



Views on nursing education in Portugal

Olhares sobre o ensino de enfermagem em Portugal

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Objective: to understand nurses' perception of hospital care about nursing education. **Methods:** a qualitative study was carried out in 19 hospital institutions, with 56 nurses. For the data collection, the semi-structured interview was used and, in the analysis, the Atlas.ti® software. **Results:** these aspects emerged as units of analysis: positive and negative aspects of nursing teaching in a theoretical context; and positive and negative aspects of nursing teaching in a practical context. The perception of nurses about nursing education is essentially related to the existence of much diversified training processes. **Conclusion:** despite the evolution of nursing as a discipline and profession, nurses recognize that many of the weaknesses in nursing education are based on the differences between nursing schools, and the need for a closer approximation of theory to practice is evident, among other strategies, the follow-up of the students during the internships by the teachers of the School.

Descriptors: Teaching; Nursing; Education, Nursing; Clinical Clerkship.

Objetivo: compreender a percepção dos enfermeiros da assistência hospitalar sobre o ensino de enfermagem. **Métodos:** estudo qualitativo, realizado em 19 instituições hospitalares, com 56 enfermeiros. Para a coleta de dados foi utilizada a entrevista semiestruturada e, na análise, o software *Atlas.ti*®. **Resultados:** emergiram como unidades de análise: aspectos positivos e negativos do ensino de enfermagem em contexto teórico; e aspectos positivos e negativos do ensino de enfermagem em contexto prático. A percepção dos enfermeiros sobre o ensino de enfermagem está relacionada, essencialmente, à existência de processos formativos muito diversificados. **Conclusão:** apesar da evolução da enfermagem enquanto disciplina e profissão, os enfermeiros reconhecem que, no âmbito do ensino, muitas das fragilidades estão alicerçadas nas diferenças entre as escolas de enfermagem, sendo evidente a necessidade de maior aproximação da teoria à prática, o que implica, entre outras estratégias, o acompanhamento dos estudantes durante os estágios pelos docentes da Escola.

Descritores: Ensino; Enfermagem; Educação em Enfermagem; Estágio Clínico.

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Introduction

The period between 1988 and 1999, considered one of the most significant phases for the evolution of nursing in Portugal, was marked, in 1988, by the integration of nursing education in the national educational system, at the level of polytechnic higher education, and in 1999, by the beginning of the Degree in Nursing, in a single cycle of four curricular years⁽¹⁾.

The nursing training model, although with a higher number of hours of instruction, continued to focus on a process of alternation between theory and practice, and it was difficult to recognize its training potential due to the dynamic interaction between them. Clinical teaching, coupled with the theorist developed in the School, constitutes an important moment of individual and professional learning and development through the confrontation with the complexity of the care in real context⁽²⁾.

In fact, in addition to practicing and deepening the knowledge acquired in the School, in the contexts of practice, nursing students are confronted with the real situations of the profession and can develop skills that allow them to fulfill the values, principles and duties recommended in the Deontological Code⁽³⁾. However, clinical teaching/internships without adequate supervision do not provide the conditions necessary for student development, since successful learning depends greatly on the teachers/nurses who accompany them⁽²⁻³⁾.

In this sense, due to the importance of clinical teaching/internships in the development of nursing students⁽⁴⁾ and to improve the training processes in practice environments, it is considered relevant to understand the value and meaning attributed by nurses to current nursing education. Thus, integrated in a broader research at national level, "Contexts of hospital practice and conceptions of nursing", this study aimed to understand the perception of nurses of hospital care on nursing teaching in Portugal.

Methods

Qualitative study, carried out in 19 Hospitals of mainland Portugal, from August 2015 to February 2016.

The intentional sampling technique was used to select the participants and, in order to guarantee a better understanding of the phenomenon, a nurse manager, a specialist and a care worker participated in each of the hospital institutions, of which one manager refused to participate, totaling 56 nurses.

Data were collected through a semi-structured interview, with an average duration of 60 minutes, and the following guiding question: "How do hospital nurses perceive nursing education in Portugal?" The meeting with the participants was previously marked by telephone contact, considering their availability. The interviews were fully transcribed and then sent by e-mail to each participant for content validation.

The interviews were coded using the initial letters of the words nurse (N), specialist nurse (SN) and nurse manager (NM), followed by the number, which corresponded to 19 participants in the first two codes and 18 in the latter. The content analysis⁽⁵⁾ was carried out in the light of Bardin's benchmark, using Atlas.ti® software.

The study complied with the formal requirements contained in national and international standards for research involving human beings.

Results

Among the participants, the majority was female (73.2%) and the ages prevailed between 30 and 35 years and 50 and 55 years. The majority of marital status was married/de facto union (73.2%). As to the profession, given the sample's intentionality, the distribution is identical, as there are 19 nurses, 19 specialists and 18 managers.

Regarding the content analysis, besides the

positive and negative aspects of the theoretical component of nursing teaching, there were inherent elements to the practical component, specifically that one which is concretized in a hospital context.

Positive and negative aspects of nursing teaching in the theoretical context

For the participants, the transition from the undergraduate nursing course to the undergraduate degree, almost two decades ago, was important to contribute with a more relevant theoretical approach: *With the degree I think that the evolution was really remarkable because there was an improvement of the knowledge (SN4). Currently, more theoretical content is addressed (SN5).* In addition to the more theoretical approach, the participants emphasized the concern to teach contents within the scope of the nursing discipline and profession: *I already got nursing teaching ... in a phase of evolution ... in which one did not teach only to give injections and (vesical probing) and other techniques ... teaching has changed in the sense of a great development of nursing as a profession and as an area of self-knowledge (N5).*

Regarding the preparation to access the specific knowledge of nursing, in relation to what happened previously, there was a positive evolution: *We did not even know how to search databases ... only at the end of the course did we begin ... before that we didn't even think thought: let's see scientific articles! ... and, nowadays, this is what we are going to see (SN17). And the most important is that we seek to gain access to knowledge of our profession (N4).*

The use of simulation for skills development was another positive aspect highlighted by the nurses: *The schools now, at least some that I know of, have been equipped with materials that simulate the practice ... with laboratories that I think they were very important (SN11), mainly for the students to train and to improve the technique (SN5).* Besides the acquisition of technical skills, the use of simulation to develop cognitive skills emerged as a necessity, although it is not frequent in many educational institutions: *In the school where I took the course, besides the simulation being important in the acquisition of skills, technical skills it is essential in promoting students' ability to make decisions (N4).*

The reports also presented some weaknesses, such as the existence of nursing schools with different approaches: *There is a setback ... and I think it may have more to do with each of the institutions, that is, with the teaching-learning method used in each of the nursing schools ... in some of them there are no changes (N4).* The narratives show that the perception of the existence, or not, of changes is related to the different formative processes: *With some concern, I see ... two situations ... some schools actually have ... a progression in terms of teaching and, of course, repercussions on the learning and work of the students, and also afterwards as professionals ... and I see the exact opposite in some situations ... in which I see almost a setback, that is, we appear here students and, later, as professionals ... which are not institutional capital gains in terms of profession, so that in global terms, although I perceive an improvement ... in cross-cutting terms, I think ... there are institutions that are not guaranteed to contribute to this development and, in the short term, we may have some negative effects on nursing (NM2).*

In addition to the different theoretical approaches, the existence of nursing schools with different requirements was also revealed: *I think that these are situations that are never recoverable, because it is perfectly noticeable, possible, by choice, that they had in some of these schools with more facilitative teaching processes, I suppose, with more facilitating possibilities of entry, the level of demand is clearly not the same (NM2).*

As a result of the greater number of nursing students, the participants denounced the existence and consequences of a less personalized teaching: *I am from a group where we were 27 students ... where we had a closer follow-up ... nowadays no ... the important thing is to have more students, so more bribes (tuition) to pay, an economic view (N11). The teachers do not even know the students because they are thousands ... in our time ... it was much more personalized ... (NM8).*

The frequency in theoretical, theoretical-practical and practical classes, facilitates, from the perspective of the participants, the integration of theoretical and practical contents, fundamental to the professional practice of nursing, which is why non-participation brings consequences. In addition, the students' choice of attending or not attending classes, including theoretical ones, which are not compulsory, is related to their opinion of the teacher: *Students select*

the theoretical classes they should attend ... in theoretical-practical and practices, they miss classes and, therefore, end up leaving (N4); good professors have full rooms, bad professors have empty rooms ... in my time the classes were all compulsory, we would go to everything ... even if we did not like ... (NM8); I think that the fact that the lectures are facultative, is harmful to the students (SN5).

Finally, the lack of approximation to the contexts of the practice was another aspect frequently identified in the narratives: *I think that the schools are not adapted to reality ... there should also be updating of the schools ... because sometimes the reality is quite different (SN12).*

Positive and negative aspects of nursing teaching in the practical context

In addition to the reference to theoretical education, the importance attributed by nurses to the clinical practice performed in the course was clear, on which also positive and negative aspects emerged. The fact that the students were accompanied by teachers from the school was significantly valued: *These here have an added value because the teacher comes with them, because otherwise it was also difficult to follow (NM7). In addition to the professors of the school, the use of assistants to participate in the monitoring of students in clinical teaching was assumed by the nurses as a positive aspect: At this moment, I also note that the employees ... are people who are linked to the practice of the day -day, they are people who have knowledge ... about the contexts of practice (NM6).*

Very much influenced by the professors who accompany them during the academic course, students have shown greater concern with the autonomous field of the profession: *They begin to realize that interdependent interventions are not always the most important ... autonomous domain has been more valued (N4).*

As a result of this valuation, students are better able to conceive nursing care: *There is a greater concern with the relevant data, with the identification of diagnoses ... with the interventions ... whether or not the desired result has been achieved ... and, if it was not, the need to reformulate (SN5). In addition, as a result of the requirement to which they are sub-*

mitted, the investment in the decision-making process is notorious: I remember being evaluated if the folds of the sheet were made well ... the important thing was for the patient to be well washed. It did not matter if he knew how to get there! And today the world of nursing is not the same ... what today has been required ... is a nursing student know how to base their decision making (E3). In fact, from a teaching centered on doing and imitation, focused on the interpersonal relationship with the tutor nurse, to the detriment of the cognitive component, it has evolved in the sense of promoting the decision making: Before, once the work done, and if the nurse we were with was satisfied because we did everything for him, even without knowing how to make the decision, we did it because the nurse did ... today it's not like that! ... What is required of the students ... is that they know how to explain their decisions and not what they do to see us do ... even because we are not always the best models for student practice! (N3).

To the positive evolution in the decision-making process, the participants added a greater demand for reflection on the practice: *At present, each student is given the possibility and almost obliged to reflect their own practices ... to say, not to be a proper practitioner ... that is, the students have ... a theoretical, technical and scientific support necessary for care, but at the same time they have gained much in terms of their capacity for analysis and reflection (NM1).*

In the context of the negative aspects of teaching in a practical context, the apparent decrease in the number of hours on the internship was mentioned by the nurses: *What I am fundamentally concerned with the experience I have is this: we receive many students here and the internship load. ... it seems to me less; is less in terms of hours, is less in terms of dynamics, that is, it is rare at this time a nursing student ... to do a full schedule in an internship environment ... they come three to four days, three most of the times, and then return to school. ... I realize from the point of view of grounding the theoretical work ... I have my doubts whether in terms of developing practical skills and integrating theory in practice will be beneficial to students; what I have to say after the new colleagues I get in the service is that it is not being beneficial (N9).*

In addition to the fact that weekly students spend less hours in practice contexts, the typology of

services where clinical education/traineeship is carried out can compromise the quantity and quality of the experiences provided: *I think that the proliferation of so many schools meant that there were not so many fields as well as the desirable ones for the students ... not everyone has the possibility to practice in places of hospital context that give them various experiences and dynamics and then what happens is that we receive students who ... are very poorly prepared* (N16). The problem is that the high number of students who continue to be admitted to nursing schools annually may, from the perspective of the participants, aggravate the above: *Increasing numbers of students entering each year may further compromise the capacity of services to absorb so many students, which has become evident in hospitals* (N4).

As justification for the difficulties manifested by the students in the clinical contexts, the overvaluation of the scientific component to the detriment of the practice was emphasized by the nurses: *In some situations it seems that we are moving from a phase exclusively focused on the technical execution, to a phase in which the important is the theory ...*(SN5). Following this, the participants considered that the students have less developed technical skills: *I think there has been a theoretical evolution ... but I think there has been a decrease in technical skills* (N16). *They arrive here many times, almost without knowing how to prepare an injection. They do not know how to dose a serum that has to be perfused in 24 hours, if they do not have a machine ... I think there are things that should be learned, they should have been performed, and they arrive here without this skill* (NM13). In addition to the less developed technical skills, the fact that the students present difficulties in establishing a therapeutic relationship with the patients was another aspect evidenced: *Too much care, too little care, too little talk to the client ...* (N6). *They bring a lot of theories, a lot of information, they are very worried about it, and then the real importance of the sick person and the significant person we have here is sometimes neglected...*(SN9).

Despite the investment in the theoretical component of the course, it has remained difficult to integrate theoretical knowledge, which may be related to the distance between theory and practice: *Students arise based on theory, with great difficulty in integrating it into the practi-*

cal context (N9). *There is a very large gap between what is eventually focused on schools and what is done in services ... And this is the effort that has to be done by schools* (SN2).

With a significant repercussion in the aspects mentioned above, the fact that the students carried out placements without accompaniment of the teachers of the school was frequently mentioned: *At the time when I took the course, the monitors of the schools went with us for internship and were ... in vigilance, orientation, and I think we were more supported in terms of training ... there was a better link between theory and practice within the philosophy of the school ... What I see now in the reality of schools ... is that there are not enough monitors to follow-up, and follow-up on student learning* (N12). After not being accompanied by the teachers of the school, the participants denounced some risks: *Are practitioners very out of practice and this implies what? It implies that ... their preparation for work is dependent on the type of nurse to whom they will be assigned. Because if they pick up a demanding nurse who teaches them how they should be ... they'll be a very similar professional ... they're molded ... depending on the model that will accompany them ... in that or the other stages. If they pick up multiple models, they have to be consciously opting for those they consider the best* (N12).

In addition, due to being accompanied by nurses with different profiles, the requirement can be very diverse, culminating in very different evaluation models: *If I am very demanding in internship and have not been so demanding with it on the theoretical side, I am being unjust because I am demanding more than what they have prepared for it ... I think it is more ungrateful to them than it was for me, that it had a theoretical-practical accompaniment by the same people and the degree of requirement was coherent and uniform* (N12); *the evaluation is always complicated ... as the students are with several nurses, the notes are sometimes very different ... and they do not realize* (SN5). In this sense, the participants enunciated some suggestions: *I think this is a deficit that schools should rethink because it can be very positive for the student to be with a professional when they are really of quality and when they really have a way and when they have availability ... which is often not possible within the services ... Of course at a later stage ... is it already different?! ... But in the early stages of the basic course, I think it would be important ... that they be accompanied by the professor 100.0%* (SN8).

Discussion

The limitation of the study was the qualitative approach and the intentional sampling, which hinders the generalization of the results. This research allowed us to identify weaknesses and problems, the resolution of which will be possible through strategies that, at the same time, may contribute to the improvement of nursing education⁽⁴⁾. Despite the investment made in recent years in the area of clinical nursing supervision⁽⁶⁻⁸⁾, the scientific production on the perception of nurses about nursing education in Portugal has been scarce⁽⁹⁾, which makes it difficult to discuss the results. However, it is hoped that this research may motivate reflection and discussion on the subject.

The data showed that in the context of teaching in a theoretical context, in addition to a deeper approach and preparation of students to access the knowledge of the discipline itself, the use of simulation for the development of competencies was pointed out by nurses as a positive aspect. Although the experience varies from school to school, the use of simulation and simulated training are fundamental pedagogical strategies in the formation, with impact in several dimensions from the satisfaction and involvement of the student to the safety of the person being cared for nursing⁽¹⁰⁻¹¹⁾.

In this sense, and given the evidence of the gains, it is important that nursing schools become involved in projects that provide students with this kind of teaching-learning strategies. Effectively, the simulated clinical practice using drama and/or advanced simulators is capable of reproducing all the complexity and complexity of the clinical context, which contributes to the improvement of knowledge, satisfaction with the teaching-learning process, self-confidence, decreased level of anxiety, motivation to learn, and ability to reflect and critical thinking, crucial to the development of globally competent nursing professionals^(5,11-12).

Despite the evolution in nursing teaching, specifically in certain schools, the participants recogni-

zed gaps, insofar as the formative experiences have not promoted the integration of theory and practice. The existence of schools with different approaches, non-compulsory theoretical classes and less personalized teaching, directly related to the high number of students, were the most obvious negative aspects. The presence of the students in the classes is influenced by the opinion they have of the teacher, which shows the importance of the pedagogical competences of the teachers⁽¹³⁾ and evidences the repercussion of students' perceptions.

The idea widely discussed in the nursing context, at national and international level, that theory and practice are seen as two separate realities⁽¹⁴⁾, seems to remain ingrained, which justifies interpreting it as a problem. This assigns to the teachers and nurses who collaborate with the school the responsibility to bring the theory closer to practice⁽⁶⁾. Faced with this requirement, computer technology, simulated practices, virtual experiences and reflexive methodologies⁽⁹⁻¹¹⁾ are strategies with the potential to guarantee the desired transferability of knowledge.

Regarding the follow-up of students in clinical teaching, some participants addressed the pertinence of collaboration between teachers and nurses, others advocate follow-up of 100.0% by the teachers of the school. Following this model, students show greater concern with the autonomous field of the profession and greater capacity for the conception of care. In addition, with the presence of the teacher, the need for reflection on the practice is more important, which as an essential strategy for the development of the critical-reflective capacity of the students, will enhance the adaptation to the demands of the future profession and work contexts. In addition to contributing to the quality of care, reflective practice and the ability to think critically, they also ensure that clients receive more meaningful care⁽⁸⁾.

Considering that the learning of the profession is done by identification with their own models⁽³⁾, the participants reinforced as a negative aspect of teaching in a practical context the fact that students are

assigned only to nurses, since not all are able to, if presented as models, which theoretically is not supposed to happen to the nursing professors. In fact, due to the already accomplished course, the nurses in teaching duties should be role models for the students, enabling the development of a deeper understanding of what it is to be a nurse and the responsibility that is intrinsic to them⁽³⁾.

Although the structure of the undergraduate nursing course contemplates at least 50.0% of the curricular timetable in a clinical teaching context⁽³⁾, the fact that the students do not remain on the five days of the week in a real context of justified care the perception of the nurses in relation to the supposed reduction in the number of hours of internship. Although the absence is often restricted to only one day per week, the participants considered that replacing this day with activities in the school contributes to aggravate the difficulties, because the number of experiences will be less. The non-attribution of meaning to this strategy denounces, on the one hand, the valorization of technical skills, and on the other, the ignorance of the objectives of these moments in academic context, aspects that need to be clarified. In agreement with the findings of other studies, the nurses' perception that, in their time, they would have more practical experience, remains strongly rooted⁽¹⁵⁾.

In this context, in order for theory to have repercussions in practice and that influences the teaching-learning process, collaboration/articulation between the two training sites is crucial⁽¹⁶⁾: School/Health Institution. theoretical knowledge, and nurses, more involved in care delivery, results in complementarity translated into advantages in the training processes, while providing moments of practical learning for students and training in a work context for professionals.

In addition to the importance of teachers accompanying all formative moments, there is a need for strategies that enhance the development and consolidation of knowledge, as well as the transferability of learning to clinical practice. In this sense, the investment in student follow-up models that simultaneously

contemplate the presence of the teachers of the School, and the collaboration of the nurses of the services, will be an added value for the process of student development, as well as for the promotion of quality of the nursing care provided in the contexts⁽¹⁵⁾.

The fact that a relevant aspect of the participants' discourse is based on the differences in teaching-learning processes between the different nursing schools, as well as their repercussion on the development of future nurses and nursing, justifies the analysis and understanding of this phenomenon. Knowledge and reflection on the differences between the educational institutions of the country can contribute to the clarification of the meaning of nursing, as well as to the continuous improvement of the practice of the profession, which is learned in the academic context at an early stage of formation. Otherwise, the contribution of schools and teachers to the development of nursing will be compromised

Conclusion

In spite of the evolution of nursing as a discipline and profession, nurses recognize that, within the scope of education, many of the weaknesses are based on the differences between nursing schools, being evident the need for a closer approximation of theory to practice, which implies, among other strategies, the accompaniment of the students during the internships by the teachers of the School.

Collaborations

Ribeiro OMPL contributed in the design, analysis and interpretation of the data and writing of the article. Martins MMFPS contributed in the conception, final design and approval of the version to be published. Carvalho ALRF contributed in the relevant critical revision of the intellectual content and final approval of the version to be published. Santos LMMMS and Viana MFR contributed to the analysis and interpretation of the data.

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