Before the Cap and Pin: Reflections of Level 2 Nursing Students on Readiness for Clinical Practice

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Abstract

Aim. This study aimed to explore and describe the reflections of Level 2 nursing students regarding their readiness for clinical practice prior to their capping and pinning ceremony. Specifically, the study sought to understand students' emotional responses, perceived preparedness, and the factors influencing their readiness as they anticipated their first exposure to hospital and community settings.

Methods. A qualitative research design was employed, utilizing inductive content analysis based on the framework of Elo and Kyngäs (2008). Reflective narratives were collected from 49 Level 2 Bachelor of Science in Nursing (BSN) students from a private university in Bulacan, Philippines. The data were analyzed to identify meaning units, subcategories, and categories, which were then abstracted into overarching themes representing students' perceived readiness for clinical practice.

Results. The analysis revealed seven final themes related to nursing students' readiness for clinical practice. These themes include: (1) "Ready or Not: Emotional and Professional Preparedness", highlighting the students' anxiety and emotional resilience; (2) "Growing Into Practice: Professional Development in Nursing", emphasizing the importance of hands-on experience and learning from mistakes; (3) "From Theory to Practice: Navigating the Clinical Transition", which addresses the challenges of applying classroom knowledge to real-world care; (4) "Compassion in Action: Connecting with Patients", focusing on empathy and communication in patient care; (5) "Guided by Experience: The Role of Support in Clinical Success", stressing the significance of mentorship and peer support; (6) "Thriving in the Unknown: Adaptability in Clinical Practice", highlighting the need for adaptability in real-world situations; and (7) "Responsibility in Action: Ensuring Patient Safety", underscoring accountability and ethical responsibility in clinical practice.

Conclusion. The findings underscore the multifaceted nature of nursing students' readiness for clinical practice, encompassing emotional preparedness, professional growth, and the ability to navigate the complexities of patient care. The study suggests the importance of pre-clinical orientation programs, mentorship and peer support, empathy training, and hands-on clinical experience in enhancing students' overall preparedness. The study calls for nursing education programs to integrate these elements into their curricula to better prepare students for the emotional, professional, and practical challenges of clinical practice.

Keywords: *Nursing students, clinical readiness, emotional preparedness, professional development, patient safety, mentorship, adaptability, empathy, clinical practice.*

INTRODUCTION

Nursing education plays a crucial role in preparing students to enter clinical settings as competent and compassionate healthcare professionals. Globally, the transition from academic learning to clinical practice is considered a critical juncture in nursing education—one that demands not only technical knowledge and skill but also emotional maturity, professional identity, and psychological readiness (Konlan et al., 2024). A recent qualitative study

by Ang et al. (2024) emphasized that nursing students anticipated the clinical phase with both excitement and anxiety, highlighting their concerns about competence, role expectations, and coping strategies. These findings resonated across international contexts. For instance, Basso et al. (2022) found that third-year Italian nursing students perceived their readiness for practice to have been negatively affected by disrupted clinical placements during the COVID-19 pandemic. Similarly, Chen et al. (2024), in a multicenter study across China, reported that nursing students' perceived work readiness before starting nurse residency programs was strongly influenced by emotional intelligence, prior training experiences, and motivational factors. These global insights underscored the complex and multidimensional nature of clinical readiness among nursing students.

In the Philippines, the clinical practicum has remained a defining feature of the BSN program, typically marked by the capping and pinning ceremony—a symbolic transition from theory to practice. However, much of the local literature focused on nursing students already immersed in clinical environments, particularly those in their third or fourth year of study. Very few studies examined the reflections of Level 2 BSN students who were on the cusp of their first clinical exposure. This gap was significant. Baccalaureate nursing students in the Philippines began clinical placements after their capping and pinning, yet little was known about their emotional states, expectations, and perceived preparedness before stepping into real patient care contexts. Moreover, institutional rituals such as the capping and pinning ceremony—while important symbolically—were rarely studied as moments for meaningful reflection on readiness. Without understanding how students viewed themselves at this critical stage, nursing education programs might have missed important opportunities to provide supportive transitions into practice.

This study aimed to explore and describe the reflections of Level 2 nursing students regarding their readiness for clinical practice prior to their capping and pinning ceremony. Specifically, it investigated how these students articulated their expectations, emotional responses, and perceived preparedness as they anticipated their first exposure to hospital and community settings. Using Elo and Kyngäs' (2008) inductive content analysis, this research gave voice to a group that was frequently overlooked in readiness literature. The novelty of this study lay in its proactive focus: rather than evaluating readiness post-exposure, it captured pre-exposure reflections, offering a fresh perspective into how readiness was formed, influenced, and expressed at the threshold of clinical immersion.

The findings of this study offered important contributions to nursing education by uncovering the emotional, cognitive, and contextual factors that shaped clinical readiness before practice began. These insights could help guide educators, curriculum planners, and policy makers in designing more targeted interventions—such as orientation programs, preclinical simulations, and mentoring schemes—to enhance students' preparedness and confidence. In giving voice to students in this transitional phase, the study supported the development of a more responsive and empathetic nursing education system, one that fostered not only competence but also professional identity and emotional resilience.

Objectives

This study sought to explore and describe the reflections of Level 2 nursing students regarding their readiness for clinical practice prior to their capping and pinning ceremony. Specifically, it aimed to identify how students articulated their expectations, perceived preparedness, and emotional responses as they anticipated their first hospital and community exposures. By employing Elo and Kyngäs' (2008) content analysis, the study generated categories and themes that highlighted the factors shaping students' sense of readiness and professional identity at this transitional stage.

METHODS

Research Design

This study employed a qualitative research design using inductive content analysis. A qualitative approach was deemed appropriate because the aim was to explore and describe the reflections of Level 2 nursing students on their readiness for clinical practice prior to their capping and pinning ceremony. Such experiences are subjective and context-dependent, best captured through narratives rather than numerical data (Polit & Beck, 2021).

The content analysis followed the framework of Elo and Kyngäs (2008), which provides a systematic process for organizing and interpreting textual data. In the preparation phase, reflective narratives were gathered from students using open-ended guide questions. The organizing phase involved identifying meaning units, coding, and grouping similar responses into categories. Finally, in the reporting phase, categories and themes were abstracted to represent students' perceptions and readiness.

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This design allowed for an in-depth understanding of how students articulated their expectations, anxieties, and sense of preparedness before transitioning into clinical practice. It also ensured that themes were generated directly from the data rather than imposed by predetermined frameworks, making it well-suited for capturing the authentic voices of students at this transitional stage.

Population and Sampling

The population of this study consisted of Level 2 Bachelor of Science in Nursing (BSN) students enrolled in a private university in Bulacan who were eligible for their capping and pinning ceremony and had not yet commenced hospital or community clinical exposure. This group was chosen because they represent a transitional stage in nursing education, where students are about to shift from classroom-based learning to actual patient care. Exploring their reflections at this point provides insights into expectations, perceived readiness, and professional identity formation prior to clinical immersion.

A purposive sampling technique was employed to ensure that only participants who could provide meaningful data on the phenomenon under study were included. The inclusion criteria were: (a) currently enrolled as a Level 2 BSN student, (b) eligible for capping and pinning in the current semester, (c) had not yet started hospital or community clinical exposure, (d) had no prior healthcare-related work involving direct patient care, and (e) voluntarily consented to participate. The exclusion criteria were: (a) students who had already engaged in any form of clinical exposure, (b) those with prior professional or volunteer healthcare experience involving direct patient care, (c) those on leave of absence or under academic/disciplinary sanction, and (d) those unwilling or unable to provide informed consent.

The number of participants was guided by the principle of information power, which emphasizes that adequacy in qualitative studies depends on the study aim, richness of data, and variability of responses rather than on a fixed numerical sample size (Malterud et al., 2016). Recruitment continued until sufficient variation and depth of reflections were obtained to support meaningful content analysis.

Instruments

Data for this study were gathered through a semi-structured interview guide (IGQ) developed by the researcher in alignment with the study objectives. Semi-structured questions were selected because they provide a structured framework while still allowing participants the freedom to narrate their experiences in their own words, which is essential in generating rich and authentic data (Polit & Beck, 2021). The guide was created following the principles of inductive content analysis described by Elo and Kyngäs (2008), ensuring that the questions remained open-ended, neutral, and flexible so as not to predetermine responses or restrict the emergence of new themes.

The IGQ focused on eliciting students' reflections about their thoughts, feelings, and sense of readiness for clinical practice before their capping and pinning ceremony. Each main question was paired with a non-directive probe to encourage deeper elaboration without steering the responses into fixed categories. For example, students were asked, "Can you share your thoughts and feelings as you prepare for your capping and pinning, knowing that you will soon begin your first hospital and community exposure?" A follow-up probe such as "Can you tell me more about what makes you feel that way?" was used to prompt further detail. Another question included, "Before your first clinical exposure, how would you describe your sense of readiness as a future nurse?" with a probe like "What makes you feel more prepared—or less prepared—for this transition?" Finally, to ensure that students could express anything not covered by the previous questions, the guide concluded with, "Is there anything else you would like to share about your thoughts or reflections on readiness for clinical practice that we have not yet discussed?" These open-ended prompts provided the flexibility needed to capture authentic reflections while supporting the inductive nature of the content analysis.

To establish content validity, the interview guide underwent expert validation by a panel composed of two nursing educators with expertise in research and clinical teaching, and one qualitative research specialist. They reviewed the questions for clarity, relevance, and alignment with the study objectives. Revisions were made based on their feedback to ensure that the guide was comprehensive yet non-leading, and that it encouraged participants to generate meaningful narratives. This validation process enhanced the trustworthiness and rigor of the instrument prior to its administration.

Data Collection

Data collection was conducted after securing approval from the University Ethics Review Committee (ERC) and obtaining informed consent from the participants. Eligible Level 2 BSN students were invited to participate

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through classroom announcements and online communication channels. Those who met the inclusion criteria and voluntarily agreed to join the study were provided with the informed consent form prior to data gathering.

Participants were then asked to provide their reflections using the validated semi-structured interview guide (IGQ). To ensure flexibility and comfort, responses were collected either through written narratives submitted via a secure Google Form or through individual interviews, depending on student preference. The IGQ contained open-ended questions designed to elicit thoughts, expectations, and perceived readiness prior to capping and pinning. Each session took approximately 15–20 minutes to complete.

With participants' permission, interviews were audio-recorded to ensure accuracy, while written narratives were directly documented. All responses were anonymized by assigning codes to participants instead of using their names. Data collection continued until sufficient information power was reached, ensuring that the gathered reflections provided adequate variation and depth for meaningful content analysis (Malterud et al., 2016).

Data Analysis

The data were analyzed using inductive content analysis following the framework of Elo and Kyngäs (2008). This approach was selected because it allows themes and categories to emerge directly from participants' narratives rather than being based on preconceived concepts. Inductive analysis was appropriate for the study's aim of exploring students' reflections and readiness prior to their capping and pinning ceremony.

The analysis proceeded in three phases. In the preparation phase, written narratives and interview transcripts were read repeatedly to achieve immersion and to identify the unit of analysis, which consisted of phrases or sentences that conveyed a distinct meaning related to readiness for clinical practice. In the organizing phase, meaning units were highlighted, coded, and grouped into subcategories based on similarities and differences. These subcategories were then clustered into broader categories that captured the essential dimensions of students' reflections. In the reporting phase, the categories were abstracted into themes that represented the collective experiences and perceptions of the participants.

To enhance trustworthiness, coding and categorization were reviewed by the researcher and validated by an independent qualitative research expert. Any differences were discussed until a consensus was reached. A detailed audit trail was also maintained to ensure transparency in the analytic process.

Ethical Considerations

This study adhered to the ethical standards for research involving human participants as outlined by the Philippine Health Research Ethics Board (PHREB) and the University Ethics Review Committee (ERC). Informed consent was secured from all participants after they were provided with clear information on the study's purpose, procedures, risks, and benefits. Participation was voluntary, and students were informed of their right to withdraw at any time without academic penalty. Confidentiality and anonymity were strictly maintained by assigning codes instead of names in all transcripts and reports. Data were stored securely and used solely for research purposes. To minimize potential risk, questions were framed to focus only on reflections about readiness, without probing into sensitive personal matters.

RESULTS and DISCUSSION

This study aimed to explore the pre-clinical perceptions and emotional dispositions of Level 2 nursing students regarding their readiness for clinical practice, specifically before their capping and pinning ceremony. Despite the significant emphasis on clinical exposure in nursing education, limited research has focused on the reflections of students at this transitional stage, particularly those who have not yet had direct patient care experiences. By capturing these early perceptions, the study aimed to bridge this gap and provide insights into the expectations, anxieties, and readiness of nursing students as they prepare to enter real-world clinical environments.

The study involved 49 Level 2 Bachelor of Science in Nursing students from a private university in Bulacan, who met the inclusion criteria of having no prior clinical exposure. Data were gathered through reflective narratives, which were analyzed using qualitative content analysis based on the framework of Elo and Kyngäs (2008). This approach allowed the themes to emerge naturally from the students' personal accounts, ensuring an authentic representation of their readiness and experiences. The findings contribute to the existing literature by shedding light on the emotional and cognitive factors influencing clinical preparedness, and offer valuable implications for nursing educators and curriculum developers in supporting students during this critical transition.

The study highlights the multifaceted nature of nursing students' readiness for clinical practice as they transition from academic learning to real-world patient care. Several key themes emerged from the students'
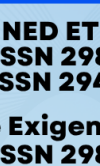
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reflections, each reflecting different aspects of their emotional preparedness, professional development, and the challenges they anticipate in clinical settings. The total numbers developed from the analysis are as follows: 7 Final Themes, 15 categories, 29 subcategories, and 96 meaning units. These numbers reflect the depth and complexity of the students' responses and provide a comprehensive view of their perceived readiness for clinical practice.

Table 1
Subcategory, Category, and Final Theme (Audit Trail)

Subcategory	Category	Final Theme
Anxiety	Readiness and Uncertainty	"Ready or Not: Emotional and Professional Preparedness"
Uncertainty		
Confidence in Applying Knowledge	Emotional and Mental Preparedness	
Emotional Challenges		
Learning Through Experience	Professional Development	"Growing Into Practice: Professional Development in Nursing"
Growth Through Clinical Experience		
Critical Thinking Development		
Mistakes as Learning Opportunities	Learning from Mistakes	
Confidence Building Through Practice	Confidence and Competence	
Unpredictability of Real Situations	Real-world learning	"From Theory to Practice: Navigating the Clinical Transition"
Transition from Theory to Practice		
Real-World Responsibility		
Anticipation of Real-World Challenges	Transition and Challenges	
Empathy in Patient Care	Compassion and Communication	"Compassion in Action: Connecting with Patients"
Communication with Patients		
Professional Compassion		
Rapport Building	Patient Interaction and Emotional Intelligence	
Support from Clinical Instructors	Support Systems and Confidence Building	"Guided by Experience: The Role of Support in Clinical Success"
Peer Support		
External Support Systems	Readiness and Support	
Need for Guidance in Real-Life Situations		
Uncertainty About Readiness	Uncertainty and Preparedness for Practice	"Thriving in the Unknown: Adaptability in Clinical Practice"
Fear of Making Mistakes		
Adaptability to Real-World Situations	Adaptability and Growth	
Learning Through Experience		
Accountability in Patient Care	Responsibility in Patient Care and Accountability	"Responsibility in Action: Ensuring Patient Safety"
Patient Safety		
Ethical Responsibility	Professionalism and Safety	
Importance of Following Guidelines		

Table 1 presents the key subcategories, categories, and final themes derived from the reflections of nursing students regarding their readiness for clinical practice. Each final theme encompasses several related subcategories, which are grouped under specific categories that highlight the various dimensions of students' emotional, professional, and practical preparedness.

Theme 1: Ready or Not: Emotional and Professional Preparedness

This theme captures the emotional and professional readiness of nursing students as they prepare for their first clinical exposure. While students feel confident in their academic knowledge and skills, emotional and mental preparedness remain crucial for their overall readiness. Students experience a blend of excitement and anxiety, acknowledging that the transition from classroom learning to real-world patient care involves both cognitive and emotional challenges. The theme is organized into two categories: Readiness and Uncertainty and Emotional and Mental Preparedness. Each category is further divided into subcategories that highlight different dimensions of students' perceptions and reflections about their clinical readiness. Note: In presenting the findings, participants are denoted using the code S#, where "S" refers to the student and "#" corresponds to their assigned number (e.g., S1, S2). The verbatim statements enclosed in quotation marks reflect the students' authentic voices, which were directly drawn from their reflective narratives.

Readiness and Uncertainty

This category encompasses students' anxiety and uncertainty as they anticipate clinical practice. The anxiety subcategory highlights the emotional challenges students face when considering the responsibility of real patient care. Many students expressed mixed emotions about the transition. For example, S1 stated, "Excited and nervous about stepping into clinical practice," reflecting the excitement tempered by nervousness about making mistakes in real clinical settings. The fear of making mistakes was further emphasized by S1, who also shared, "Worried about making mistakes." These statements illustrate the emotional complexity students experience as they approach the unpredictability of clinical practice.

The uncertainty subcategory further underscores students' doubts about their ability to apply classroom learning to real-world scenarios. For instance, S1 reflected, "Feeling somewhat prepared due to the skills and lessons practiced in school," yet still expressed uncertainty: "still unsure about how they will apply to real-life situations." This concern about applying theoretical knowledge in dynamic clinical environments was echoed by S36, who noted, "The unpredictability of patient care makes me nervous, but I'll adapt," highlighting both the anxiety and tentative confidence students feel as they prepare for patient care.

Emotional and Mental Preparedness

The second category delves into the psychological aspect of readiness, focusing on students' emotional challenges and their growing emotional and mental preparedness through experience. The emotional challenges subcategory highlights students' concerns about handling the emotional weight of patient care, especially dealing with patient suffering. S35 stated, "Nervous about handling emotional aspects of nursing," reflecting a common fear of the emotional demands of the role. S8 expanded on this, asserting that "Emotional readiness is crucial, especially for patient suffering," emphasizing the importance of emotional resilience when managing patients in distressing situations.

The learning through experience subcategory underscores students' recognition that emotional and mental preparedness is developed progressively through hands-on clinical exposure. S2 expressed, "Prepared to learn, adapt, and grow through experience," demonstrating that students view clinical practice as essential for emotional growth. Similarly, S23 stated, "I feel confident, but I know that emotional and mental preparedness is something I will continue to develop as I gain more exposure." This sentiment indicates students' understanding that emotional readiness is not a fixed trait but an evolving process, shaped by direct experience with patient care.

This theme reveals nursing students' paradoxical state: confidence in theoretical knowledge coexists with significant anxiety about clinical practice. Ang et al. (2024) reported similar findings, where students anticipated clinical practice with both enthusiasm and apprehension regarding competence and role expectations. The fear of making mistakes transcends cultural contexts, as Chen et al. (2024) found that perceived work readiness among Chinese nursing students was strongly influenced by emotional intelligence and prior training, suggesting structured emotional preparation may mitigate uncertainty. Students' doubts about applying classroom learning to unpredictable situations reflect transitional identity formation. Basso et al. (2022) found that Italian students whose clinical placements were disrupted during COVID-19 reported diminished readiness, suggesting anticipatory anxiety may be preferable to absence of exposure. Konlan et al. (2024) reinforced through concept analysis that clinical readiness encompasses psychological preparedness alongside cognitive and psychomotor competencies. Additionally, Mikkonen et al. (2020) demonstrated that students' sense of coherence and self-efficacy significantly predicted clinical learning outcomes, underscoring the protective role of emotional self-awareness in navigating transitions.

The recognition that emotional readiness develops progressively demonstrates metacognitive awareness that positions students to seek support and remain receptive to learning. These findings indicate clinical readiness

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must encompass technical competence, emotional resilience, and adaptive capacity, requiring nursing education to normalize emotional responses while providing concrete anxiety management strategies before clinical encounters.

Theme 2: Growing Into Practice: Professional Development in Nursing

Theme 2 reflects the critical role of clinical practice in the professional development of nursing students. It underscores the importance of hands-on experience in building competence, confidence, and critical thinking. The theme is structured around three main categories: Professional Development, Learning from Mistakes, and Confidence and Competence, each with relevant subcategories that illustrate the multifaceted nature of growth in clinical practice. The theme highlights that professional development is not merely about acquiring technical skills, but also about refining critical thinking, learning from errors, and building confidence through real-world patient care experiences.

Professional Development

The category of Professional Development focuses on the growth students experience through direct exposure to clinical environments. Learning Through Experience is a subcategory that emphasizes the value of hands-on practice in developing nursing competencies. S17 expressed, "Growth comes from exposure and hands-on experience, not just from textbooks," which underscores the idea that while theoretical learning is foundational, real-world experience is essential for developing practical skills. This sentiment is echoed by S9, who noted, "Clinical practice will teach me things that textbooks can't. I look forward to learning from actual patients." These reflections suggest that students view clinical exposure as crucial for enhancing their nursing abilities beyond classroom learning.

Growth Through Clinical Experience highlights the transformative nature of clinical placements. S35 pointed out, "Real-world care will challenge me to develop skills beyond what we learned in class," indicating that clinical practice requires students to adapt and expand their skills in response to the complexities of patient care. Similarly, S14 shared, "I know I have room to grow, but I'm confident in the foundation we've built so far," which reflects a sense of readiness and optimism as students acknowledge that ongoing development will occur through clinical practice.

Critical Thinking Development is another key component of professional growth. Students recognize that clinical practice helps to refine their decision-making and problem-solving abilities. S31 expressed, "I'm looking forward to improving my decision-making and critical thinking skills," which illustrates how students see real-world scenarios as opportunities to strengthen these crucial competencies.

Learning from Mistakes

The Learning from Mistakes category emphasizes that errors in clinical settings are not failures but opportunities for growth and improvement. The subcategory Mistakes as Learning Opportunities reflects the students' understanding that mistakes are an inevitable part of their professional development. S2 highlighted, "Mistakes are an opportunity for improvement," while S33 echoed, "Mistakes will help me grow into a better nurse." These statements reveal that students view mistakes as essential components of the learning process, crucial for refining their skills and enhancing their clinical judgment. S29 also shared, "Mistakes are inevitable, but I believe they are opportunities to learn and improve," reinforcing the belief that errors are necessary for continuous learning and improvement in nursing practice.

Confidence and Competence

The Confidence and Competence category centers on how clinical practice helps students build self-assurance in their skills and their professional identity. The subcategory Confidence Building Through Practice illustrates how exposure to real patient care fosters both confidence and competence. S14 emphasized, "The more we practice, the more competent we'll become," underscoring the importance of hands-on experience in developing proficiency. S24 further expressed, "Continuous learning is key to becoming a better nurse," indicating that sustained clinical exposure allows students to gain confidence as they continuously refine their skills. This belief in the value of practice is reflected in S25's statement, "Through continuous exposure, I know I will refine my skills and become more effective," highlighting the ongoing nature of learning in clinical environments.

According to Ang et al. (2024), nursing students' professional development is greatly enhanced by direct exposure to clinical settings, where they can apply theoretical knowledge and develop practical skills. This is consistent with students' reflections, such as S17, who noted, "Growth comes from exposure and hands-on experience, not just from textbooks." Similarly, Basso et al. (2022) highlighted that clinical practice plays a transformative role in students' competence development. They found that nursing students perceived real-world

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patient care as crucial for refining their clinical decision-making and problem-solving abilities. Chen et al. (2024) also identified that critical thinking and decision-making are refined through clinical experiences. Their study emphasized that students who actively engage with real patient care situations show significant improvements in clinical reasoning and overall professional confidence.

Confidence building emerges through repeated, guided clinical practice. Carless-Kane et al. (2023) found that structured supervision and quality mentorship significantly improve nursing students' competence and self-assurance during clinical placements. These findings align with the observed necessity for supportive learning environments facilitating professional growth. The emphasis on critical thinking development through clinical practice resonates with Mikkonen et al.'s (2020) evidence-based mentoring model, which highlighted that quality supervision and supportive clinical environments facilitate students' development of clinical reasoning and decision-making abilities. However, organizational culture significantly influences whether mistakes become learning opportunities or sources of shame, underscoring the need for psychologically safe clinical environments where students can openly discuss challenges without harsh judgment. These findings indicate nursing education must intentionally foster cultures of constructive feedback, reflective practice, and continuous improvement to support students' professional development throughout clinical training.

Theme 3: From Theory to Practice: Navigating the Clinical Transition

Theme 3 focuses on the challenges and growth nursing students experience as they transition from classroom learning to real-world patient care. This transition involves more than just applying theoretical knowledge to practice—it requires students to adapt to the unpredictability of clinical settings, manage the responsibilities of patient care, and face the inherent challenges of real-world practice. The theme is divided into two main categories: Real-world Learning and Transition and Challenges, each with its own subcategories that reflect the complex nature of this shift.

Real-world Learning

The category Real-world Learning captures the dynamic nature of clinical practice and the critical differences between theoretical education and the unpredictable, fast-paced world of patient care. The Unpredictability of Real Situations subcategory highlights students' awareness that patient care in clinical settings will often be chaotic and unpredictable, far removed from the controlled classroom environment. S22 noted, "Classroom experiences are predictable, but in clinical settings, patient care is unpredictable," signaling the challenges students anticipate when faced with real-life situations. S11 echoed this concern, saying, "The transition feels complex and will require immediate adaptation," reflecting students' recognition that they must quickly adapt to the fluid nature of clinical practice.

The Transition from Theory to Practice subcategory further explores how students perceive the shift from academic learning to real-world care. S5 shared, "The transition feels complex and will require immediate adaptation," emphasizing the steep learning curve students expect when moving from classroom-based simulations to actual patient care. This complexity arises from the need to translate theoretical knowledge into effective practice in a highly variable environment. S22 reflected, "Patient care in clinical practice will be more unpredictable than what we experienced in the classroom," signaling that students are aware of the challenges in applying what they have learned in the classroom to real patients. Despite these challenges, S36 expressed readiness: "The unpredictability of real situations worries me, but I'm ready to face it," illustrating students' resolve to navigate these uncertain circumstances.

The Real-World Responsibility subcategory emphasizes the emotional and ethical weight of patient care. S26 noted, "Handling real patients is a new responsibility," indicating that students understand the seriousness of patient care, where mistakes can have significant consequences. S11 captured this sense of responsibility by stating, "Realizing that mistakes can't happen when dealing with patients' lives," highlighting the high stakes students anticipate as they begin their clinical experiences.

Transition and Challenges

The category Transition and Challenges focuses on the emotional and cognitive hurdles students face as they move from the theoretical, structured classroom environment to the unpredictable nature of clinical practice. The Anticipation of Real-World Challenges subcategory illustrates students' awareness of the difficulties they will encounter in clinical settings. S17 shared, "The classroom is controlled, but the real-world care setting will require more adaptability," signaling that students know clinical practice will demand greater flexibility and problem-solving skills than the classroom. Similarly, S30 expressed, "Transitioning from the structured learning environment of class to real patient care is intimidating," reflecting the anxiety students feel about the unknowns of clinical practice.

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The emotional complexity of this transition is also captured in S3's statement: "I'm excited about the shift, but I'm also nervous about how different clinical care will be from the classroom." This blend of excitement and nervousness highlights the anticipation of the challenges ahead. S32 expressed, "From theory to practice, I know it will be a challenging but rewarding experience," showing that while students expect difficulty, they also look forward to the growth opportunities clinical practice provides.

The Anticipation of Real-World Challenges subcategory also reflects the uncertainty students feel about applying their knowledge in unpredictable settings. S4 commented, "The real challenge will be applying all we've learned in a setting where every patient is different," illustrating that students are aware that clinical situations are not uniform and require adaptability. S33 echoed this by saying, "I feel ready for the transition, but I know it's going to be a steep learning curve," recognizing that the shift to clinical practice will be a continuous process of learning and adjustment.

Students' reflections revealed significant concerns about the unpredictability of real-world care and the challenges of applying theoretical knowledge in dynamic patient care environments. Their recognition that "patient care in clinical practice will be more unpredictable than what we experienced in the classroom" aligns with Mbakaya et al.'s (2020) mixed-method study, which identified the theory-practice gap as a persistent barrier to nursing students' clinical competence development in Malawi. Students frequently struggled to transfer classroom knowledge to authentic clinical contexts where patient presentations were variable and situations demanded immediate adaptation. The emotional weight students attached to "real-world responsibility" and their awareness that "mistakes can't happen when dealing with patients' lives" reflects findings from Arkan et al.'s (2018) study, which revealed that nursing students experienced significant psychological burden when confronting the transition from simulated to actual patient care. Students described feeling overwhelmed by the gravity of responsibility and the realization that their actions directly impacted human lives. Similarly, Missen et al. (2016) found that Australian nursing graduates reported feeling unprepared for the transition from student to registered nurse, citing difficulties in managing clinical complexity and applying theoretical knowledge to unpredictable situations.

Despite these challenges, students expressed determination: "I'm ready to face it" and "it will be a challenging but rewarding experience." This constructive orientation suggests that pre-clinical reflection may facilitate psychological preparation for the transition. Papastavrou et al. (2016) demonstrated that positive clinical learning environments and supportive mentorship significantly enhanced students' ability to navigate theory-practice integration, suggesting that institutional support mechanisms can mediate transition-related stress. These findings underscore the necessity for structured transition support, including enhanced simulation training, gradual clinical immersion, and reflective debriefing that explicitly addresses the theory-practice interface.

Theme 4: Compassion in Action: Connecting with Patients

Theme 4 focuses on the essential role of empathy, communication, and emotional intelligence in nursing practice. As nursing students transition from classroom learning to clinical exposure, they recognize that nursing care involves more than technical skills—it also requires emotional engagement and the ability to connect with patients on a deeper, more compassionate level. This theme is structured around two key categories: Compassion and Communication and Patient Interaction and Emotional Intelligence, each highlighting different facets of how students aim to engage with patients during their clinical experiences. Through empathy, communication, and emotional intelligence, students strive to provide care that addresses both the physical and emotional needs of patients.

Compassion and Communication

The Compassion and Communication category emphasizes the integral role of empathetic interactions and clear communication in providing compassionate care. The Empathy in Patient Care subcategory focuses on the importance of understanding and sharing the feelings of others. S16 noted, "Being empathetic is vital for connecting with patients and helping them through tough times," highlighting that empathy is crucial for building strong, trusting relationships with patients, especially when they are facing difficult circumstances. S6 reinforced this by stating, "Patient care means more than technical skills—compassion is key," indicating that while technical knowledge is important, it is compassion that truly makes a difference in patient care.

The Communication with Patients subcategory emphasizes the necessity of clear, compassionate communication in nursing practice. S16 expressed, "Communication with patients will be a challenge," recognizing that patient interactions often involve more than just conveying information—nurses must also understand and respond to emotional cues. S21 expanded on this, saying, "Every patient is different, so I need to adjust my communication style for each one," which reflects the importance of adapting communication methods based on the individual needs of patients. S24 echoed this, stating, "Listening to patients and understanding their needs will be

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crucial in providing care," demonstrating that active listening is an essential skill for fostering trust and ensuring that patients feel heard and valued.

The Professional Compassion subcategory emphasizes how nurses' professional roles are deeply intertwined with compassion. S7 shared, "I want to be a safe nurse in the future, focused on compassionate care," signaling a desire to integrate empathy into the foundation of their nursing practice. Similarly, S18 stated, "Empathy will help me be a better nurse, and I want to show that every day," demonstrating a commitment to making compassion a central aspect of their professional identity. Moreover, S23 stressed, "Caring for patients will require not just skills but also compassion," reinforcing the idea that patient care involves both technical competence and emotional support, and that true professionalism in nursing includes compassion for both the patient and their family.

Patient Interaction and Emotional Intelligence

The Patient Interaction and Emotional Intelligence category highlights the need for emotional awareness and strong interpersonal skills in nursing practice. The Rapport Building subcategory focuses on the importance of establishing trust and respect with patients. S13 emphasized, "Building rapport with patients is key to providing compassionate care," recognizing that effective patient care begins with forming a trusting relationship, which facilitates better communication and positive outcomes. S16 expressed a similar sentiment, stating, "I want to make every patient feel heard and cared for," underscoring the importance of attentive and compassionate communication to ensure patients feel supported throughout their care.

This rapport-building process is closely linked to the development of emotional intelligence, a key component in nursing. Emotional intelligence involves the ability to perceive, understand, and manage emotions, both in oneself and in others, and is essential for effective patient care. S23 noted, "I know that a patient's trust is earned through compassion and communication," highlighting how emotional intelligence is crucial for establishing trust and fostering strong, supportive relationships with patients. By cultivating emotional intelligence, students recognize that they will be better equipped to navigate the emotional complexities of patient care, particularly in difficult or high-stress situations.

The students echoed findings from literature that emphasize the importance of emotional intelligence in patient interactions. Studies have shown that emotional intelligence enables nurses to navigate complex emotional dynamics in patient care, improving both patient satisfaction and clinical outcomes (Chen et al., 2024). Similarly, research on nursing students reveals that the ability to understand and manage emotions is critical for effective communication and patient-centered care (Basso et al., 2022). Moreover, students acknowledged that adapting communication strategies to meet the diverse needs of patients was key to ensuring effective care. This aligns with the work of Konlan et al. (2024), who highlighted that adaptability in communication is crucial in handling diverse patient populations. By adjusting their approach based on individual patient needs, students recognized that they could foster a more supportive and trusting environment for care. In conclusion, compassion in nursing involves not just technical skills but also the ability to emotionally connect with patients. This requires empathy, emotional intelligence, and effective communication, all of which should be emphasized in nursing education to prepare students for the emotional complexities of patient care.

Theme 5: Guided by Experience: The Role of Support in Clinical Success

Theme 5 explores the pivotal role of various support systems in ensuring nursing students' success during their clinical experiences. This theme emphasizes that while technical competence is essential, the support and guidance students receive from instructors, peers, and external networks are crucial for building confidence and navigating the emotional complexities of clinical practice. The theme is divided into two main categories: Support Systems and Confidence Building and Readiness and Support, each of which reflects different aspects of how support influences clinical success.

Support Systems and Confidence Building

The Support Systems and Confidence Building category highlights the importance of guidance from clinical instructors and peer support in fostering students' development and confidence. The Support from Clinical Instructors subcategory underscores the significant role that instructors play in providing mentorship, guidance, and feedback. S18 shared, "Guidance from clinical instructors will help me grow," reflecting the belief that clinical instructors are essential in supporting students through challenging clinical situations. S13 further emphasized, "I trust that my instructors will guide me through any challenges," indicating a deep reliance on instructors' expertise to help them navigate the complexities of patient care.

The Peer Support subcategory focuses on the value of peer relationships in clinical settings. S19 remarked, "Peer support will help us stay motivated and focused during the transition," recognizing that students draw
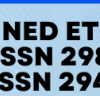
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emotional and professional strength from one another. Similarly, S33 highlighted, "Mentorship will help me stay grounded and focused on improving my skills," indicating that peer mentorship provides both emotional reassurance and academic support, which are vital during stressful clinical experiences. Peer support creates a sense of community and collective learning that is crucial for building both confidence and competence.

Readiness and Support

The Readiness and Support category addresses broader support mechanisms, such as external systems and ongoing guidance, which contribute to students' preparedness for clinical practice. The External Support Systems subcategory emphasizes the role of family, friends, and other outside sources in helping students manage the pressures of clinical placements. S22 shared, "Support from my family keeps me motivated and focused," underscoring the emotional encouragement and stability provided by personal relationships. These external support systems play an essential role in maintaining students' mental well-being, ensuring that they stay motivated and focused throughout their clinical experience.

The Need for Guidance in Real-Life Situations subcategory highlights the ongoing need for mentorship when students face real-world patient care challenges. S9 expressed, "I'll need guidance during clinical, especially with patient care," reflecting the understanding that hands-on experience in clinical settings often presents situations that require immediate professional input. S25 added, "The first clinical experiences will be tough, but I'm confident the support I'll receive will help me succeed," emphasizing the reliance on guidance from instructors and peers to navigate the challenges of real patient care.

The pivotal role of clinical instructors as mentors, providers of feedback, and guides during challenging clinical situations echoes findings by Aryuwat et al. (2024), who highlighted that supportive instructors significantly enhance nursing students' emotional strength and motivation throughout clinical placements. Similarly, Gularte-Rinaldo et al. (2022) demonstrated that sustained mentorship increases nursing students' self-confidence and problem-solving abilities, particularly when maintained over long-term mentorship relationships. Peer support emerged as an equally important element in fostering confidence and managing the stress of clinical practice. Hamarash et al. (2025) found that peer-assisted learning not only improves clinical skills but also alleviates anxiety by creating a collaborative and supportive learning environment. This corroborates the reflective narratives of students relying on peers for motivation, focus, and emotional backing. Furthermore, Watson (2025) emphasized that peer networks scaffold nursing practice by contributing essential emotional and practical support throughout the clinical learning journey. This finding aligns with Manaloto's (2020) exploration of doctorally prepared nurse educators, where mentorship and peer support were pivotal in navigating the challenges of professional development. Similarly, in this study, nursing students reported that guidance from clinical instructors and peer support systems was essential for managing stress and building confidence in their clinical practice.

The significance of external support from family and friends aligns with Aryuwat et al. (2024), who identified family encouragement as a continuous source of positive energy that sustains nursing students' resilience amid clinical challenges. This multifaceted support system collectively reinforces students' readiness and perseverance in clinical settings. In sum, the findings affirm that clinical success is not solely contingent on individual competence but critically depends on comprehensive support systems. Educational programs should thus intentionally cultivate mentorship, peer support, and engagement with students' broader social networks to promote resilience, confidence, and professional growth in clinical practice.

Theme 6: Thriving in the Unknown: Adaptability in Clinical Practice

Theme 6 highlights the essential role of adaptability in nursing students' transition from classroom learning to clinical practice. Students recognize the uncertainty and challenges they will face as they move into real-world patient care settings. This theme is divided into two main categories: Uncertainty and Preparedness for Practice and Adaptability and Growth, each with relevant subcategories that reflect how students anticipate and respond to the unpredictable nature of clinical environments.

Uncertainty and Preparedness for Practice

The Uncertainty and Preparedness for Practice category captures the mixed emotions of nursing students as they approach their clinical placements. The Uncertainty About Readiness subcategory reflects students' feelings of not being fully prepared for the clinical demands ahead. S6 stated, "Not fully ready, but committed to improving," which illustrates the recognition of their gaps in preparedness while also expressing a strong commitment to growth. Similarly, S18 shared, "Challenging transition with a lack of confidence," signaling the emotional and cognitive challenges many students anticipate as they move from theory to practice. These reflections highlight the natural uncertainties that arise when stepping into the unpredictable world of patient care.
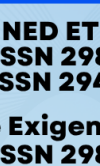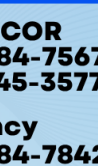
The Fear of Making Mistakes subcategory addresses students' concerns about the consequences of errors in clinical practice. S36 expressed, "The unpredictability of patient care makes me nervous, but I'll adapt," emphasizing the nervousness that accompanies the potential for mistakes, while also demonstrating an optimistic approach to handling these challenges. S48 further echoed this sentiment, stating, "I'm not completely prepared, but I'll learn by doing," illustrating that, despite feeling unprepared, students are determined to learn from experience. This reflects a willingness to embrace uncertainty and trust in the process of growth through practice.

Adaptability and Growth

The Adaptability and Growth category focuses on students' awareness that adaptability will be key to thriving in clinical settings. The Adaptability to Real-World Situations subcategory highlights the importance of flexibility and the ability to adjust to changing circumstances in patient care. S42 noted, "Being adaptable is key, especially with the uncertainty we'll face in clinical settings," which emphasizes the critical role of adaptability in navigating clinical practice. Similarly, S27 stated, "I know it's normal to feel unsure, but I'm ready to adapt and grow," indicating that students understand uncertainty is a natural part of the transition but are prepared to face it head-on.

The Learning Through Experience subcategory underscores how students anticipate growth through direct exposure to clinical situations. S39 shared, "I expect to feel unprepared at first, but I'll adapt and improve," reflecting an awareness that the early stages of clinical practice may be difficult, but they view these challenges as opportunities to learn and develop. S24 also expressed, "I'm nervous, but I trust that I'll learn to handle unpredictable situations," showing that students are both realistic about the challenges they will face and confident that experience will help them become more capable and self-assured.

Additionally, S33 highlighted, "Every action matters and will be a learning opportunity," reflecting a mindset that values the continuous process of learning through every interaction and experience. S28 further reinforced this with, "It's scary, but I know I'll adjust as I gain more experience," suggesting that, although they are nervous, students recognize that adaptation will come with time and practice. S32 echoed this, saying, "I know there will be times when I feel lost, but I'm ready to adapt," demonstrating a level of self-awareness and resilience in the face of uncertainty.

Finally, the Adaptability to Real-World Situations subcategory was further illustrated by S23, who noted, "Adaptability is essential, as no two patients will be the same," highlighting the individualized nature of patient care and the need for flexibility when responding to diverse patient needs.

The category of Uncertainty and Preparedness for Practice reflects students' mixed emotions about readiness, typified by anxiety about gaps in skills and knowledge coupled with commitment to improvement. This aligns with Aryuwat et al. (2024), who found nursing students experience vulnerability and uncertainty as they confront the complex realities of clinical practice, underscoring the need for supportive educational environments to bolster resilience and confidence. Their findings parallel students' fears of making mistakes and the nervousness inherent in adapting to clinical complexity. Ang et al. (2024) also noted that nursing students' ability to recognize and regulate their emotions helps them navigate the anxiety and fear associated with clinical exposure, as seen in students' concerns about making mistakes.

Chen et al. (2024) emphasized that adaptability and emotional resilience enable students to better cope with the unpredictability of real-world clinical settings. This resonates with the students' reflections on their ability to adapt despite feeling unprepared, such as S36's statement, "The unpredictability of patient care makes me nervous, but I'll adapt," Mikkonen et al. (2020) also highlighted that adaptability was a significant predictor of clinical learning outcomes, affirming that students who embraced uncertainty were more likely to thrive in clinical settings. Their evidence-based mentoring model suggested that nurturing adaptability through mentoring and real-time clinical experiences contributes to the development of critical thinking and decision-making skills. These studies corroborate the findings of this research, underscoring the multifaceted nature of clinical preparedness, where emotional resilience, adaptability, and a growth mindset play essential roles in shaping students' readiness for clinical practice.

Theme 7: Responsibility in Action: Ensuring Patient Safety

The theme centers on the significance of accountability and professionalism in nursing students' clinical practice. This theme is structured around two main categories: Responsibility in Patient Care and Accountability, which includes the subcategories Accountability in Patient Care and Patient Safety, and Professionalism and Safety, which encompasses the subcategories Importance of Following Guidelines and Ethical Responsibility. The first category emphasizes the personal responsibility students feel for patient outcomes and their awareness of the
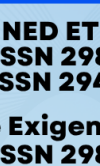
consequences of their actions, while the second underscores the importance of maintaining high professional standards, particularly through adherence to safety protocols and ethical decision-making.

Responsibility in Patient Care and Accountability

The Responsibility in Patient Care and Accountability category emphasizes the weight of responsibility nursing students feel when it comes to providing safe and effective care. The Accountability in Patient Care subcategory focuses on how students recognize the importance of being accountable for their actions in clinical settings. S19 shared, "Being accountable for my actions is crucial in patient care," underscoring the importance of personal responsibility in ensuring quality patient outcomes. Similarly, S35 stated, "I know that patient safety is my top priority as a nurse," emphasizing that students view patient safety as their primary duty. This sense of responsibility is echoed by S29, who noted, "I need to always be mindful of patient safety and how my actions can affect them," highlighting students' awareness of how their decisions can impact patient well-being.

The Patient Safety subcategory further reinforces the significance of patient safety in nursing practice. S25 stated, "Safety is the most important thing when dealing with patients," underscoring the critical role that safety plays in every aspect of patient care. S7 shared, "I want to provide the best care and be a safe nurse," which reflects a commitment to ensuring that patients receive both competent and safe care. S44 captured the gravity of this responsibility, saying, "Mistakes have greater consequences in real settings," emphasizing that in clinical practice, the stakes are much higher, and the potential consequences of errors are significant.

Professionalism and Safety

The Professionalism and Safety category underscores the need for nurses to maintain high levels of professionalism in all aspects of their practice, particularly when it comes to patient safety. The Importance of Following Guidelines subcategory emphasizes that adhering to established protocols and safety guidelines is a key aspect of professional nursing practice. S18 expressed, "I'll focus on being vigilant and safe, as patient care can't afford mistakes," signaling the importance of attentiveness and strict adherence to safety measures in preventing harm. S32 also remarked, "I must constantly ensure that patient safety is prioritized in every task," which reflects students' commitment to ensuring safety in every aspect of care delivery.

The Ethical Responsibility subcategory further emphasizes the ethical obligations nurses have in maintaining patient safety. S36 expressed, "The responsibility of patient care is heavy, but I'm determined to handle it well," showing that despite the challenges, students are committed to ensuring patient safety. S9 highlighted, "In clinical practice, the safety and well-being of patients must always come first," reiterating that patient safety is a fundamental aspect of nursing practice.

This finding aligns with recent studies that emphasize the critical role of patient safety in shaping nursing students' professional development. Mikkonen et al. (2020) reinforced the idea that patient safety and ethical responsibility are central to students' clinical practice. Their study highlighted how quality mentorship and clear safety protocols contribute to fostering a culture of safety in clinical environments, which mirrors students' reflections on the significance of adhering to safety protocols and ensuring patient well-being. Similarly, Chen et al. (2024) found that nursing students' readiness to assume responsibility for patient care is closely linked to their emotional intelligence and prior training. In their study, they emphasized that the ability to make sound ethical decisions is foundational to ensuring patient safety, which aligns with the students' emphasis on ethical responsibility in clinical care, as exemplified by S35's statement, "I know that patient safety is my top priority as a nurse."

Basso et al. (2022) also noted the heightened sense of responsibility among nursing students, particularly when dealing with real patients. Their study found that students who are aware of the consequences of their actions in patient care are more likely to adopt a vigilant and conscientious approach to clinical practice. This finding supports students' concerns about the weight of responsibility, as seen in statements such as "Mistakes have greater consequences in real settings," reflecting an acute awareness of the ethical stakes involved in patient care (S44).

Ang et al. (2024) further corroborate these findings by arguing that nursing students' ability to balance technical skills with ethical decision-making directly impacts their clinical effectiveness. They observed that students who demonstrated a commitment to patient safety were more likely to provide high-quality care, even in complex and unpredictable situations. This aligns with the students' reflections on their responsibilities, particularly regarding their commitment to "always be mindful of patient safety and how my actions can affect them" (S29), which illustrates the students' ethical approach to clinical care. These studies highlight the pivotal role that ethical responsibility, professionalism, and adherence to safety protocols play in nursing students' clinical preparedness, validating the emphasis placed on patient safety in this theme.

Table 2.
Summary of Findings/ Recommended Actions/ Implications

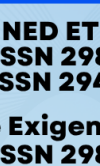| Significant Result (Theme/Subtheme)	Description of Findings	Recommended Actions/Interventions/ Policy/Program	Implications
Theme 1: "Ready or Not: Emotional and Professional Preparedness"	Students expressed anxiety and uncertainty about clinical practice, highlighting emotional readiness and the mental challenges they anticipate. They recognized the need for both technical competence and emotional resilience.	Develop pre-clinical orientation programs focused on emotional resilience, stress management, and building confidence through simulation-based learning.	This suggests a need for emotional preparedness programs to address anxiety and build confidence before clinical exposure, ensuring smoother transitions into practice.
Subtheme: Anxiety & Uncertainty	Students expressed mixed emotions of excitement and anxiety, fearing mistakes and uncertain about their clinical readiness.	Implement targeted interventions like peer mentoring and mock clinical scenarios to build students' confidence in handling real-world patient care.	Addressing uncertainty early in nursing education will allow students to enter clinical practice more prepared and confident, potentially reducing anxiety.
Theme 2: "Growing Into Practice: Professional Development in Nursing"	Students recognized the importance of hands-on experience in building competencies, developing critical thinking, and learning from mistakes during clinical exposure.	Enhance clinical placements with more supervised practice opportunities and real-time feedback to support skill-building and growth.	Hands-on clinical experience is critical for professional development, ensuring that students can transition from theory to real-world practice effectively.
Subtheme: Learning from Mistakes	Students viewed clinical mistakes as inevitable and valuable learning opportunities.	Foster a culture of constructive feedback through debriefing sessions to discuss mistakes as learning opportunities.	Encouraging learning from mistakes cultivates a growth mindset and reduces the fear of errors, promoting more effective patient care.
Theme 3: "From Theory to Practice: Navigating the Clinical Transition"	Students anticipated challenges in applying classroom knowledge to unpredictable real-world patient care situations. They also emphasized the weight of real-world responsibility.	Implement transition programs to bridge theory and practice, providing guided clinical rotations and preparation seminars for students.	A structured transition program helps students build confidence and adaptability before clinical exposure, improving clinical readiness.
Subtheme: Unpredictability of Real Situations	Students recognized the unpredictability of clinical care, feeling anxious about their ability to adapt and apply knowledge effectively.	Provide pre-clinical exposure such as shadowing healthcare professionals to familiarize students with real-world challenges.	Pre-clinical exposure can help students adjust to the unpredictability of patient care, enhancing their ability to adapt quickly when they begin clinical work.
Theme 4: "Compassion in Action: Connecting with Patients"	Students highlighted the essential role of empathy and communication in building strong patient relationships and providing compassionate, holistic care.	Integrate empathy training into the curriculum, offering role-playing exercises and workshops to develop compassionate communication skills.	Empathy and effective communication are foundational to creating trusting relationships with patients, which can improve patient outcomes and satisfaction.
Subtheme: Empathy	Students acknowledged the	Introduce emotional	Developing empathy ensures

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in Patient Care	importance of empathy in patient care, recognizing it as essential for connecting with patients in distressing situations.	intelligence training alongside clinical practice to foster empathy and active listening.	that students are emotionally attuned to patients' needs, making them better equipped to provide holistic care.
Theme 5: "Guided by Experience: The Role of Support in Clinical Success"	Support from clinical instructors, peers, and external networks was identified as crucial for building confidence and navigating clinical challenges.	Strengthen mentorship programs and peer support initiatives, incorporating regular check-ins and peer feedback to ensure consistent support.	Ongoing mentorship and peer support can significantly boost confidence, reduce stress, and help students navigate clinical challenges more effectively.
Subtheme: Support from Clinical Instructors	Students expressed reliance on clinical instructors for guidance, feedback, and support during clinical practice.	Enhance instructor training on effective mentorship and feedback to ensure high-quality support for students.	Instructor feedback is vital for confidence building and ensuring that students develop both technical and emotional resilience in clinical practice.
Theme 6: "Thriving in the Unknown: Adaptability in Clinical Practice"	Students recognized the uncertainty they would face in clinical settings but are committed to adapting through real-world experiences and learning from them.	Promote adaptability workshops focusing on flexible thinking and problem-solving to prepare students for the unpredictability of clinical practice.	Students' adaptability to clinical challenges directly influences their success and growth, making it critical to prepare them for real-world situations.
Subtheme: Adaptability to Real-World Situations	Students highlighted the importance of adaptability in handling the varied and unpredictable nature of patient care.	Provide clinical rotations with diverse patient scenarios to help students adjust to varying situations and build adaptability.	Exposure to diverse clinical settings enhances students' ability to adapt, which is essential for effective patient care in dynamic environments.
Theme 7: "Responsibility in Action: Ensuring Patient Safety"	Students emphasized their professional responsibility to ensure patient safety, with a focus on accountability, ethical responsibility, and adherence to safety protocols.	Strengthen patient safety training by conducting safety drills and ensuring that students are thoroughly familiar with institutional safety procedures.	Ensuring patient safety through adherence to protocols is foundational to clinical practice, requiring ongoing training and monitoring.
Subtheme: Accountability in Patient Care	Students expressed a strong sense of responsibility for patient safety, understanding that their actions directly impact patient outcomes.	Foster a culture of accountability by integrating patient safety protocols into every clinical session and reviewing them regularly.	Emphasizing accountability helps students understand the importance of vigilance and the long-term impact of their clinical decisions on patient well-being.
Subtheme: Importance of Following Guidelines	Students recognized the importance of following clinical guidelines to ensure safe patient care.	Establish structured guideline review sessions and ensure students understand the implications of safety procedures through regular discussions.	Adherence to guidelines is essential in minimizing errors and maintaining patient safety, especially in unpredictable clinical environments.

Table 2 consolidates the key findings into actionable recommendations that emphasize holistic preparation for clinical practice. The results highlight the need for emotional resilience training, mentorship, adaptability workshops, and strong patient safety protocols to ease the transition from classroom to clinical care. These
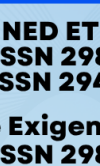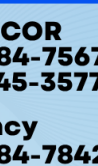
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implications underscore that readiness requires both technical competence and emotional preparedness, ensuring nursing students become confident, compassionate, and safe practitioners.

Program Name: "Nurturing Students Nurses' Readiness: The Comprehensive Clinical Immersion Support Program (C-CISP)"

Program Overview:

The Comprehensive Clinical Immersion Support Program (C-CISP) is designed to holistically prepare nursing students for the challenges of clinical practice by addressing emotional, professional, and practical dimensions. It aims to bridge the gap between classroom learning and real-world clinical care through structured interventions, mentorship, and support systems that foster adaptability, emotional resilience, and professional competence.

Rationale:

The transition from academic learning to clinical practice is a critical phase in nursing education, requiring more than just technical knowledge. Emotional resilience, adaptability, and the ability to navigate real-world challenges are essential for success in patient care. The C-CISP is grounded in the findings of this study, which revealed that nursing students face significant uncertainty, anxiety, and emotional challenges as they approach clinical placements. This program addresses these issues by offering structured pre-clinical preparation, mentorship, and continuous support throughout their clinical journey. By focusing on these aspects, C-CISP ensures that students are not only technically proficient but also emotionally and mentally prepared for the demands of patient care.

Program Goals:

1. To provide emotional preparedness and resilience for nursing students before they enter clinical practice.
2. To facilitate professional development by promoting critical thinking, decision-making, and learning from mistakes in clinical settings.
3. To enhance students' adaptability and growth through real-world exposure and structured clinical experiences.
4. To ensure patient safety and accountability by embedding ethical responsibility and adherence to safety protocols in nursing practice.
5. To build strong support systems involving clinical instructors, peers, and external support networks, ensuring ongoing guidance and motivation.

Key Components:

1. Pre-Clinical Orientation & Emotional Resilience Workshops
- Objective: Equip students with the tools to manage anxiety, uncertainty, and emotional readiness before clinical exposure.
- Actionable Elements:
  o Stress Management Workshops: Techniques to manage anxiety and build mental resilience.
  o Expectation Management Sessions: Prepare students for the unpredictability of clinical care and the fear of mistakes.
  o Simulation-based Learning: Exposure to realistic patient care scenarios to help students transition smoothly into clinical settings.
- Timeline: Conducted 2–4 weeks prior to clinical placements.

2. Mentorship and Peer Support Networks
- Objective: Build a strong support system for students to ensure confidence, guidance, and emotional backing during clinical placements.
- Actionable Elements:
  o Structured Peer Mentoring: Pair students with more experienced peers to provide emotional and professional support.
  o Clinical Instructor Feedback Sessions: Regular check-ins with clinical instructors to monitor progress and provide guidance.
  o Peer Learning Groups: Collaborative group sessions to share knowledge and discuss challenges.
- Timeline: Ongoing, starting at the beginning of clinical placements and continuing throughout the program.

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3. Empathy and Compassionate Care Training
- Objective: Develop students' emotional intelligence, focusing on empathy, communication, and rapport building in patient care.
- Actionable Elements:
  o Empathy Workshops: Role-playing exercises and active listening practice to improve communication with patients.
  o Professional Compassion Training: Focus on providing emotional support to patients and their families.
- Timeline: 1–2 months prior to clinical exposure, with follow-up practice during clinical placements.

4. Adaptability and Growth through Real-World Experience
- Objective: Foster adaptability and flexibility in students as they adjust to dynamic, unpredictable clinical situations.
- Actionable Elements:
  o Rotational Clinical Placements: Exposure to a variety of patient populations and clinical conditions.
  o Scenario-Based Learning: Engage students in critical thinking exercises to prepare for unexpected clinical challenges.
  o Continuous Reflection and Debriefing: Sessions to review clinical experiences, discuss challenges, and learn from mistakes.
- Timeline: Throughout the clinical rotation period.

5. Patient Safety and Ethical Responsibility Program
- Objective: Reinforce the importance of patient safety, accountability, and adherence to ethical guidelines in clinical practice.
- Actionable Elements:
  o Safety Protocol Adherence: Regular workshops on institutional safety protocols and the importance of following guidelines.
  o Ethical Decision-Making Training: Case studies and discussions on ethical dilemmas in patient care.
- Timeline: Throughout clinical practice, with quarterly reviews.

6. Ongoing Support and Feedback Mechanisms
- Objective: Ensure continued guidance, feedback, and emotional support throughout the clinical experience.
- Actionable Elements:
  o Mid-Clinical Placement Check-ins: Regular meetings with instructors to provide feedback and discuss any challenges.
  o Post-Clinical Reflection and Feedback: Encourage students to reflect on their experiences and provide feedback on their clinical training.
- Timeline: Bi-monthly check-ins during clinical placements, with final evaluations at the end of each placement.

Timeline of Program Implementation:

| Phase	Actions	Duration
Pre-Clinical Orientation & Emotional Resilience	Workshops on emotional resilience, stress management, and simulation learning.	2-4 weeks before clinical placements.
Mentorship & Peer Support Networks	Peer mentoring, feedback sessions with clinical instructors, peer learning groups.	Ongoing, starting from the first day of clinical placements.
Empathy & Compassionate Care Training	Workshops on empathy, communication, and rapport building.	1-2 months prior to clinical placements, with follow-up during placements.
Adaptability and Growth	Rotational clinical placements, scenario-based learning, continuous debriefing sessions.	Throughout clinical rotation period.
Patient Safety & Ethical Responsibility	Safety protocol training, ethical decision-making workshops, and adherence reviews.	Throughout clinical placements, with quarterly reviews.
Ongoing Support & Feedback Mechanisms	Mid-placement check-ins, post-clinical reflection and feedback.	Bi-monthly check-ins, with final evaluations at the end of each
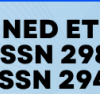
placement.

The Comprehensive Clinical Immersion Support Program (C-CISP) is designed to provide a robust framework for supporting nursing students as they transition into clinical practice. By addressing the multifaceted challenges students face—emotional, professional, and practical—this program ensures that they are well-prepared to meet the demands of real-world patient care, ultimately fostering confident, compassionate, and competent nursing professionals.

Conclusions

This study explored the reflections of Level 2 nursing students regarding their readiness for clinical practice prior to their capping and pinning ceremony. Through qualitative content analysis, the study provided valuable insights into the emotional, professional, and practical dimensions of clinical readiness. The findings indicate that while students feel confident in their academic knowledge, they experience a range of emotions—primarily uncertainty, anxiety, and fear of making mistakes—as they anticipate the transition from classroom learning to real-world patient care. These reflections underscore the need for emotional resilience and adaptability, alongside technical competence, in preparing for clinical practice.

The study highlighted several key themes: emotional and professional preparedness, the importance of learning through experience, the unpredictability of clinical practice, the essential role of compassion and communication in patient care, and the significance of support systems in boosting students' confidence and readiness. Additionally, students acknowledged the crucial role of adaptability in responding to real-world challenges and emphasized the importance of patient safety and accountability in clinical practice. These findings underscore the need for nursing education programs to provide a comprehensive, holistic approach to clinical preparation that addresses both the emotional and professional challenges students face.

Limitations of the Study

While the study provides important insights into the emotional and professional preparedness of nursing students, there are several limitations. First, the sample was limited to 49 students from a single private university in Bulacan, which may not fully represent the broader population of nursing students in the Philippines or globally. The findings, therefore, may not be generalizable to all nursing students, particularly those from different educational institutions or cultural contexts. Second, the study relied on self-reported data, which is subject to biases such as social desirability or inaccurate recollections. Although the use of inductive content analysis allowed for a nuanced understanding of students' experiences, the reliance on reflective narratives may have led to an incomplete picture of the complex factors influencing clinical readiness. Lastly, the study focused solely on students' pre-clinical reflections, and did not examine their experiences post-clinical exposure. Future research could expand by exploring students' ongoing reflections throughout their clinical placements to gain a deeper understanding of their evolving preparedness for clinical practice.

This study provides valuable insights into the factors that shape nursing students' readiness for clinical practice and offers practical recommendations for improving nursing education programs. By addressing both emotional and professional challenges, nursing schools can better prepare students to meet the demands of real-world patient care.

Recommendations

Based on the findings of this study, several feasible and actionable recommendations are proposed to enhance nursing students' readiness for clinical practice. First, pre-clinical orientation programs should be implemented to address the emotional resilience and stress management needs of students. These programs will help manage students' anxiety and uncertainty as they transition from classroom learning to real-world patient care. Workshops should focus on developing strategies for coping with emotional challenges and preparing students for the unpredictability of clinical settings.

Furthermore, mentorship and peer support systems must be strengthened to provide continuous guidance and feedback throughout clinical placements. Establishing peer mentoring programs, where senior students guide their peers, alongside regular check-ins with clinical instructors, will help build students' confidence and provide emotional support. Peer networks can also provide a sense of community and shared learning, especially during stressful clinical experiences.

To support learning from real-world experiences, simulation-based learning should be incorporated into the curriculum. By engaging in role-playing exercises and high-stress patient care simulations, students can practice

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handling unpredictable and complex clinical situations, boosting their preparedness before actual patient interactions. These simulations would help students overcome the fear of making mistakes and increase their ability to adapt to clinical challenges.

Given the importance of empathy and effective communication in nursing, empathy training and emotional intelligence workshops should be integrated into the curriculum. These workshops, which include active listening and rapport-building exercises, will enhance students' compassionate communication and enable them to foster stronger relationships with patients. Teaching students to be emotionally aware of patients' needs ensures a holistic care approach that addresses both the physical and emotional aspects of patient health.

The study also recommends establishing reflection and feedback mechanisms throughout clinical placements. Debriefing sessions should be held regularly, allowing students to reflect on their experiences, discuss challenges, and identify learning opportunities from mistakes. These sessions will encourage a growth mindset and enable students to learn from each clinical exposure, fostering their professional development.

To ensure that students are prepared for patient safety and ethical responsibilities, ongoing patient safety training should be integrated into the curriculum. This includes safety protocols and ethical decision-making training, emphasizing accountability in clinical practice. Students should be consistently reminded of the ethical weight of their actions and the impact on patient well-being, which is a core component of their professional identity.

Lastly, rotational clinical placements across diverse patient populations should be implemented to promote adaptability in real-world clinical situations. Exposure to various healthcare environments will help students develop flexibility and adaptability in their approach to patient care. Additionally, integrating family involvement and external support systems such as counseling services into the clinical training process will support students' emotional well-being, especially during high-stress periods of their placements. The involvement of family and external networks will help students maintain mental health and ensure they feel supported throughout their clinical journey.

These recommendations are grounded in the findings of this study and aim to provide a comprehensive, holistic approach to nursing students' preparation for clinical practice. By focusing on emotional readiness, professional growth, adaptability, and patient safety, these interventions will help students navigate the complexities of clinical settings and ensure they become competent, compassionate, and resilient nurses, ultimately improving the quality of patient care.

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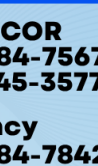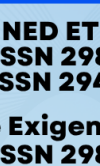Elo, S., & Kyngäs, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing, 62*(1), 107–115. https://doi.org/10.1111/j.1365-2648.2007.04569.x

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