framework in many aspects of supervision and reported finding it useful in facilitating and supporting the students in describing and discussing the complexities of nursing care. The framework was used as a tool to structure students' learning in a supportive learning environment and to improve their own supervisor practice. Shared characteristics to the three themes are that there is an ambition to create reflection and a supportive learning environment. The findings are therefore discussed below under two subject matters: (1) *Facilitating critical reflection and the complexity of nursing* and (2) *Creating a supportive learning environment through familiarity*.

4.1 | Facilitating critical reflection and the complexity of nursing

This study supplements previous studies showing that the FoC framework can be used in curricular planning to support and facilitate nursing students' critical reflection and understanding of the complexity of nursing care (Alderman et al., 2018; Feo et al., 2018; Lillekroken, 2019). The clinical supervisors experienced that using the FoC framework stimulated students' critical reflections on nursing care—with critical reflection having been described as essential to developing clinical practice and ensuring the best possible care (Jasper & Rolfe, 2019). In line with the results from this study, previous studies have shown that using the framework in a learning situation promotes nursing students' critical reflection (Rey et al., 2019). The clinical supervisors perceived that the framework encouraged

the students' reflection of the complexities of nursing care where an integration of relational, psychosocial, and physical aspects were considered. An understanding of the complexity of nursing care is a prerequisite to identifying care needs, which nursing students have reported as difficult (Jangland et al., 2018).

This study highlights that initiating reflections inspired by the FoC framework generated a focus on the importance of person-centred care, where the relationship between patient and nurse is a prerequisite to the delivery of nursing care. In line with Rey et al. (2019), we found that the framework promoted a person-centred focus when used in a learning context (Rey et al., 2019). Previous studies have shown that students have experienced relational care aspects to be devalued in nursing care (Lehn-Christiansen & Holen, 2019). Therefore, a re-focus and attention shift to the importance of person-centredness and the relational aspects of nursing care are important and called upon in clinical practice settings where there is a tendency to reduce nursing care to technical and instrumental tasks without considering the uniqueness of each patient's situation (Chaboyer et al., 2020). It seems that the FoC framework has the potential to facilitate attention being paid to the complexities of nursing care and may support nursing students in bridging task-oriented and person-centred nursing care.

The supervisors used the framework to visualize and illustrate the complexities of their own nursing practice to students when exemplifying, articulating, and reflecting on the care delivered in specific situations. Supervisors are often seen as role models to their students and are an important inspirational source for students to gain insight into the profession, and therefore an important element in the learning process of becoming a nurse (Jack et al., 2017). It seems that the framework could be used as a facilitating tool for supervisors to convey their own practice into an articulate form that displays what nursing care is and requires. The supervisors expressed that using the framework supported students' development of their professional identity by, on the one hand, initiating critical reflection on one's own nursing and, on the other hand, having students reflect on what they witnessed the supervisor doing. Studies have highlighted that newly graduated nurses struggle with developing and coming to terms with professional identity (Arreciado Marañón & Isla Pera, 2015) which is central to their self-concept and role development and ultimately may influence their practice as nurses (Sun et al., 2016). Using the framework has the potential to support and initiate reflections on what nursing is and requires based on a supervisor's own actions and may be one way to support students' insight into the complexities of nursing and ultimately the development of professional identity.

4.2 | Creating a supportive learning environment through familiarity

The finding that the FoC framework provided structure and consistency in supervision between school and clinical placement is in line with results from a study by Alderman et al. (2018), showing

that using the FoC framework across schools and clinical education reduced students' challenges in seeing the relevance of theory and evidence-based knowledge in clinical practice settings. The present study advocates that the FoC framework establishes a link between school and clinical placement that may support students in how to provide fundamental nursing care and to see the value of fundamental nursing care (Alderman et al., 2018). A good learning environment for students in clinical placements is dependent on a formal collaboration between school and clinical practice (Ekstedt et al., 2019). Supplementary to Mudd et al. (2020), the findings of this study suggests that the framework has the potential to modify the gap between education in school and clinical placements. However, the potential of the FoC framework to accommodate the challenges of a gap requires an early and explicit integration of the FoC framework in nursing education at school and in clinical placements (Feo et al., 2018; Voldbjerg et al., 2020). Furthermore, it is essential that faculty members and clinical supervisors are well-informed on FoC and engaged in how to integrate the FoC framework in the supervision of nursing students (Voldbjerg et al., 2020). According to the supervisors, the link between school and clinical placement created a sense of familiarity to the students which enhanced a positive learning environment and provided a safe starting point for students to learn about nursing in an unknown setting and specialty. Providing a sense of familiarity and a feeling of 'at-homeness' has shown to be central in creating a positive and supportive learning environment where students improve their knowledge, competencies and confidence in providing nursing care (Hilli & Sandvik, 2020).

The framework gave the supervisors the opportunity to provide more structured and constructive pedagogical supervision. This is supported by previous research highlighting how teaching and supervision becomes more explicit and consistent by using the FoC framework (Feo et al., 2018) and can thus better support the pedagogical process (Rey et al., 2019). Using the framework seemed to evolve supervisors' own practice, which is a contribution to the existing literature on the FoC framework. The structure gave the supervisors a more specific nursing focus and an attention to research evidence and theory in their supervision. This resulted in a more confident feeling in their role as supervisors—a confidence that Hilli and Sandvik have found to be a prerequisite for a supervisor's continuous development of practice (Hilli & Sandvik, 2020).

The supervisors underlined that the framework could set the frame for constructive feedback to students. Feedback that has been called upon by students in a previous study on students' use of the framework in skill lab work (Lillekroken, 2019) and is central to nursing students' critical reflection, change of thoughts and expectations, and to build confidence in own knowledge (Jasper & Rolfe, 2019). Relating to and drawing on the framework while giving feedback helped the supervisors keep a focus on the nursing care situation rather than being centred around the students' challenges. In addition, providing constructive feedback and supervision contributed to a positive and supportive learning environment and may enable a positive student–supervisor relationship which is essential and serves as the basis for students' learning and development. This

is supported by studies highlighting that a relation between student and supervisor based on respect, responsibility and the acknowledgement of students' stress (Hilli & Sandvik, 2020) is central in creating a positive learning environment. Furthermore, a good and positive supervisor–student relationship influences a student's ability to learn and is central to their learning trajectory alongside the use of pedagogical methods (Hilli & Sandvik, 2020).

4.3 | Limitations

The informants' overall positive approach to the use of the FoC framework could question the impartiality of the study. First, a qualitative study will never be fully impartial, as it explores people's thoughts, perspectives, and experiences regarding a matter. Second, the clinical supervisors' positive approach could be a result of the recruitment process. The participation call was for nurses who were keen to share their perspectives and use of the framework in their supervision practice. It could be hypothesized that clinical supervisors who were sceptical or negatively oriented towards the framework would not volunteer to participate in a focus group interview with such a focus. To challenge the predominantly positive statements, every focus group was rounded off by asking the informants if they had any hesitations or negative experiences as to using the tool. None of the informants had anything to add.

The researchers were known to be promoters of the FoC framework. This may have influenced the clinical supervisors' response, as it may be difficult to reveal unfavourable experiences and perceptions regarding the framework to researchers who are assumed to be in favour of the framework. To challenge this unfavourable reaction, the researchers clarified at the beginning of the interview, that the results from the study are needed for an improvement process and that all experiences with the framework are important for an appropriate change of practice relevant to the supervision of nursing students.

A greater workload among the nurses at the hospital due to the COVID-19 pandemic resulted in several nurses having to cancel their participation in focus group interviews. This resulted in a rather small study population and two of the focus groups only included two informants. This could be a limitation, as having few informants in focus group interviews may result in a minimum of interaction between informants and therefore a minimum of accumulated opinions and experiences (Morgan, 2018). Although it is advised to have focus groups with 6–10 participant, it is also highlighted in focus group literature that there may very well be group dynamic in 2 and 3 person groups (Morgan, 2018). The researchers were therefore very attentive to the interactions and dynamics among the participant in the groups. It was concluded that the participants were very engaged, 'shared and compared' and had a lively interaction characterized by mutual respect. Furthermore, when looking across the data of the four focus group interviews, it is apparent that perceptions and topics of reflection and discussion were similar, indicating that the few informants in two groups did not influence the data generated.

Due to COVID-19 restrictions, one of the focus group interviews had to be conducted using an online video conferencing tool. Videoconferencing may create a distance between researchers and informant and among informants, which is not favourable to establish a situation where the informants feel at ease and can express their thoughts and reflections. However, the two informants who participated via an online video conference very quickly bonded through their shared interest in supervising students and using the FoC framework. They both seamed to feel at ease and contributed in a lively manner to the interview. Despite the small sample size, the findings contribute with valuable knowledge on the potential of the FoC framework in clinical practice.

5 | CONCLUSIONS

This study offers new insight into how supervisors in clinical placements perceive and use the FoC framework to structure and support their supervision regarding the complexity of nursing care to nursing students. The supervisors perceived the FoC framework positively and reported using it as a support tool to facilitate students' reflections on what nursing is and requires. Concurrently, they perceived that their own supervision practice developed. The FoC framework may be one way to support supervisors in re-focusing on the complexities of nursing and person-centred care, as well as support them in handling challenges and conflicts and maintaining a professional relationship with students. The familiarity of the framework was shown to contribute to a safe and positive learning environment, as it is a support tool to structure supervision in a complex and often unpredictable clinical setting. Furthermore, the familiarity of the framework was shown to create a link between school and clinical placements.

CONFLICT OF INTEREST

The authors declare that no potential conflicts of interests exist regarding the research, authorship and publication of this article.

PEER REVIEW

The peer review history for this article is available at https://publons.com/publon/10.1111/jan.15408.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

RECOMMENDATIONS FOR PRACTICE

The FoC framework has the potential to develop and support clinical supervisors' supervision of nursing students in clinical placements. However, this demands organizational and leadership support characterized by an ongoing integration of the framework in school and clinical contexts. Supervisors' and faculty members' engagement and positive attitudes towards the framework are central in a successful integration and exploitation of the framework's potentials. Although participants represented different clinical areas from three different hospital settings, it could be of interest to scale up the study to include more hospitals in other regions.

ORCID

Siri Lygum Voldbjerg 🔾 https://orcid.org/0000-0002-2622-5481
Britt Laugesen 🔾 https://orcid.org/0000-0002-2029-7433

REFERENCES

Alderman, J., Kastelein, C., Feo, R., Frensham, L., Salamon, Y., & Kitson, A.(2018). Prioritizing the fundamentals of care within the prelicensure nursing curriculum. *Journal of Nurse Education, 57*(8), 498–501. https://doi.org/10.3928/01484834-20180720-09

Arreciado Marañón, A., & Isla Pera, M. P.(2015). Theory and practice in the construction of professional identity in nursing students: A qualitative study. *Nurse Education Today, 35*(7), 859–863. https://doi.org/10.1016/j.nedt.2015.03.014

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

Chaboyer, W. , Harbeck, E., Lee, B. O., & Grealish, L. (2020). Missed nursing care: An overview of reviews. *The Kaohsiung Journal of Medical Sciences, 37* (2), 82–91. https://doi.org/10.1002/kjm2.12308

Ekstedt, M., Lindblad, M., & Löfmark, A.(2019). Nursing students' perception of the clinical learning environment and supervision in relation to two different supervision models—A comparative cross-sectional study. *BMC Nursing, 18,* 49. https://doi.org/10.1186/s12912-019-0375-6

Feo, R., Conroy, T., Jangland, E., Muntlin Athlin, Å., Brovall, M., Parr, J., Blomberg, K., & Kitson, A.(2017). Towards a standardised definition for fundamental care: A modified Delphi study. *Journal of Clinical Nursing, 27,* 2285–2299. https://doi.org/10.1111/jocn.14247

Feo, R., Donnelly, F., Frensham, L., & Kitson, A.(2018). Embedding fundamental care in the preregistration nursing curriculum: Results from a pilot study. *Nurse Education in Practice, 31,* 20–28. https://doi.org/10.1016/j.nepr.2018.04.008

Feo, R., & Kitson, A.(2016). Promoting patient-centred fundamental care in acute healthcare systems. *International Journal of Nursing Studies, 57,* 1–11. https://doi.org/10.1016/j.ijnurstu.2016.01.006

Hilli, Y., & Sandvik, A.-H.(2020). A Nordic model for learning compassionate care in clinical education. *Nurse Education Today, 90,* 104454. https://doi.org/10.1016/j.nedt.2020.104454

Huisman-de Waal, G., Feo, R., Vermeulen, H., & Heinen, M.(2018). Students' perspectives on basic nursing care education. *Journal of Clinical Nursing, 27,* 2450–2459.

International Learning Collaborative. https://ilccare.org/the-framework/

Jack, K., Hamshire, C., & Chambers, A.(2017). The influence of role models in undergraduate nurse education. *Journal of Clinical Nursing*, *26*(23–24), 4707–4715. https://doi.org/10.1111/jocn.13822

Jangland, E., Teodorsson, T., Molander, K., & Muntlin Athlin, Å.(2018). Inadequate environment, resources and values lead to missed nursing care: A focused ethnographic study on the surgical ward using the fundamentals of care framework. *Journal of Clinical Nursing*, *27*(11–112), 2311–2321. https://doi.org/10.1111/jocn.14095

Jasper, M., & Rolfe, G. (2019). Critical reflection and the emergence of professional knowledge. In G. Rolfe & D. Freshwater (Eds.), *Critical reflection in practice—Generating knowledge for care* (3rd ed.). Springer Nature Limited.

Kitson, A. L., Muntlin Athlin, Å., & Conroy, T.(2014). Anything but basic: Nursing's challenge in meeting patients' fundamental care needs. *Journal of Nursing Scholarship*, *46*, 331–339. https://doi.org/10.1111/jnu.12081

Lehn-Christiansen & Holen. (2019). Ambiguous socialization into nursing. Discourses of intimate care. *Nurse Education Today*, *75*, 1–5. https://doi.org/10.1016/j.nedt.2019.01.002

Lillekroken, D.(2019). Nursing students' perceptions towards being taught the fundamentals of care by clinical nurses within a simulated learning environment: A qualitative study. *Nurse Education in Practice*, *36*, 76–81. https://doi.org/10.1016/j.nepr.2019.03.010

Miles, M. B., Saldana, J., & Huberman, A. M.(2019). *Qualitative data analysis: A methods sourcebook*(4th ed.). Sage.

Morgan, D. L.(2018). *Basic and advanced focus groups*(1st ed.). SAGE Publications.

Mudd, A., Feo, R., Conroy, T., & Kitson, A.(2020). Where and how does fundamental care fit within seminal nursing theories: A narrative review and synthesis of key nursing concepts. *Journal of Clinical Nursing*, *29*, 3652–3666. https://doi.org/10.1111/jocn.15420

Rey, S., Voyer, P., Bouchard, S., & Savoie, C. (2019). Finding the fundamental needs behind resistance to care: Using the fundamentals of care practice process . *Journal of Clinical Nursing*, *29*, 1774–1787.

Sun, L., Gao, Y., Yang, J., Zang, X. Y., & Wang, Y. G.(2016). The impact of professional identity on role stress in nursing students: A cross-sectional study. *International Journal of Nursing Studies*, *63*, 1–8. https://doi.org/10.1016/j.ijnurstu.2016.08.010

Voldbjerg, S. L.(2016). *Newly graduated Nurses' use of knowledge sources in clinical decision making: A qualitative study*(Thesis). Aalborg Universitetsforlag. https://doi.org/10.5278/vbn.phd.med.00081

Voldbjerg, S. L., Laugesen, B., Bahnsen, I. B., Jørgensen, L., Sørensen, I. M., Grønkjær, M., & Sørensen, E. E.(2018). Integrating the fundamentals of care framework in baccalaureate nursing education: An example from a nursing school in Denmark. *Journal of Clinical Nursing*, *27*, 2506–2515. https://doi.org/10.1111/jocn.14354

Voldbjerg, S. L., Lyng Larsen, K., Nielsen, G., & Laugesen, B.(2020). Exploring nursing students' use of the fundamentals of care framework in case-based work. *Journal of Clinical Nursing*, *29*(11–12), 1968–1980. https://doi.org/10.1111/jocn.15070

WMA Declaration of Helsinki. (2013). *The Code of Ethics of the World Medical Association*. http://www.wma.net/en/30publications/10policies/

How to cite this article: Voldbjerg, S. L., Nielsen, G. N., Klit, M. O., Larsen, K. L., & Laugesen, B. (2022). Clinical supervisors' perceptions and use of the fundamentals of care framework in supervision of nursing students. *Journal of Advanced Nursing*, *78*, 4199–4209. https://doi.org/10.1111/jan.15408

The *Journal of Advanced Nursing (JAN)* is an international, peer-reviewed, scientific journal. *JAN* contributes to the advancement of evidence-based nursing, midwifery and health care by disseminating high quality research and scholarship of contemporary relevance and with potential to advance knowledge for practice, education, management or policy. *JAN* publishes research reviews, original research reports and methodological and theoretical papers.

For further information, please visit *JAN* on the Wiley Online Library website: www.wileyonlinelibrary.com/journal/jan

Reasons to publish your work in *JAN*:

- **High-impact forum:** the world's most cited nursing journal, with an Impact Factor of 2.561 – ranked 6/123 in the 2019 ISI Journal Citation Reports © (Nursing; Social Science).

- **Most read nursing journal in the world:** over 3 million articles downloaded online per year and accessible in over 10,000 libraries worldwide (including over 6,000 in developing countries with free or low cost access).

- **Fast and easy online submission:** online submission at http://mc.manuscriptcentral.com/jan.

- **Positive publishing experience:** rapid double-blind peer review with constructive feedback.

- **Rapid online publication in five weeks:** average time from final manuscript arriving in production to online publication.

- **Online Open:** the option to pay to make your article freely and openly accessible to non-subscribers upon publication on Wiley Online Library, as well as the option to deposit the article in your own or your funding agency's preferred archive (e.g. PubMed).