



## SUMMARY OF RURAL CLINIC PLACEMENT EVALUATIONS

2ND YEAR GENERAL NURSING STUDENTS  
ROMA COLLEGE OF NURSING  
6 MAY – 17 MAY, 2013

MIDWIFERY STUDENTS  
ROMA COLLEGE OF NURSING  
21 MAY – 24 MAY, 2013 AND 3 JUNE -7 JUNE, 2013  
27 MAY – 31 MAY, 2013 AND 10 JUNE -14 JUNE, 2013

**Summary of Rural Clinic Placement Evaluations**  
**2<sup>nd</sup> Year General Nursing Students, Roma SON, 6 May – 17 May, 2013**  
**Midwifery Students, Roma SON, 21 May – 24 May, 2013 and 3 June -7 June, 2013**  
**Midwifery Students, Roma SON, 27 May – 31 May, 2013 and 10 June -14 June, 2013**

## INTRODUCTION

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Roma School of Nursing (SON), also known as Roma College of Nursing, is owned by the Roman Catholic Church and is affiliated with St. Joseph's Hospital. It is a member of the Christian Health Association of Lesotho (CHAL) and is one of the four CHAL schools that offer nurse training programs. Roma SON offers a three year diploma in general nursing and an additional one year program to secure a diploma in midwifery.

MCHIP Lesotho supports placement of nursing and midwifery students into primary health care clinics. The purpose of this placement is to provide a clinical experience for the students that improves their clinical skills and increases their exposure to health related issues in Lesotho. The overall goal is to advance the students' clinical competencies in health promotion and disease prevention, as well as curative services in primary care setting.

MCHIP/Jhpiego supports Roma SON with the placement of second year nursing students and midwifery students to primary health care clinics to provide them with this clinical experience. Second year nursing students were placed in primary health care clinics for two week rotations between 6 June and 17 June, 2013. Midwifery students were placed in primary health care clinics for two one week rotations, either from 21 May to 24 May, 2013 and 3 June and 7 June, 2013 or from 27 May to 31 May, 2013 and 10 June and 14 June, 2013.

## SELECTION OF HEALTH CENTERS

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Health centers (HCs) were chosen as clinical placement sites using recommendations from site assessments that were completed by MCHIP and Jhpiego in collaboration with Roma SON in October 2012. Three health centers were selected for the second year nursing students and students were placed at Mohale HC, Nazareth HC, and Fatima HC. Four health centers were selected for the midwifery students including Maryland HC, Louis Gerard HC, St. Dennis HC, and Nazareth HC. Some of the health centers used for the midwifery placements still need to be assessed.

**Mohale HC** is located sixty-three kilometers from Roma SON and is accessible by car along a tarred road. It is government owned. The HC has both electricity and water. The clinic is staffed by two nurses and one trained nurse assistant (TNA). On average, the HC serves 2,000 patients monthly in the clinic; in addition community outreach is also performed. Students are housed in two large four bed wards in the clinic that are unused.

**Nazareth HC** is located 23 km from the Roma SON, in a semi-urban area, and is accessible by car along a tarred road. The HC has both electricity and water. The Millennium Challenge Corporation (MCC) is building a new facility, but the site was not ready for the 2012-2013 school year. The clinic is staffed by one nurse clinician, two nurses and two TNAs and they see on average 276 outpatient visits each month and attend 3 deliveries per month. Students are housed off-site in rented accommodations.

**Fatima HC** is located thirty-one kilometers from Roma SON. The HC has water and solar power. The MCC has built a new facility and the new facility is being used. The clinic is staffed by one nurse clinician, one nurse and two TNAs and they see on average 549 outpatient visits each month. Students are housed on-site in staff housing.

**Maryland HC** – to be assessed

**Louis Gerard HC**- to be assessed

**St. Dennis HC**- to be assessed

Students brought their own basic belongings to the placements and were supported in making arrangements for preparing meals and sleeping.

## METHODOLOGY

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Study participants included second year nursing students from Roma SON, clinical faculty from Roma SON, and clinic staff from the Mohale HC, Nazareth HC, and Fatima HC.

Twenty-three second year nursing students were placed at Mohale HC, Nazareth HC, or Fatima HC for two weeks in May 2013. Twenty-one of them participated in filling out the evaluation tool described below. Three clinical instructors from Roma SON oversaw the second year nursing students and completed the evaluation tool. One midwife from Mohale HC, one general nurse and one nurse clinician from Nazareth HC, and the Fatima HC staff completed the evaluation tool with regards to the placements of the second year nursing students.

Nineteen midwifery students were placed at Maryland HC, Louis Gerard HC, St. Dennis HC, or Nazareth HC for two one week periods in May and June 2013. Eighteen of the midwifery students filled out the evaluation tool. Six of the midwifery students, four placed at Maryland HC and two placed at St. Dennis HC filled out clinic staff evaluations instead of student evaluations and thus they were excluded from the analysis. Therefore, a total of thirteen midwifery students completed the appropriate evaluation tool and will be included in further analysis. None of the clinical instructors or clinic staff filled out the evaluation tool with regards to the midwifery student placement.

Three students placed at Maryland HC (n=2) and Louis Gerard HC (n=1) had an additional statement on their surveys, "The time allocated was adequate for the experience." The individual responses to this statement are recorded in the conclusion, but are not present in the figures

The data collection tool for this study was a Likert scale survey accompanied by open-ended questions. The students received a 15 question survey with 5 open-ended questions. The clinical faculty and clinic staff received an 18 question survey with 4 open-ended questions. The responses for the Likert scale that included: (1) strongly disagree, (2), (3), (4), and (5) strongly agree. Responses 2, 3, and 4 were not defined as being disagree, neutral, and agree, in this tool, instead arrows suggested the range between strongly disagree and strongly agree. Participation in the study was voluntary and confidentiality was guaranteed.

The objectives of the evaluation are:

- To evaluate rural clinical venues providing placements to nursing students
- To identify strengths and/ or limitations of clinical placement venues
- To provide an opportunity for students, clinical faculty, and clinic staff to comment on their perception on clinical learning and on rural clinical placements
- To assist clinical venues in improving and enhancing the learning environment they provide students

Quantitative data from the Likert scale was analyzed by comparing the percentages of students' responses to a statement. Individual scores between different HCs were compared for clinical faculty and clinic staff. One student from Nazareth HC did not answer the statement: "There was adequate orientation provided". The results for this statement for Nazareth HC reflect that only 6 students answered this question. The other statements were answered by all students.

The student responses to the open-ended questions were reviewed and categories were developed to define the most common responses to the questions. A summary of these categories and chosen quotations are included in this report. The clinical faculty and clinic staff responses to open-ended questions were reviewed and are listed in this report.

## LIMITATIONS

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Since respondents can interpret a Likert scale in a different manner the quantitative data was analyzed by combining (4) "agree" and (5) "strongly agree" statements and compared. This was completed to limit bias.

SUMMARY OF SECOND YEAR NURSING STUDENT PERCEPTIONS

The following figure shows the total percentage of students for each of the three clinics that “agree” or “strongly agree” with the statement. A breakdown of all scores can be found in Appendix A.

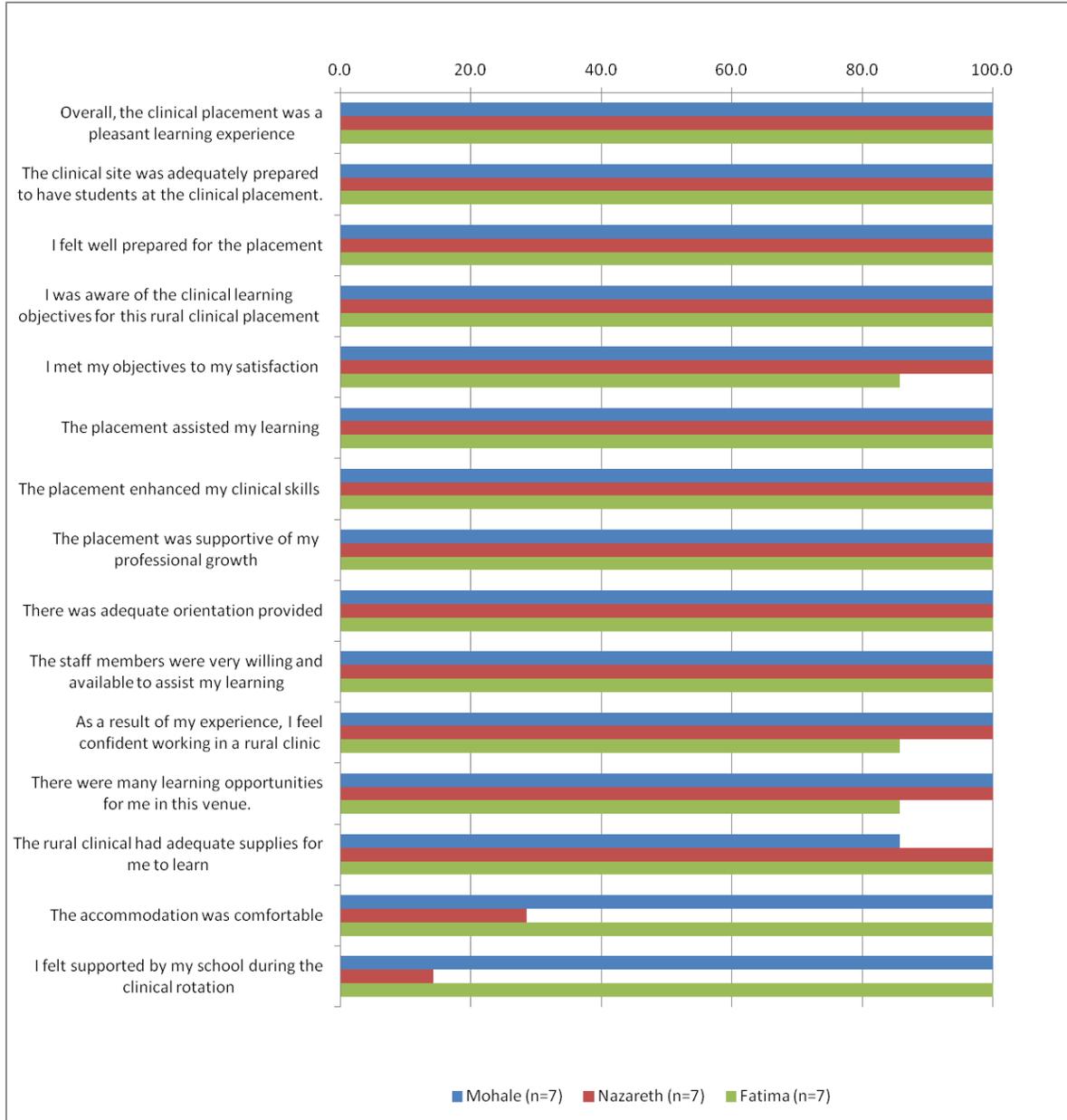


Figure 1: Comparison of the total % of 2<sup>nd</sup> year Roma nursing students per clinic that agrees or strongly agrees with clinic evaluation statements for rural PHC rotations from 6/5/2013 - 17/5/13

**Best things about the placement – second year nursing student perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<p><b>Good learning atmosphere</b></p> <ul style="list-style-type: none"> <li>• The conducive atmosphere for our maximum learning.</li> <li>• The learning environment was the best, it was conducive and after consulting patients we had lessons daily</li> <li>• There was a good learning experience gained</li> </ul> <p><b>Well-equipped clinic</b></p> <ul style="list-style-type: none"> <li>• Availability of materials used for learning</li> <li>• The clinic is well equipped with all the material needed</li> </ul> <p><b>Supportive staff</b></p> <ul style="list-style-type: none"> <li>• The staff was very warm and open and ready to assist with anything they can.</li> <li>• All the working staff was user friendly from the first time we arrived until our departure.</li> <li>• All the department gave the students orientation and gave education on how they operate.</li> </ul> <p><b>Accommodation</b></p> <ul style="list-style-type: none"> <li>• Accommodation very comfortable as it was warm with adequate supplies we needed.</li> <li>• The comfort in our residence and Christ-like attitude among the staff towards us.</li> <li>• The kitchen and the sleeping rooms were well prepared and well-furnished and ventilated.</li> <li>• We lived in the same building as the clinic and the accommodation was the best.</li> </ul>	<p><b>Diversity of clinical learning</b></p> <ul style="list-style-type: none"> <li>• This place is really motivating it has many patients with various health conditions</li> <li>• I have learned about the vaccines and injecting them as well as maintaining cold chain</li> <li>• I learned a lot on ART, HTC, and even OPD</li> </ul> <p><b>Exposure to HIV screening and HIV+ patients</b></p> <ul style="list-style-type: none"> <li>• HIV testing and counseling, and initiating patient on ART</li> <li>• This area has many ART patients and it really helped a lot as we were never place at ART at our hospital</li> <li>• I was able to be involved in counseling sessions and HIV testing (HTC) and it felt so good.</li> </ul> <p><b>Health Education</b></p> <ul style="list-style-type: none"> <li>• Health education on different conditions that most of the community are faced with</li> <li>• Health education which is for every morning to the patients</li> </ul> <p><b>Supportive staff</b></p> <ul style="list-style-type: none"> <li>• The staff members were willingly and were eagerly to help us understand how things were done.</li> <li>• All health professionals in this area are so nice and so willing to help and really enhance our learning.</li> <li>• Staff members were so good they were willing to help us every time.</li> </ul>	<p><b>Good learning atmosphere</b></p> <ul style="list-style-type: none"> <li>• It improved my learning</li> <li>• It improved my skills</li> <li>• The learning opportunities were in abundance every student had something to do daily</li> </ul> <p><b>Well-equipped clinic</b></p> <ul style="list-style-type: none"> <li>• There was enough equipment at the health centre for learning</li> <li>• There were enough materials to facilitate my learning</li> </ul> <p><b>Patient/community interaction</b></p> <ul style="list-style-type: none"> <li>• Counseling patient until they understand their situation eg. explaining the importance of adherence</li> <li>• Patients were cooperative and ask questions when need arises.</li> <li>• Learning how to cooperate with the community</li> </ul> <p><b>Diversity of clinical services</b></p> <ul style="list-style-type: none"> <li>• Organization of different services provided to the community/clients each day has special services, eg. under-fives Thursdays</li> </ul> <p><b>Health Education</b></p> <ul style="list-style-type: none"> <li>• How health education on daily basis which included testing.</li> </ul> <p><b>Supportive staff</b></p> <ul style="list-style-type: none"> <li>• Cooperation and unity of the staff in activities of health</li> <li>• The staff members were so cooperative and willing to teach the students.</li> <li>• Staff members were willing to help and did their best to help us.</li> </ul>

**Areas that need improvement – second year nursing student perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<p><b>Transportation for outreach and referral</b></p> <ul style="list-style-type: none"> <li>• If possible, I would suggest that the clinic to have an ambulance for easy referral of client.</li> <li>• We need transport for outreaches</li> <li>• There is no transport in terms of referring patients.</li> </ul> <p><b>Additional clinic staff</b></p> <ul style="list-style-type: none"> <li>• Additional registered nurse because of frequent outreaches to serve remote areas</li> <li>• The professional counselor because rural people seem to be difficult on understanding acceptance of good health.</li> </ul> <p><b>Longer duration for clinical experience</b></p> <ul style="list-style-type: none"> <li>• Duration of the clinical exposure is not enough.</li> <li>• The duration should be at least a month so that we shall be well equipped with clinical experience.</li> <li>• We should have several clinical experiences so that we can be exposed to it.</li> </ul>	<p><b>Accommodation</b></p> <ul style="list-style-type: none"> <li>• Accommodation</li> <li>• The accommodation</li> <li>• The school should provide us with enough basic needs which will last for two weeks</li> </ul> <p><b>Clinic logistics</b></p> <ul style="list-style-type: none"> <li>• The building needs to be extended</li> <li>• The clinic needs to be near the main road</li> </ul> <p><b>Additional clinic staff</b></p> <ul style="list-style-type: none"> <li>• The staff members should be increased</li> <li>• Staff need to be increased because there are many patients and many things to do</li> <li>• The population of Nazareth H/C is huge and I think staff members are not adequate</li> </ul> <p><b>Longer duration for clinical experience</b></p> <ul style="list-style-type: none"> <li>• The time given was really not adequate we should at least be given 1 to 2 months.</li> <li>• Time allocation is inadequate, we should at least be given a month.</li> </ul>	<p><b>Accommodation</b></p> <ul style="list-style-type: none"> <li>• Student housing, since we were living in one of the staff housing thus the owner had to move out for us.</li> <li>• Equipment like pots and gas should be increased</li> <li>• Residents we need more equipment such as pots, fuel, and soap; apart from that everything was perfect.</li> </ul> <p><b>Additional clinic staff</b></p> <ul style="list-style-type: none"> <li>• The staff members are short so there should be others.</li> <li>• I realized that there is a lot of work in this placement so there is need for two more nurses.</li> </ul> <p><b>Longer duration for clinical experience</b></p> <ul style="list-style-type: none"> <li>• The time of allocations should be increased to at least a month</li> <li>• Duration of the placement was too short and didn't allow attainment of all the objectives.</li> </ul> <p><b>Water and sanitation</b></p> <ul style="list-style-type: none"> <li>• Some areas around the community such as health education for some hazards eg. cleanliness, some toilets too</li> <li>• There is water shortage, so there is need to ensure that water is available as it serves many purposes</li> <li>• H2O should also be present as it delays proper function of the clinic.</li> </ul> <p><b>Clinic logistics</b></p> <ul style="list-style-type: none"> <li>• Counseling room should be used for that purpose only as for now it serves both counseling and CD4 count done those too.</li> </ul>

### Most improved clinical skills – second year nursing student perspective

Mohale	Nazareth	Fatima
<p><b>Diagnosis and treatment skills</b></p> <ul style="list-style-type: none"> <li>• Formulation nursing diagnosis and appropriate clinic</li> <li>• Knowledge on how to assess and diagnose patients</li> <li>• Disease identification and treatment</li> </ul> <p><b>Physical Exam Skills</b></p> <ul style="list-style-type: none"> <li>• Thorough physical examinations</li> <li>• Physical examination of pregnant mothers</li> <li>• Practiced physical exam and history taking</li> </ul> <p><b>Communication Skills</b></p> <ul style="list-style-type: none"> <li>• Counseling skills during consultation even in ART corner</li> <li>• Communication skills</li> <li>• Communicating and nursing people of different beliefs and cultures</li> </ul> <p><b>Critical Thinking</b></p> <ul style="list-style-type: none"> <li>• Problem solving skills, prior prescription</li> <li>• Nursing psychology and evaluating needs of patients</li> </ul> <p><b>Independence</b></p> <ul style="list-style-type: none"> <li>• How to be independent without assistance from the doctor</li> <li>• Being in charge of the clinic</li> </ul>	<p><b>Diagnosis and treatment skills</b></p> <ul style="list-style-type: none"> <li>• Formulating nursing diagnosis</li> <li>• Consulting and prescribing for patients</li> <li>• Formulating the diagnosis and prescribing</li> </ul> <p><b>Physical exam skills</b></p> <ul style="list-style-type: none"> <li>• Learning on pregnant mothers; their assessment and vaccines</li> </ul> <p><b>Communication skills</b></p> <ul style="list-style-type: none"> <li>• Communication skills</li> <li>• Counseling skill</li> <li>• Health education, because its not very easy to stand in front of many people.</li> </ul> <p><b>HIV</b></p> <ul style="list-style-type: none"> <li>• Dealing with ART patients; learning various regimen</li> <li>• Dealing with HIV patients and doing ART clinics</li> <li>• Dealing with ART (initiating ARVs) (counseling)</li> </ul> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>• Pharmacy, Pima, OPD, ANC, PMTCT</li> <li>• Sharing or helping one another</li> </ul>	<p><b>Diagnosis and treatment skills</b></p> <ul style="list-style-type: none"> <li>• Diagnosing patients and giving relevant treatment</li> <li>• Consultation and prescribing drugs accordingly</li> <li>• Consultation and diagnosis of OPD patients</li> </ul> <p><b>Physical Exam Skills</b></p> <ul style="list-style-type: none"> <li>• Clinical physical assessment of the client</li> <li>• Examining pregnant women during their visits</li> </ul> <p><b>Communication Skills</b></p> <ul style="list-style-type: none"> <li>• Communicating with patients (health education)</li> <li>• Communication and counseling skills.</li> <li>• Patient education and non-pharmaceutical therapy in patient's healing.</li> </ul> <p><b>HIV</b></p> <ul style="list-style-type: none"> <li>• Counseling and testing HIV positive and negative people</li> <li>• Management of patient with HIV/AIDS</li> <li>• HIV testing and counseling</li> </ul> <p><b>MCH</b></p> <ul style="list-style-type: none"> <li>• Working with under-fives, their registers, vaccination, and health educating mothers.</li> </ul> <p><b>Medication administration</b></p> <ul style="list-style-type: none"> <li>• Administering medications</li> <li>• Venipuncture</li> <li>• Filling up some registers, eg. ART registers</li> </ul> <p><b>Documentation</b></p> <ul style="list-style-type: none"> <li>• Proper record keeping</li> <li>• Recording and reporting</li> </ul> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>• All in the objectives</li> <li>• All of them</li> </ul>

**Would second year nursing students like to work in a similar clinic after completing their training?**

<b>Yes: 90.5%</b>	
<b>Independence</b>	<ul style="list-style-type: none"> <li>Working in a rural clinic helps one to be independent and more competent and inspires one to learn more.</li> <li>At a rural clinic a nurse is independent hence that will give me experience</li> <li>I would love to work in similar rural clinic since it makes a person be independent and do the best at the patient interest.</li> </ul>
<b>Challenging and diverse clinical care</b>	<ul style="list-style-type: none"> <li>Rural clinics make one be exposed to different conditions and make one to be independent as some are very far from the hospitals.</li> <li>It is a place with so many challenging conditions and good accommodation for nurses.</li> <li>Because there are more challenges and that makes a nurse to not stop learning about the conditions and management</li> </ul>
<b>Supportive staff</b>	<ul style="list-style-type: none"> <li>Nazareth clinic is such a motivating, welcoming clinic with many patients and motivates one into nursing professionals.</li> <li>There is more experience and the staff members were very willing to help us.</li> </ul>
<b>Community</b>	<ul style="list-style-type: none"> <li>The place is very warm, the community is respectful and open to receive knowledge and care provided.</li> </ul>
<b>Maybe: 9.5%</b>	
	<ul style="list-style-type: none"> <li>Believe independence need more experience, so maybe after one good enough experience to be independence</li> </ul>
<b>No: 0%</b>	



Figure 2: ROMA students in rural PHC rotations from 6/5/2013 - 17/5/2013 at 3 different sites and their willingness to work in a similar rural clinic upon completion of their training

#### ADDITIONAL COMMENTS FROM SECOND YEAR NURSING STUDENTS ABOUT CLINICAL PLACEMENTS:

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- **Longer duration for clinical experience**
  - Allocation time should be a month so that we experience how to live together and enhance our learning. I don't regret being there.
  - We should always be allocated at the clinics at certain times during the academic years not only when we are waiting for the results. Instead of going to St. Joseph's we can at least come to the clinics because of many patients.
  - I would suggest that we should be given much more time to come to the clinics, at least a month because we gain more clinical experience more than when we are at the hospital, as in the hospital there are few patients and we are many.
- **School of nursing support and logistics**
  - I wish next time when being placed in the clinics we have to be supplied with enough material so that we do not run short of them before completion of the placement. We should also be knowledgeable of the time we are going to be picked from the H/C so that we do not leave patients unattended. We had only one pot so it became a challenge when it comes to cooking.
  - For the school, school should provide us with the basic needs like enough things to cater for two weeks e.g. cardiac gas, matches and utensils.
  - Generally the placement was great except that we were fetched from the clinic without any notice, I therefore recommend that we should be able told well on time about the date and time of departure.
- Mohale center was really a home away from home; religious perspective of client was taken into consideration; I do wish to be here once again.
- Keep it up Mohale Health Centre staff.
- It is like every student undergoing nursing practice should undergo this placement because it gives learned opportunity to explore.
- It's good to be in different health care facilities because some theories are turned into practice rather than staying in one place with insufficient room for learning.
- Again staff members of the clinic were so good.
- The experience was best.
- Rural areas health centers or clinics should be used often e.g. doctors, training institutes to learn about the importance of challenges faced by health personnel working there and assist.
- That was a great chance for us to take care of patients at clinic level and so we had a good experience, I do suggest that those coming after us be granted this opportunity.
- It was very good to be in rural placement as we would even go for community gathering to give health education as other way of taking part in prevention of disease eg. HIV, STIs

SUMMARY OF MIDWIFERY STUDENT PERCEPTIONS

The following figure shows the total percentage of students for each of the three clinics that “agree” or “strongly agree” with the statement. A breakdown of all scores can be found in Appendix A.

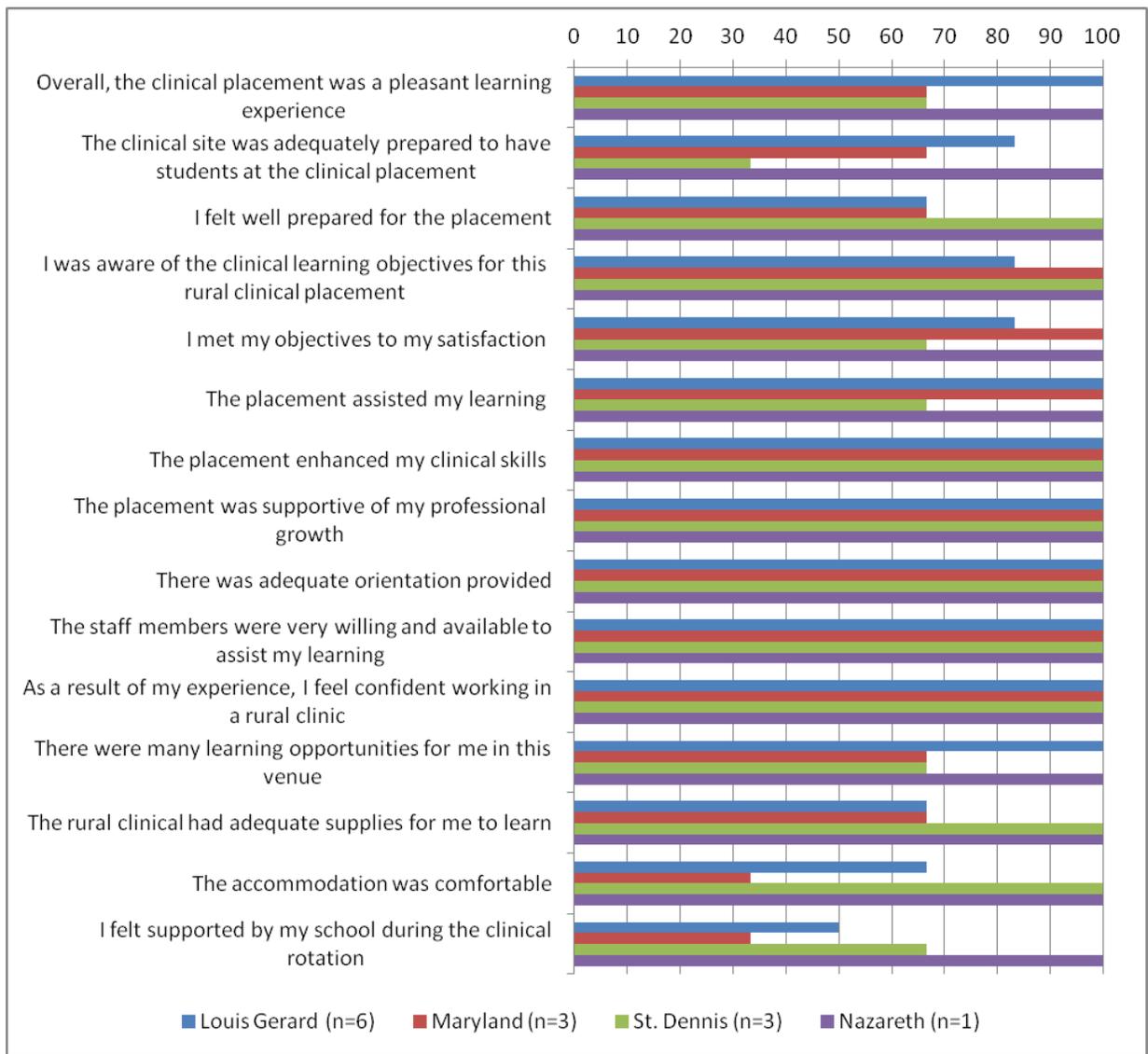


Figure 2: Comparison of the total % of Roma midwifery students per clinic that agrees or strongly agrees with clinic evaluation statements for rural PHC rotations

**Best things about the placement – midwifery student perspective**

<b>Maryland</b>	<b>Louis Gerard</b>	<b>St. Dennis</b>	<b>Nazareth</b>
<p><b>Hands-on Learning</b></p> <ul style="list-style-type: none"> <li>• Ability to incorporate theory and diagnosis of a client</li> <li>• Consulting, diagnosing, and treating diseases</li> <li>• Ability to apply diagnostic tool of nursing</li> <li>• Able to apply spiritual therapy</li> </ul> <p><b>Independence</b></p> <ul style="list-style-type: none"> <li>• Independence practice as a nurse not relying on medical officer</li> </ul>	<p><b>Supportive Staff</b></p> <ul style="list-style-type: none"> <li>• The staff at the clinic was accommodating and always willing to assist us</li> <li>• Staff members were very good to students, always willing to assist when we encounter challenges about the work</li> </ul> <p><b>Patient/Community Interaction</b></p> <ul style="list-style-type: none"> <li>• Adequate time for home visits</li> <li>• I was able to do home visits at villages around the clinic</li> </ul> <p><b>Well Equipped Clinic</b></p> <ul style="list-style-type: none"> <li>• There were adequate clients and supplies, which ensured effective learning</li> </ul> <p><b>Good Learning Atmosphere</b></p> <ul style="list-style-type: none"> <li>• Health centre was good for learning experience</li> </ul> <p><b>Health Education</b></p> <ul style="list-style-type: none"> <li>• Again was so impressed to notice knowledge that pregnant women have regarding health education that was given to them at their consecutive visits</li> </ul> <p><b>Independence Accommodation</b></p>	<p><b>Good Learning Atmosphere</b></p> <ul style="list-style-type: none"> <li>• How to administer ARV drugs</li> <li>• Equipment was readily available to enhance learning</li> <li>• Environment was fully equipped with materials necessary for performance of quality services</li> <li>• We were given the chance to consult clients under supervision</li> <li>• I have learned how to set out patients files</li> <li>• How to record patients in the record books after consulting them</li> </ul> <p><b>Supportive Staff</b></p> <ul style="list-style-type: none"> <li>• The staff was very supportive of our learning</li> </ul> <p><b>Good communication</b></p> <ul style="list-style-type: none"> <li>• Good communications skills used between health care workers and clients</li> </ul>	<p><b>Good Learning Atmosphere</b></p> <ul style="list-style-type: none"> <li>• The placement enhanced my clinical skills</li> <li>• The placement assisted my learning</li> <li>• The placement supported my professional development</li> </ul>

**Areas that need improvement – midwifery student perspective**

<b>Maryland</b>	<b>Louis Gerard</b>	<b>St. Dennis</b>	<b>Nazareth</b>
<p><b>Additional Preparation</b></p> <ul style="list-style-type: none"> <li>The planning should be well in advance eg. at the beginning of the academic year</li> <li>Should be planned well in time, ie. be put within the academic structure</li> </ul> <p><b>Longer Duration of Placement</b></p> <ul style="list-style-type: none"> <li>Timing - two weeks is not enough at least a month</li> <li>Continuous placement, ie. that month should be continuous not interrupted</li> </ul> <p><b>Clinical Infrastructure</b></p> <ul style="list-style-type: none"> <li>Availability of procedures eg. maternity unit should be functional</li> </ul>	<p><b>Longer Duration of Placement</b></p> <ul style="list-style-type: none"> <li>Placement should be more than two weeks maybe a month</li> <li>Two weeks is not enough suggest for more additional two weeks</li> </ul> <p><b>School Support</b></p> <ul style="list-style-type: none"> <li>If possible tutors should do ongoing follow-up of students during their placement</li> <li>Presence of or routine visit by nurse educators</li> </ul> <p><b>Accommodation</b></p> <ul style="list-style-type: none"> <li>Accommodation should be prepared at the health center</li> <li>Accommodation should be nearer to the clinic for students to conduct procedures such as deliveries at night</li> </ul> <p><b>Less Students</b></p> <ul style="list-style-type: none"> <li>Reduction in the number of students per clinic</li> <li>The number of students should be allocated according to the size of the health centre and services offered</li> </ul> <p><b>Additional Preparation</b></p> <ul style="list-style-type: none"> <li>Students should be prepared earlier for the placement</li> </ul>	<p><b>Clinical Infrastructure</b></p> <ul style="list-style-type: none"> <li>There are no curtains in the counseling rooms so privacy is less</li> <li>The bed in the labour ward should be added</li> </ul> <p><b>Patient Education</b></p> <ul style="list-style-type: none"> <li>Antenatal attendance as there are few pregnant women attending</li> <li>Encouragement of pregnant mothers to labour at the health center as there were no deliveries</li> </ul> <p><b>Equipment and Supplies</b></p> <ul style="list-style-type: none"> <li>There were less equipment in the labour ward</li> </ul> <p><b>Additional Preparation</b></p> <ul style="list-style-type: none"> <li>The staff should be prepared before our arrival as they said they prepared nothing for us because they were notified in short time</li> </ul>	<p><b>Clinical Infrastructure</b></p> <ul style="list-style-type: none"> <li>Heating system should be improved in the clinics</li> <li>There should be more beds in the labour ward</li> </ul> <p><b>Equipment and Supplies</b></p> <ul style="list-style-type: none"> <li>Clinic should be supplied with a sterilizer</li> </ul>

**Most improved clinical skills – midwifery student perspective**

<b>Maryland</b>	<b>Louis Gerard</b>	<b>St. Dennis</b>	<b>Nazareth</b>
<p><b>Diagnosis and Treatment Skills</b></p> <ul style="list-style-type: none"> <li>The incorporation of pharmacology and diagnosis</li> <li>Consulting, diagnosing, and disease treatment</li> </ul>	<p><b>Diagnosis and Treatment Skills</b></p> <ul style="list-style-type: none"> <li>Diagnosing conditions especially for children</li> <li>Consultation of clients such includes patients and pregnant women</li> <li>Consultation of clients</li> </ul>	<p><b>Diagnosis and Treatment Skills</b></p> <ul style="list-style-type: none"> <li>Consultation</li> <li>Consultation of clients, prescription of medication</li> <li>Ability to diagnose</li> </ul> <p><b>HIV</b></p>	<p><b>HIV</b></p> <ul style="list-style-type: none"> <li>Care of HIV infected patients</li> </ul> <p><b>MCH</b></p> <ul style="list-style-type: none"> <li>Care of under-five children</li> </ul> <p><b>STIs</b></p> <ul style="list-style-type: none"> <li>Care of patients with</li> </ul>

<ul style="list-style-type: none"> <li>Application of proper medication for particular condition</li> </ul> <p><b>Communication Skills</b></p> <ul style="list-style-type: none"> <li>Counseling</li> </ul> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>Independence</li> <li>Recording, reporting, and ordering</li> <li>Line of referral was improved</li> </ul>	<p>(holistic)</p> <p><b>HIV</b></p> <ul style="list-style-type: none"> <li>Initiating of patients on ARVs</li> <li>Initiation of adults and peds on ARTs</li> </ul> <p><b>Communication Skills</b></p> <ul style="list-style-type: none"> <li>Manner of approach to make clients understand nurse and caring in their trust</li> </ul> <p><b>MCH</b></p> <ul style="list-style-type: none"> <li>More competence and skills to deal with pregnant mothers</li> <li>Examination of the pregnant mothers</li> <li>Conducting under five clinic</li> </ul> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>Home visits (ART clients and pregnant women)</li> <li>Independence</li> </ul>	<ul style="list-style-type: none"> <li>Initiation of clients on HAART</li> </ul> <p><b>Communication Skills</b></p> <ul style="list-style-type: none"> <li>Interaction between clients and me</li> </ul>	STIs
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**Would midwifery students like to work in a similar clinic after completing their training?**

<b>Yes: 76.9%</b>	
<b>Challenging and diverse clinical care</b>	<ul style="list-style-type: none"> <li>I felt good working there and there are many challenges</li> <li>The rural clinics offer holistic care so it would be great to be part of such an amazing work</li> <li>Because I would like to improve the service provision of the health centre and encourage mothers to come to the facility for delivery</li> </ul>
<b>Community</b>	<ul style="list-style-type: none"> <li>As a health worker you get the opportunity to know your patients and be able to provide appropriate care.</li> <li>Has adequate facilities to run the clinic, one is able to know her clients fully as the community served is not that large</li> <li>Because even the community was welcoming and supportive, the environment was also conducive</li> <li>I prefer to work there because in the community was able to cooperate and welcome us</li> </ul>
<b>Maybe: 7.6%</b>	
	<ul style="list-style-type: none"> <li>Because it's a bit far from other services and means of transport is not that good</li> </ul>
<b>No: 15.4%</b>	
	<ul style="list-style-type: none"> <li>The clinics are very far that I cannot take my family to stay with me there</li> <li>I am already employed</li> </ul>

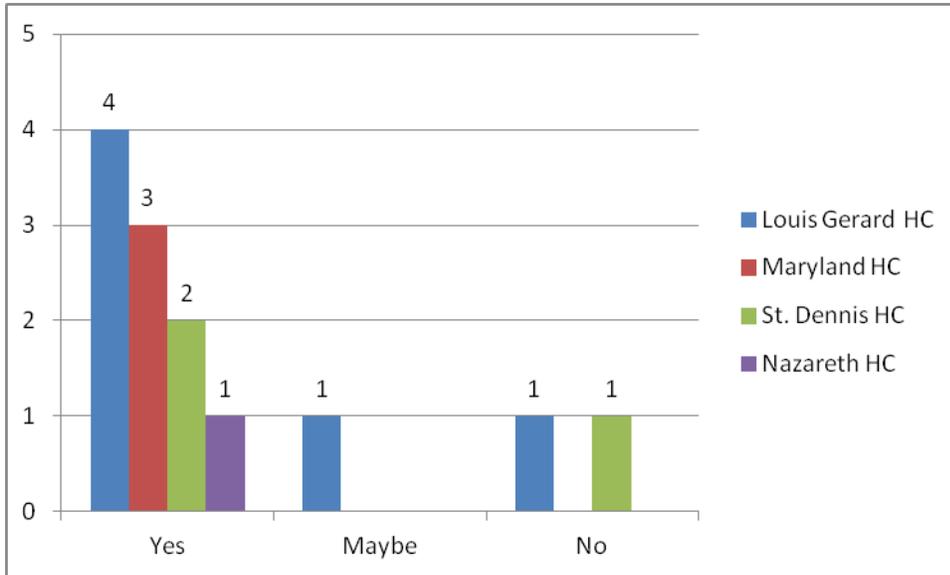


Figure 2: ROMA midwifery students in rural PHC rotations at 4 different sites and their willingness to work in a similar rural clinic upon completion of their training

**Good Learning Experience**

- The placement helped us to learn and I would encourage for it to be done every year as this gives students and opportunity to learn and be competent to work on their own
- I would like to thank the school for the opportunity, which contributed so much to our learning, and prepared us for situations we may find ourselves in
- It is an important experience
- I highly recommend the rural clinic placement as it is of great importance in midwifery learning programme and equips with skills to work with community

**Improvement on Placement Logistics**

- St Dennis is very far therefore I would say it's best if students place at St Dennis be accommodated on the clinic as there is enough accommodation be so doing is to prevent time consumption for learning which is affected by every day traveling
- Improve on time allocation and the placement be continuous, ie. should not be interrupted
- The placement should be well planned ahead and students notified early unlike us because it was not clear whether we were going
- Placement, number of students placed on each clinic should be reduced to avoid congestion due to small area

**Supportive Staff**

- I would like to thank the staff at the health centre for their support during our clinical placement

**Additional Clinic Staff**

- Clinic should be provided with enough staff

SUMMARY OF CLINICAL INSTRUCTOR'S PERCEPTION

The following figure shows individual scores of clinical instructors for each of the three supervised clinics.

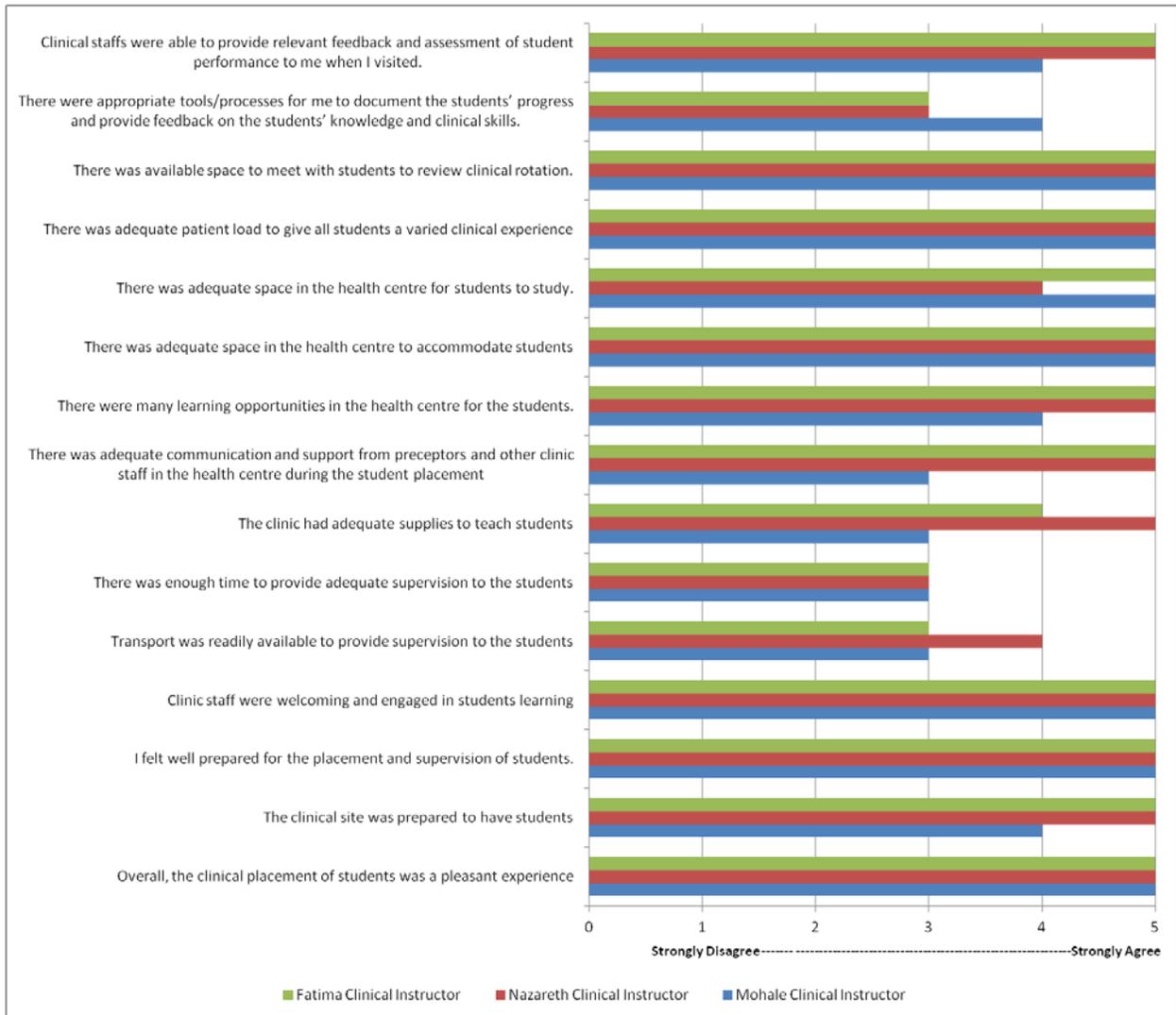


Figure 3: Comparison of individual scores from clinical instructors between different rural PHC sites for 2nd year nursing students from Roma SON

**Best things about the placement – clinical instructor perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<ul style="list-style-type: none"> <li>• Planned with clear objectives.</li> <li>• Students were more active in their learning.</li> <li>• Students motivated to work as community nurses.</li> </ul>	<ul style="list-style-type: none"> <li>• Large number of patient turnover for learning</li> <li>• Good supervision available with adequate stay</li> <li>• Organized planned learning sessions available</li> </ul>	<ul style="list-style-type: none"> <li>• A spacious clinic with plenty of activities - good turnover.</li> <li>• Good community involvement.</li> <li>• Effective supervision was available.</li> </ul>

**Areas that need improvement - clinical instructor perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<ul style="list-style-type: none"> <li>• Effective follow-up supervision from school</li> <li>• Augment supervision in the clinic as only one sister was there</li> <li>• Referral system to improve as there are no ambulance services</li> </ul>	<ul style="list-style-type: none"> <li>• Accommodation of clinic area</li> <li>• Electricity supply not consistent</li> <li>• Water a bit far away with toilets (from residential area)</li> <li>• School supervision to improve and be consistent</li> </ul>	<ul style="list-style-type: none"> <li>• Support supervision from school needs to be more regular</li> <li>• No family planning facility</li> </ul>

**CLINICS THAT ARE RECOMMENDED FOR FUTURE PLACEMENTS BY CLINICAL INSTRUCTORS:**

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- Mohale HC
  - It offers supportive learning to students
- Nazareth HC
- Fatima HC

**ADDITIONAL COMMENTS GIVEN BY THE CLINICAL INSTRUCTORS:**

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- A motivating setting with a multi-practice staff improved so much in ensuring the students to learn.
- A motivating place to place students. Staff quite improved and keen to teach students.
- A motivating environment with good learning opportunities. A good display of supervision.

SUMMARY OF CLINIC STAFF PERCEPTION

The following figure shows individual scores of clinic staff for each of the three clinics.

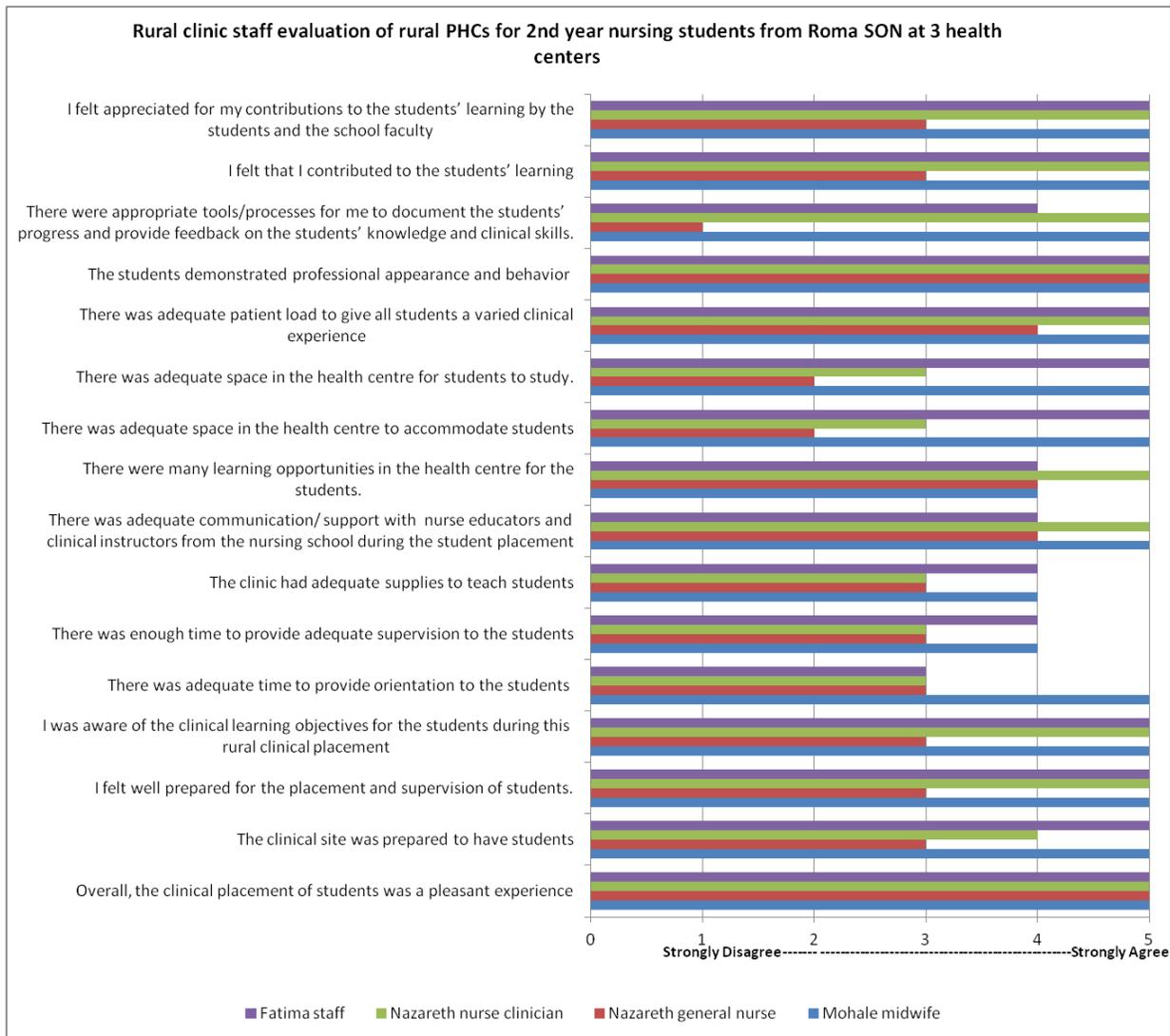


Figure 4: Comparison of individual scores from rural clinical staff between 3 sites for 2nd year nursing students from Roma SON

**Best things about the placement – clinic staff perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<ul style="list-style-type: none"> <li>• Students were goal directed - very willing to learn</li> <li>• Adjusted well to environment-gave the confidence which led to appropriate pt diagnosis and care</li> </ul>	<ul style="list-style-type: none"> <li>• Had teaching practice</li> <li>• There was work offload.</li> <li>• I had enough time to do other H/C tasks.</li> <li>• Application of my training skills that I received from Jhpiego's preceptor training.</li> <li>• Offloading of the health centre's daily workload.</li> <li>• Learning from students since they also have recent information on health issues.</li> </ul>	<ul style="list-style-type: none"> <li>• Reduced work load eg. assisted with vital signs, dispensing of drugs</li> <li>• Stimulated us to work well and give correct skills</li> <li>• Their presence refreshed our minds mentally and physically (motivation).</li> </ul>

**Areas that need improvement – clinic staff perspective**

<b>Mohale</b>	<b>Nazareth</b>	<b>Fatima</b>
<ul style="list-style-type: none"> <li>• There is a need for deployment of more staff, so that students can have a broad learning experience with limitless opportunities.</li> <li>• Students were quick to apply class content in clinical situation → less frustration.</li> </ul>	<ul style="list-style-type: none"> <li>• Trainings to be provided to other staff members.</li> <li>• Period of placement to be increased.</li> <li>• Other staff members be trained.</li> </ul>	<ul style="list-style-type: none"> <li>• Time for placement should be extended.</li> <li>• Students were supposed to be collected Saturday morning this plan was changed without communication, our plans for Friday afternoon failed.</li> </ul>

**Would you like to have students coming on a regular basis to your facility?**

- Mohale
  - Yes, they help you as a nurse to assess your values, give you sense of accomplishment, and define your failures and successes.
- Nazareth
  - Yes, because they help us provide quality services, we have enough time with patients and they assist in the learning of students and also being informed of recent health issues.
- Fatima
  - Yes, they need this exposure for the competency.

**Additional comments given by nursing staff:**

- An inspiration to exhausted minds.

- We are happy to contribute in this training so that many nurses will volunteer to work at the clinics (we reduce their fears).

## CONCLUSIONS

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Overall, the twenty-one second year nursing students from Roma SON, the thirteen midwifery students from Roma SON, the three clinical instructors, and the clinic staffs agreed that the PHC placements were a positive experience.

100% of the students strongly agreed that the staff members were willing to help them learn. 100% of the students agreed or strongly agreed that the placements were a pleasant learning experience, assisted in their learning, and enhanced their clinical skills. All the students agreed or strongly agreed that they felt prepared for the placement, that they felt the clinic site was prepared to have students, that they were aware of their objectives for the placement, and that they had adequate orientation. 85.7% of the students at Mohale HC and 100% of the students at Fatima HC and Nazareth HC agreed or strongly agreed that the clinic had adequate supplies for learning. 85.7% of Fatima HC students and 100% of the students placed at Nazareth HC and Mohale HC agreed or strongly agreed that they met their objectives, that they felt confident about working in a rural clinic, and that there were many learning opportunities at the clinic.

The most negative comments came from the students placed at Nazareth HC, where only 28.6% agreed or strongly agreed that the accommodations were comfortable and where only 14.3% of students agreed or strongly agreed that they felt supported by their school during their clinical rotation. 100% of the students placed at Fatima HC and Mohale HC agreed or strongly agreed that their accommodations were comfortable and that they felt supported by their school during their clinical rotation.

90.5% of the Roma second year nursing students (n=19) stated that they would be willing to work at a rural clinic upon completion of their training program. Two students stated that they would maybe work in a rural clinic, one had been placed at Mohale HC and the other at Nazareth HC, and no students stated that they would not work in a rural clinic. Four themes were identified as reasons the students were willing to work in rural clinics following program completion, they included: independence, challenging and diverse clinical care, supportive staff, and community. One student, who answered maybe, thought that he or she needed more experience before being able to work in a rural clinic.

Eight categories were identified in the Roma second year nursing students' answers to what the best things about the clinical placements were. One category that was present in answers from all clinical sites included having a supportive staff. Other categories included that the students thought the clinics were good learning experiences, that there was a diversity of clinical learning, there were health education activities, that the clinics were well equipped, that they were exposed to HIV positive patients, that they had positive patient and community interactions, and that they enjoyed their accommodations.

Alternatively, six categories were identified in the Roma students' answers to areas for improvement. Students at all health clinics suggested that additional clinic staff and longer durations of clinical placements would improve the experience. Other areas for improvement included transportation for outreach and referral at Mohale HC, improved accommodation and clinical logistics at Nazareth HC and Fatima HC, and improved water and sanitation at Fatima HC.

The second year nursing students were also asked to identify skills that were most improved following the clinical placement. Nine categories were identified from the Roma SON students' answers. Students at all three health centers felt that their diagnosis and treatment skills, communication skills, and physical exam skills improved. Students at Nazareth HC and Fatima HC felt they improved skills that were specific to HIV care. At Fatima HC, students also stated improving skills in maternal-child care, medication administration, and documentation. Students at Mohale HC felt they improved critical thinking skills and their ability to work independently.

100% of the students agreed or strongly agreed that the staff members were willing to help them learn, that the placement enhanced their clinical skills, supported their professional growth, that they felt confident working in a rural clinic, and that they had adequate orientation. All students from Maryland HC, St. Dennis HC, and Nazareth HC felt that they were aware of the objectives for the placement, while 83.3% of the students from Louis Gerard HC thought this. All students from Louis Gerard HC, Maryland HC, and Nazareth HC felt that the placement assisted in their learning, while 66.7% of the students from St. Dennis HC thought this. All the students at Louis Gerard HC and Nazareth HC agreed or strongly agreed that the placement was a pleasant learning experience and that they had many learning opportunities, while 66.7% of the students from both Maryland HC and St. Dennis HC felt this way. All the students at St. Dennis HC and Nazareth HC agreed or strongly agreed that they felt well prepared for the placement and that the rural clinic had adequate supplies to learn, while 66.7% of the students from both Maryland HC and St. Louis Gerard HC felt this way. All the students at Maryland HC and Nazareth HC agreed or strongly agreed that they met their objectives, while 66.7% of the students from St. Dennis HC and 83.3% from Louis Gerard HC felt this way. Of the three students who had the additional statement, "The time allocated was adequate for the experience" on their survey, one at Maryland HC agreed with the statement and the other two students remained neutral.

The most negative responses to statements included accommodations being comfortable, feeling supported by school during the rotation and feeling that the site was prepared for students. While all of the students at Nazareth HC and St. Dennis HC agreed or strongly agreed that the accommodations were comfortable, 66.7% of the midwifery students placed at Louis Gerard HC and 33.3% of the students placed at Maryland HC felt this way. The student at Nazareth HC strongly agreed that the clinic site was prepared to have students, but 33.3% of students at St. Dennis HC, 66.7% of students at Louis Gerard HC, and 83.3% of students at Maryland HC felt this way. The student at Nazareth HC strongly agreed that he/she felt

supported during the clinical rotation, but 66.7% of students at St. Dennis HC, 50% of students at Louis Gerard HC, and 33.3% of students at Maryland HC felt this way.

76.9% of the Roma midwifery students (n=13) stated that they would be willing to work at a rural clinic upon completion of their training program. One student stated that he/she would maybe work at a rural clinic upon program completion; this midwifery student was placed at Louis Gerard HC. Two students stated that they would not work in a rural clinic, one had been placed at Louis Gerard HC and the other at St. Dennis HC, and no students stated that they would not work in a rural clinic. Two themes were identified as reasons the students were willing to work in rural clinics following program completion, they included: challenging and diverse clinical care and community. One student, who answered maybe, stated that it was due to how far the clinic was from services and that there was poor transport in the area. The two midwifery students that would not work in a rural clinic stated already have a job and not being able to bring their families to the rural clinics as reasons.

Nine categories were identified in the Roma midwifery students' answers to what the best things about the clinical placements were. No categories were present in answers from all clinical sites. The categories included that the students thought the clinics were good learning experiences, that they experienced hands-on learning, there were health education activities, that the clinics were well equipped, that they had positive patient and community interactions, that they experienced good communication amongst staff and patients, that staff was supportive, that they were independent, and that they enjoyed their accommodations.

Alternatively, six categories were identified in the Roma students' answers to areas for improvement. No categories were present in answers from all clinical sites. Students at the health clinics suggested that additional preparation and coordination by the schools and clinics and longer durations of placements would improve the experience. They also suggested that the following be improved: school support, clinical infrastructure, accommodation, equipment and supplies, having fewer students at a rotation site, and improving health education activities to increase the number of pregnant mothers coming to the clinic for antenatal care and delivery.

The midwifery students were also asked to identify skills that were most improved following the clinical placement. Five categories were identified from the Roma SON students' answers. No categories were present in answers from all clinical sites. Students at Nazareth HC and Louis Gerard HC felt they improved skills that were specific to maternal-child care. At Louis Gerard HC, St. Dennis HC, and Nazareth HC students also stated improving skills in HIV care. At Louis Gerard HC, St. Dennis HC, and Maryland HC students stated improving skills in diagnosis and treatment and communication. The student at Nazareth HC felt that he/she improved skills related to STI treatment and care. Students also felt they improved their ability to work independently and attend home visits.

Three clinical instructors from Roma SON oversaw the second year nursing students from this school, with each being assigned to visit students at a different clinical placement site. None of the instructors attended Jhpiego's preceptor skills training courses. The clinical instructor

assigned to Mohale HC oversaw 7 students, visited the site once in two weeks, and spent three hours there. The clinical instructor at Fatima HC similarly oversaw 7 students, visited the site once in two weeks, and spent three hours there. The clinical instructor at Nazareth HC oversaw 7 students, visited the site twice in two weeks, and spent a total of four hours there. None of the clinical instructors agreed or strongly agree that they had enough time to supervise the students. Only one clinical instructor agreed that they had appropriate tools or processes for documenting the students' progress and providing feedback on the students' knowledge and clinical skills.

The three clinical instructors recommended the three clinics Mohale HC, Nazareth HC, and Fatima HC for future placements of second year nursing students. All suggested that supervision from the school needs to be improved.

Staff members at the clinics included a Nazareth HC nurse clinician and a general nurse, a Mohale HC midwife, and the Fatima HC staff. The nurse clinician from Nazareth HC attended Jhpiego's preceptor skills training course and strongly agreed the course made her/him a more competent preceptor and was able to apply the skills learned in the course. Furthermore, the general nurse at Nazareth HC stated an interest in preceptor training. 50% of the staff members agreed or strongly agree that they had enough time to supervise the students, that there was adequate space in the clinic for students, that the clinic was prepared to have students, and that the clinic had adequate supplies to teach the students. Only one clinical instructor agreed that there was adequate time to provide orientation to the students.

All staff members that responded to the survey agreed that they would like the students to come to the clinics regularly, stating that the students help alleviate their work load, allow staff members to utilize teaching skills, and that staff members learn from the students. The staff members thought the experience could be improved by increasing the duration of the placement.

## **Recommendations**

Based on this evaluation, the following recommendations can be made:

- Increase the length of time for rural clinic placements.
- Improve learning supplies for students and staff at the clinics.
  - Include general learning nursing tools, like anatomy and physiology and manuals, nursing skills texts, as well as tools that will provide information about the specific needs of the population including HIV care, maternal child care, and community health nursing.
  - This activity may require further funding.
- Offer preceptor training to more clinic staff and to clinical instructors.
- Interface with the clinics regularly to ensure the staff feel prepared to host students.
- Distribute evaluation tools to clinical instructors and to clinic staff. Distribute the evaluation tools to more than one member of the clinic staff to receive more information on their perceptions of the program.

- Suggest increased supervision of clinical instructors at clinic sites.
- Provide transport or research funding for transport for outreach activities at the clinics.
- Continue to monitor the accommodations of the students and the infrastructure needs of the clinics as more MCC clinics are completed for improvement.
  - Of concern is water shortage and supply at Fatima HC and sanitation at Fatima HC
- Continue to monitor the students' experiences at the clinics.
  - Observe trends in willingness to work in rural clinics as the students go on to become the third year nursing cohort and potentially midwifery students.
- Conduct site assessments at HCs that have not yet been assessed.
- Provide feedback and share reports with Roma SON and the three health centers.

Appendix A

Table 1: ROMA 2<sup>nd</sup> year nursing student response to Likert survey statements per health center in percentage (%)

	Health Centre	Number of students	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
Overall, the clinical placement was a pleasant learning experience	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	0%	14%	86%
The clinical site was adequately prepared to have students at the clinical placement	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	29%	71%
	Fatima	7	0%	0%	0%	14%	86%
I felt well prepared for the placement	Mohale	7	0%	0%	0%	29%	71%
	Nazareth	7	0%	0%	0%	29%	71%
	Fatima	7	0%	0%	0%	14%	86%
I was aware of the clinical learning objectives for this rural clinical placement	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	14%	86%
	Fatima	7	0%	0%	0%	29%	71%
I met my objectives to my satisfaction	Mohale	7	0%	0%	0%	43%	57%
	Nazareth	7	0%	0%	0%	71%	29%
	Fatima	7	0%	0%	14%	43%	43%
The placement assisted my learning	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	0%	14%	86%
The placement enhanced my clinical skills	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	0%	29%	71%
The placement was supportive of my professional growth	Mohale	7	0%	0%	0%	14%	86%
	Nazareth	6	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	0%	0%	100%
There was adequate orientation provided	Mohale	7	0%	0%	0%	14%	86%
	Nazareth	7	0%	0%	0%	14%	86%
	Fatima	7	0%	0%	0%	0%	100%
The staff members were very willing and available to assist my learning	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	0%	0%	100%
As a result of my experience, I feel confident working in a rural clinic	Mohale	7	0%	0%	0%	29%	71%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	14%	14%	71%
There were many learning opportunities for me in this venue	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	0%	0%	0%	0%	100%
	Fatima	7	0%	0%	14%	0%	86%
The rural clinical had adequate supplies for me to learn	Mohale	7	0%	0%	14%	0%	86%
	Nazareth	7	0%	0%	0%	29%	71%
	Fatima	7	0%	0%	0%	29%	71%
The accommodation was comfortable	Mohale	7	0%	0%	0%	0%	100%
	Nazareth	7	14%	29%	29%	14%	14%
	Fatima	7	0%	0%	0%	0%	100%
I felt supported by my school during the clinical rotation	Mohale	7	0%	0%	0%	29%	71%
	Nazareth	7	0%	71%	14%	0%	14%
	Fatima	7	0%	0%	0%	71%	29%

Appendix A

Table 2: ROMA midwifery student response to Likert survey statements per health center in percentage (%)

	Health Centre	Number of students	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
Overall, the clinical placement was a pleasant learning experience	Louis Gerard	6	0%	0%	0%	67%	33%
	Maryland	3	0%	0%	33%	67%	0%
	St. Dennis	3	0%	0%	33%	0%	67%
	Nazareth	1	0%	0%	0%	0%	100%
The clinical site was adequately prepared to have students at the clinical placement	Louis Gerard	6	0%	0%	17%	67%	17%
	Maryland	3	0%	0%	33%	33%	33%
	St. Dennis	3	0%	33%	33%	0%	33%
	Nazareth	1	0%	0%	0%	0%	100%
I felt well prepared for the placement	Louis Gerard	6	0%	0%	33%	0%	67%
	Maryland	3	0%	33%	0%	33%	33%
	St. Dennis	3	0%	0%	0%	67%	33%
	Nazareth	1	0%	0%	0%	0%	100%
I was aware of the clinical learning objectives for this rural clinical placement	Louis Gerard	6	0%	0%	17%	17%	67%
	Maryland	3	0%	0%	0%	67%	33%
	St. Dennis	3	0%	0%	0%	67%	33%
	Nazareth	1	0%	0%	0%	100%	0%
I met my objectives to my satisfaction	Louis Gerard	6	0%	0%	17%	83%	0%
	Maryland	3	0%	0%	0%	33%	67%
	St. Dennis	3	0%	0%	33%	67%	0%
	Nazareth	1	0%	0%	0%	100%	0%
The placement assisted my learning	Louis Gerard	6	0%	0%	0%	50%	50%
	Maryland	3	0%	0%	0%	67%	33%
	St. Dennis	3	0%	0%	33%	0%	67%
	Nazareth	1	0%	0%	0%	0%	100%
The placement enhanced my clinical skills	Louis Gerard	6	0%	0%	0%	83%	17%
	Maryland	3	0%	0%	0%	33%	67%
	St. Dennis	3	0%	0%	0%	0%	100%
	Nazareth	1	0%	0%	0%	0%	100%
The placement was supportive of my professional growth	Louis Gerard	6	0%	0%	0%	17%	83%
	Maryland	3	0%	0%	0%	0%	100%
	St. Dennis	3	0%	0%	0%	0%	100%
	Nazareth	1	0%	0%	0%	0%	100%

Appendix A

Table 2: ROMA midwifery student response to Likert survey statements per health center in percentage (%)

	Health Centre	Number of students	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
There was adequate orientation provided	Louis Gerard	6	0%	0%	0%	0%	100%
	Maryland	3	0%	0%	0%	100%	0%
	St. Dennis	3	0%	0%	0%	67%	33%
	Nazareth	1	0%	0%	0%	0%	100%
The staff members were very willing and available to assist my learning	Louis Gerard	6	0%	0%	0%	17%	83%
	Maryland	3	0%	0%	0%	0%	100%
	St. Dennis	3	0%	0%	0%	0%	100%
	Nazareth	1	0%	0%	0%	0%	100%
As a result of my experience, I feel confident working in a rural clinic	Louis Gerard	6	0%	0%	0%	33%	67%
	Maryland	3	0%	0%	0%	0%	100%
	St. Dennis	3	0%	0%	0%	0%	100%
	Nazareth	1	0%	0%	0%	0%	100%
There were many learning opportunities for me in this venue	Louis Gerard	6	0%	0%	0%	83%	17%
	Maryland	3	0%	0%	33%	67%	0%
	St. Dennis	3	0%	0%	33%	0%	67%
	Nazareth	1	0%	0%	0%	0%	100%
The rural clinical had adequate supplies for me to learn	Louis Gerard	6	0%	0%	33%	33%	33%
	Maryland	3	0%	0%	33%	33%	33%
	St. Dennis	3	0%	0%	0%	100%	0%
	Nazareth	1	0%	0%	0%	100%	0%
The accommodation was comfortable	Louis Gerard	6	0%	17%	17%	0%	67%
	Maryland	3	33%	0%	33%	0%	33%
	St. Dennis	2	0%	0%	0%	50%	50%
	Nazareth	1	0%	0%	0%	0%	100%
I felt supported by my school during the clinical rotation	Louis Gerard	6	0%	17%	33%	33%	17%
	Maryland	3	0%	0%	67%	0%	33%
	St. Dennis	3	33%	0%	0%	0%	67%
	Nazareth	1	0%	0%	0%	0%	100%

Appendix B  
Map of Maseru district with location of Roma SON and health centers used for clinical placement



Appendix C

Total number of students enrolled at Roma SON for the 2012-2013 school year

Students	Male	Female	Total
1 <sup>st</sup> year students	7	26	33
2 <sup>nd</sup> year students	5	18	23
3 <sup>rd</sup> year students	3	20	23
Midwifery students	9	17	26