

Chapter 09 / Capítulo 09

Health and Professional Practice in Argentina: Applied Research in Patient Care, Workforce Training, and Health Interventions (English Version)

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Training strategies to improve patient safety and clinical performance in nursing / Estrategias formativas para mejorar la seguridad del paciente y el desempeño clínico en enfermería

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ABSTRACT

The study analysed the importance of practical training in nursing for the development of clinical skills and patient safety. It was based on previous evidence showing that a considerable number of students felt they lacked sufficient skills, especially after the interruption of practical training during the pandemic, which led to insecurity, fear, and uncertainty about their professional performance. On this basis, it described an intervention project implemented in the emergency room of a private hospital in the city of Rosario, aimed at six new nurses on probationary contracts. The institution was characterised by high complexity, high demand for care and interdisciplinary work, which required professionals capable of integrating theory and practice under supervision. The project focused on continuous training, structured induction and clinical support, in line with the provisions of Law 12.501 and the World Health Organisation's guidelines on patient safety. Through planned training sessions, the aim was to strengthen clinical judgement, decision-making and the safe application of critical procedures, such as catheter management, medication administration, haemodynamic control and care plan development. In its conclusions, the study highlighted that the strategy contributed to reducing the gap between theoretical knowledge and actual practice, consolidated the professional identity of new nurses, and promoted the development of an institutional culture focused on quality, safety, and humanised care. In addition, it fully reinforced the shared responsibility between teams and the healthcare organisation.

Keywords: Practical Training; Clinical Skills; Patient Safety; Nursing; Continuing Education.

RESUMEN

El trabajo analizó la importancia de la formación práctica en enfermería para el desarrollo de habilidades clínicas y la seguridad del paciente. Partió de evidencias previas que mostraron que un número considerable de estudiantes se percibía sin competencias suficientes, especialmente tras la interrupción de las prácticas durante la pandemia, lo que generó inseguridad, temor e incertidumbre frente al desempeño profesional. Sobre esta base, describió un proyecto de intervención implementado en la guardia clínica de un sanatorio privado de la ciudad de Rosario, dirigido a seis enfermeros ingresantes con contrato a prueba. La institución se caracterizó por una alta complejidad, elevada demanda asistencial y trabajo interdisciplinario, lo que exigió profesionales capaces de integrar teoría y práctica bajo supervisión. El proyecto se centró en la capacitación continua, la inducción estructurada y el acompañamiento clínico, alineados con las disposiciones de la Ley 12.501 y con los lineamientos de la Organización Mundial de la Salud sobre seguridad del paciente. Mediante instancias formativas planificadas, se buscó fortalecer el juicio clínico, la toma de decisiones y la aplicación segura de procedimientos críticos, como manejo de sondas, administración de medicamentos, control hemodinámico y elaboración de

planes de cuidado. En sus conclusiones, el trabajo destacó que la estrategia contribuyó a reducir la brecha entre conocimiento teórico y práctica real, consolidó la identidad profesional de los enfermeros ingresantes y favoreció la construcción de una cultura institucional orientada a la calidad, la seguridad y el cuidado humanizado. Además, reforzó la responsabilidad compartida entre los equipos y la organización sanitaria plenamente.

Palabras clave: Formación Práctica; Habilidades Clínicas; Seguridad del Paciente; Enfermería; Capacitación Continua.

INTRODUCTION

Previous research has highlighted the importance of nursing students having this integrative space and has cited studies that support this. The study to be highlighted was published in July 2022 and was conducted at the public University of Zacatecas, Mexico. It involved 1,033 students enrolled in the August-December 2021 semester, using variables such as gender (female/male), age, and the number of semesters completed. A 48-question questionnaire was used to assess their clinical skills across three key parameters: general, basic, and advanced. This study concluded the following:

A total of N=82 students responded. The average age was 20,7 (SD: 1,40), 87,8 % were female, mostly in their seventh semester (40,2 %). Fifty percent perceived themselves as having poor clinical skills; 34,1 % had no clinical skills; and 15,9 % had competent clinical skills. Students who had not had the opportunity to attend clinical practice before the pandemic are those who consider themselves to have no clinical skills, as are those who had completed two semesters of practice, who rated themselves as having poor clinical skills. Fifth-semester students perceived their clinical skills as lower ($p=0,006$), as did those who had not completed clinical practice before the pandemic ($p=0,005$). Among the skills that students perceived they knew in theory but did not have the confidence to perform in practice were the following: placement and evaluation of nasogastric tubes, documentation of gastric pH tests, aspiration precautions, washing, medication administration and feeding (continuous, bolus, and gravity), and checking for residual urine (43,9 %); ability to place, feed, and care for a gastrostomy tube, as well as assess and change dressings as needed (43,9 %); correctly monitor vital signs, perform a nutritional status assessment and fluid monitoring (40,2 %); perform a shift change using SBAR (situation, background, assessment, and recommendation) with 39,0 %, carrying out care plans (37,8 %), performing and documenting patient assessment (37,8 %), providing emotional and psychosocial support to patients and families (36,6 %), performing postural drainage, percussion, and administering oxygen therapy (36,6 %).

Another article that shows that nurses without skills can experience feelings of insecurity and uncertainty was a study conducted at the nursing school of the Universidad Veracruzana in Mexico, published in December 2020, which applied a qualitative research method through interviews to examine students' experiences. The study concluded the following:

Students say that clinical practice teaches them a great deal, allowing them to integrate theory with practice. However, it takes them beyond learning, enabling them to interact in a real environment alongside the healthcare team, the teacher, and the trust of patients. However, they feel afraid of living in social isolation, far from health services, and only reviewing topics in a theoretical way. They agree that internships are an opportunity for knowledge to take shape

and acquire meaning. Nurses without practical guidance can harm patients. According to the WHO, patient safety is defined as:

The absence of preventable harm to patients and the reduction of the risk of causing unnecessary harm to an acceptable minimum when caring for them. In the broader healthcare context, it consists of a set of organized activities that allow for the establishment of processes, value systems, procedures, behaviors, technologies, and care environments with which to reduce risks constantly and sustainably, prevent the occurrence of avoidable harm, reduce the probability of causing it, and mitigate its effects when it occurs.⁽¹⁾

Ongoing training is necessary to prevent errors. Patient safety then becomes an implicit professional responsibility in the act of care. Nursing is a profession in which people trust their care, especially those who are ill and suffering.

The nursing approach to issues of quality and effectiveness in patient treatment dates back to the past when Florence Nightingale proposed that “the laws of disease can be modified if we compare treatments with results.” That is why nursing, as the profession responsible for patient care, is involved in actions aimed at improving the quality of service in various areas. The quality of care is important in health; that is why nursing must develop it by incorporating proactive programs. However, this same quality includes care aligned with advances in new methods to implement habits and practices that meet each patient’s needs.

Being a nurse means having a body of knowledge and skills, always seeking to improve service quality and involving patients in decision-making. Patient safety entails legal and moral responsibility, as well as competent, safe professional practice.

Within the legal framework, Law 12.501 on the professional practice of nursing supports our training, whether we are nurses in training or already qualified. It states that staff who are employed in the private or public sector must be guaranteed continuous updating of their specialized knowledge by their middle managers. One of the focuses of this work is the continuous training the institution can provide to new nurses, preparing them to view their profession as a discipline, to care about patient well-being, and to provide timely, high-quality, and risk-free care through prior training.

DEVELOPMENT

The intervention project will be carried out in a private clinic in the downtown area of the city of Rosario, in the emergency room, and is intended for six professional nurses who are new hires with a three-month probationary employment contract.

The general emergency room is located on the ground floor and has one clinical area manager and two general nursing coordinators working from 6 a.m. to 2 p.m. and 2 p.m. to 10 p.m.

It has a shock room with a stretcher for primary emergency care and three beds for primary hospitalization, separated by roll-up curtains. It is equipped with one emergency cart, one multiparametric monitor, one AED (automated external defibrillator), four oxygen panels, and an aspiration system. The nursing office is located on the left and allows all beds to be viewed. It has a clean area where digital records are kept on a computer provided for the service and where work documents and nursing procedures are accessible. This area contains the necessary items, properly labeled in cabinets, to perform the corresponding techniques. As for the rest

of the physical plant, the institution has three floors of general inpatient rooms. The first floor houses the intensive care unit (ICU) with seven beds and two nurses per shift working six-hour shifts. On the same wing is the general ward with six beds and an oncology ward with three beds for chemotherapy infusions.

The second floor has three areas: the operating room, the general ward with 16 beds and two nurses per shift, and the VIP general ward with 10 beds and one nurse per shift. Finally, on the third floor, there is a general ward with nine beds and one nurse per shift. The nursing staff consists of:

- Head of the Nursing Department: 1 registered nurse.
- Nursing Supervisors: 3 registered nurses with the following shift schedule: 6 a.m. to 2 p.m., 2 p.m. to 10 p.m., and 10 p.m. to 6 a.m.
- General Duty Coordinators: 2 registered nurses with the following schedule: 6 a.m. to 2 p.m. and 2 p.m. to 10 p.m.
- Intensive Care and Special Care Unit Coordinator: 1 registered nurse with the following schedule: 9 a.m. to 3 p.m.
- According to contractual status: 40 permanent staff nurses, six nurses with a 3-month trial employment contract.
- According to academic status: 8 registered nurses, 37 professional nurses, and one nurse specializing in oncology.
- Schedule: distributed in 8-hour shifts, working six days a week with two days off.

This institution works in a disciplinary manner with other areas such as pharmacy, cardiology, infectious diseases, mental health, hematology, hemodynamics, neurology, diagnostic imaging services, cleaning, and maintenance. The institution specializes in orthopedics, traumatology, and rehabilitation. It works in conjunction with the ARTs (Workers' Compensation Insurance Companies) of the city of Rosario, which is why the population that usually enters consists of patients with pathologies resulting from traffic accidents and multiple traumas.

Practical nursing training is an essential pillar for developing clinical skills, integrating theory and practice, and consolidating the professional role. Various studies have shown that the lack of dedicated training spaces compromises skill acquisition, creates insecurity among students, and limits the ability to provide safe, high-quality care. In this regard, recent studies conducted in higher education institutions in Mexico and Latin America provide consistent evidence of the need to strengthen supervised practice environments as a central strategy to ensure patient safety and promote clinical competence.

Agüero Zárate et al.⁽²⁾ conducted one of the most representative quantitative studies in this field, involving 1033 students from a public university in Zacatecas. The questionnaire, comprising 48 items assessing general, basic, and advanced skills, identified a significant deficit in perceptions of clinical competencies. The results showed that 50 % of participants perceived themselves as having poor skills, 34,1 % as having no clinical skills, and only 15,9 % considered themselves competent. The analysis also revealed that students who had not had access to clinical practice prior to the pandemic experienced the most significant difficulties, confirming the irreplaceable role of supervised practice in skill development.

Among the skills in which students demonstrated knowledge of the theory but did not feel prepared to execute were essential procedures such as catheter placement, medication administration, nutritional management via different routes, vital sign monitoring, nutritional

assessment, oxygen therapy, and the implementation of care plans. This highlights the gap between theoretical learning and application in real-world contexts.

Along the same lines, qualitative studies confirm that deprivation of clinical experiences generates fear, uncertainty, and professional insecurity. Research conducted at the Universidad Veracruzana indicates that students conceive of practice as the space where “knowledge takes shape and meaning,” allowing them to interact with real situations, health teams, and patients. In contrast, the suspension of internships during the pandemic led to experiences of academic isolation, feelings of inadequacy, and concerns about future job placement. These findings align with those reported by Wagner et al.⁽³⁾, who warn that the pandemic put pressure on healthcare environments and disrupted the training of healthcare professionals, underscoring the importance of institutional strategies for support and continuous training.

The need to strengthen clinical competencies is directly related to patient safety, as defined by the World Health Organization⁽¹⁾, in terms of preventing harm and reducing the risks associated with care. Patient safety requires standardized procedures, solid skills, and continuous training to minimize errors and ensure safe care. In this context, the lack of clinical skills not only affects nurses’ self-confidence but also constitutes a direct risk to care, making ongoing training a moral, legal, and professional responsibility.

The disciplinary history of nursing incorporates an early concern for the quality of care. Florence Nightingale already argued that “the laws of disease can be modified if we compare treatments with results,” laying the foundations for evidence-based clinical reasoning and systematic evaluation. From this perspective, contemporary nursing recovers a sense of responsibility in decision-making, care planning, and the implementation of safe practices, placing continuing education at the core of providing effective and humanized services.⁽⁴⁾

From a regulatory framework, Law 12.501 on the professional practice of nursing establishes the obligation of continuous updating for both professionals and employing institutions. This implies that health services must ensure environments that facilitate access to specialized training, clinical support, and training programs that guarantee the progressive development of competencies.

The institution, therefore, not only evaluates the performance of new staff but also assumes a pedagogical role in building professional identity, strengthening clinical judgment, and consolidating safe practices.⁽⁵⁾

Likewise, nursing training recognizes that care involves knowledge, technical skills, critical reasoning, and ethical components. Patient participation in decision-making, respect for autonomy, and quality assurance are elements that intersect with safety and the professional’s legal responsibility. Therefore, induction and training programs for newly hired staff are fundamental tools for reducing practice variability and ensuring consistent standards of care.⁽⁶⁾

The quality and safety of care depend largely on strengthening new staff’s skills, especially in clinical settings where decision-making must be immediate, effective, and based on up-to-date knowledge.

CONCLUSIONS

Practical training is an irreplaceable component in the development of nurses’ clinical

skills, the construction of their professional identity, and the assurance of patient safety. The studies reviewed showed that the absence of real training spaces, or their interruption during the pandemic, led to significant deficits in perceptions of competence, increased insecurity, and fear of clinical performance, especially during critical procedures such as medication administration, catheter management, hemodynamic control, and care plan development.

In this context, the intervention project designed for the private hospital in the city of Rosario, which focused on the clinical ward and aimed at new nurses on probationary contracts, was presented as a necessary and relevant response. The complexity of the institution, the diversity of services, and the high demand for care related to traumatic pathologies required properly trained professionals capable of integrating theory and practice in real environments, under supervision and with the support of an interdisciplinary team.

Likewise, it was reaffirmed that patient safety depended not only on technical mastery of procedures but also on clear protocols, continuous training, and systematic institutional support. In light of the current regulatory framework, particularly Law 12.501 on the professional practice of nursing, the shared responsibility between professionals and the healthcare organization in ensuring ongoing training, structured induction, and progressive assessment of competencies was highlighted.

The training and clinical integration project for new nurses was configured as a key strategy to reduce the gap between theoretical knowledge and practice, strengthen clinical judgment, promote teamwork, and reduce the risk of adverse events. Its implementation was fundamental in consolidating a culture of quality and safety, in which nursing care was provided in a competent, ethical, and humanized manner, contributing both to the well-being of patients and to the professional development of nurses within the institution.

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