

## Competencies of Nursing Tutors in Clinical Training: A Nationwide Italian Survey Protocol

Gian Domenico Giusti <sup>1,2,\*</sup>, Alessio Gili <sup>3</sup>, Stefano Bambi <sup>4</sup>, Yari Longobucco <sup>4</sup>, Rocco Mazzotta <sup>2,5</sup>

1. Education and Quality Unit, Bachelor's Degree Program in Nursing, Perugia University Hospital, Perugia, Italy
2. Department of Biomedicine and Prevention, University of Tor Vergata, Rome, Italy.
3. Department of Life Sciences, Health and Health Professions, Link Campus University Rome, Italy.
4. Department of Health Sciences, University of Florence, Florence, Italy.
5. Center of Excellence for Nursing Culture and Research, Order of Nursing Professions of Rome, Italy.

\* *Corresponding author:* Gian Domenico, Giusti, Department of Biomedicine and Prevention, University of Tor Vergata, Rome, Italy. E-mail: [giandomenico.giusti@students.uniroma2.eu](mailto:giandomenico.giusti@students.uniroma2.eu)  
ORCID: <https://orcid.org/0000-0001-9167-9845>

### ***Study protocol***

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## ABSTRACT

**Introduction:** Clinical mentoring is essential for nursing education. It facilitates the integration of theory and practice, while promoting the development of clinical, communication, and interpersonal skills. It is becoming increasingly evident that tutors are facing a number of challenges. These challenges are related to the cultural diversity of students and constantly evolving clinical contexts. Despite the emphasis placed on the significance of general and cultural competencies in mentors within the context of international literature, a paucity of studies in Italy exists that evaluate both dimensions employing standardised and validated tools.

**Objective:** This protocol describes a nationwide survey that will assess the mentoring and cultural competencies of Italian nursing tutors.

**Methods:** The study adopts a descriptive cross-sectional observational design, with convenience sampling of approximately 600 tutors active in the academic year 2024–2025. The collection of data will be conducted between July and December 2025 through the utilisation of digital questionnaires. The survey employs two instruments, namely the Mentors' Competence Instrument (MCI) and the Mentors' Cultural Competence Instrument (MCCI), in order to assess these competencies. The MCI has been developed to measure tutors' general skills, including pedagogical, relational and feedback dimensions, while the MCCI has been developed to assess cultural skills and intercultural communication. The collection of sociodemographic data, contextual information and open-ended responses pertaining to the strengths and weaknesses of the tutorial role will also be undertaken. Statistical procedures will include descriptive analyses, using tables and plots to represent the data, as well as inferential analyses such as the Chi-square test, t-test, ANOVA test, Mann–Whitney U test, Kruskal–Wallis test, and correlation analysis. All statistical tests with  $p < 0.05$  will be considered statistically significant.

**Results:** The results of the study will inform the development of targeted training interventions and organisational strategies to enhance the role of the clinical tutor.

**Conclusions:** The survey will contribute to the enhancement of mentoring quality and the professional development of tutors, thereby facilitating the strengthening of the effectiveness of clinical training programmes in Italy.

**Keywords:** mentoring, nursing tutor, cultural skills, survey, clinical training.

## INTRODUCTION

Clinical mentoring is a fundamental pillar of nursing education. It guides students in integrating theory and practice, while also promoting the development of clinical, communication, and interpersonal skills [1]. Changes in healthcare contexts and the increasing cultural and linguistic diversity of students mean that the role of the tutor is becoming more complex and important [2]. International literature shows that effective tutoring improves student satisfaction, reduces anxiety, and contributes to patient safety [3]. Furthermore, Directive 2013/55/EU [4] stipulates that at least 50% of nursing training must take place in clinical settings, thereby expanding the responsibilities of tutors and necessitating their adequate preparation.

In recent years, research has further defined the multidimensional nature of the skills required of tutors [5]. Pramila-Savukoski et al. [6] have emphasised that these skills encompass pedagogical, organisational, and professional elements. In this context, the Mentors' Competence Instrument (MCI), which was developed and validated by Tuomikoski et al. [7], is a standardised self-assessment tool that is widely used to evaluate the general abilities of nursing tutors. This evaluation covers areas such as pedagogical knowledge, relationships between mentors and students, providing feedback, and assessing students. Added to this is cultural competence, which is essential in supporting students from different backgrounds. Luukkonen et al.'s [8] study showed that, despite having moderate levels of cultural awareness, tutors demonstrate gaps in their practical interaction skills and cultural confidence, with variability related to age, experience, and the

frequency with which they deliver tutorials.

A key contribution to this field is the work of Oikarainen et al. [9], who developed and validated the Mentors' Cultural Competence Instrument (MCCI). This is now considered one of the most comprehensive tools for measuring the cultural competence of tutors. Meanwhile, Giusti and Mazzotta [10] emphasised the pivotal role of tutors in fostering cultural competence among nursing students and facilitating the establishment of inclusive clinical environments.

Further evidence at the European level comes from a multicentre study by Mikkonen et al. [11], which identified three distinct profiles of tutorial competence among over 1,600 mentors from five European countries. The study showed that professional experience, specific training, and the frequency with which mentors undertake tutoring activities are correlated with higher levels of competence. Italian mentors, however, scored lower in several areas, including providing constructive feedback, adopting a goal-oriented approach to mentoring, and engaging in critical reflection [11], these results suggest the need for dedicated training programmes in an Italian context. Meanwhile, a recent systematic review by Keinänen et al. [12] confirmed that educational interventions aimed at tutors can significantly improve skills such as student assessment, providing feedback, setting goals, and developing professional self-efficacy. The analysed interventions, which were often based on blended methods, demonstrated consistent and significant improvements in various dimensions of tutorial competence over time [12].

In nursing education literature, the term *mentor* is often used interchangeably with other roles such as facilitator, peer instructor, preceptor, clinical guide, clinical instructor, or supervisor [7]. In this context, a mentor can be defined as a registered nurse who supports undergraduate nursing students in their learning process and is responsible for teaching and assessing students during clinical practice, without being an employee of the educational institution. Mentoring takes place within the clinical learning environment, which encompasses not only the physical setting but also psychosocial and interactional factors, organisational culture, and teaching and learning components

that can strongly influence students' learning experiences.

In the Italian context, these mentoring functions are often carried out within tutoring activities, reflecting a partial overlap between the roles of mentor and tutor in clinical education.

However, the national literature shows that there are not many studies that look at the general and cultural skills of Italian nursing tutors using standard tools like the MCI and MCCI.

### **Objective**

The aim of this protocol is to address this gap by conducting a national survey using the MCI and MCCI questionnaires.

## **MATERIALS AND METHODS**

### **Study design**

The study adopts a descriptive cross-sectional observational design, based on the administration of a survey aimed at nurses who act as clinical tutors in Nursing Degree Courses in Italy, active in the academic year 2024–2025. The collection of data is scheduled to take place between July and December 2025. The study was registered on the OSF platform [13].

The cross-sectional design was selected to provide a comprehensive overview of the general and cultural competencies of nursing tutors within the context of university education, offering a representative sample of the prevailing circumstances at the time of the survey. This approach aligns with the established guidelines for conducting and reporting observational studies and surveys in the healthcare sector [14,15].

### **Population and sample**

The target population of the study consists of nurses who have provided clinical tutoring for students enrolled in nursing degree programmes during the 2024–2025 academic year. These nurses

are employed within healthcare facilities and universities that are affiliated with the training programmes.

Convenience sampling was employed due to the unavailability of a reliable estimate of the total number of nurse tutors at the national level. The use of random sampling was not feasible due to the absence of a national registry or comprehensive database of nurse tutors in Italy, as well as the heterogeneity of the tutor role across institutions.

Participants will be recruited through institutional and professional channels, including nursing degree programme coordinators, internship coordinators, and professional nursing networks, in accordance with the methodology of descriptive surveys in nursing [16].

Given the descriptive and non-probabilistic nature of the study, a formal sample size calculation was not performed. The target sample size of approximately 600 participants was defined pragmatically, with the aim of achieving broad national coverage and ensuring sufficient variability for descriptive and exploratory analyses, as is recommended for descriptive studies not intended for hypothesis testing [15,16].

The study will include nurses who have been employed as clinical tutors during the 2024–2025 academic year. Individuals in managerial roles, those who have been absent for extended periods (e.g., due to illness or pregnancy), and those who have experienced a demotion or downgrade in their professional positions are excluded from this study.

No minimum duration of tutoring experience or formal tutor training was required for inclusion, as the study aims to reflect the heterogeneity of tutoring practices in the Italian clinical education context. Tutor training and professional experience were collected as study variables rather than used as exclusion criteria.

### **Survey instruments**

The questionnaire is composed of three sequential sections.

*Preliminary section:*

The first section collects socio-demographic and professional information about the respondents. Specifically, the following variables will be collected: age, gender, highest educational qualification, years of professional nursing experience, years of experience in clinical tutoring, current clinical setting, geographical region, prior formal training as a tutor (yes/no), and formal recognition of the tutoring role within the workplace (yes/no). This information will be used to describe the sample and to explore potential associations with mentoring competencies.

*Mentors' Competence Instrument (MCI)*

The second section consists of the Mentors' Competence Instrument (MCI), developed by Tuomikoski et al. [7] and validated in the Italian context [17], based on the 7-factor model. The instrument includes 63 items distributed across seven domains: (1) mentoring practices, (2) mentor characteristics, (3) mentor motivation, (4) goal-oriented mentoring, (5) reflection during mentoring, (6) student-centred evaluation, and (7) constructive feedback and assessment. Items are rated on a 4-point Likert scale ranging from "strongly disagree" to "strongly agree," with higher scores indicating higher perceived mentoring competence.

The Italian version of the MCI has demonstrated good psychometric properties, with satisfactory construct validity and internal consistency, reporting Cronbach's alpha values ranging approximately from 0.76 to 0.90 across domains [7].

*Mentors' Cultural Competence Instrument (MCCI):*

The third section includes the Mentors' Cultural Competence Instrument (MCCI), developed and validated by Oikarainen et al. [9], developed to assess cultural competence in mentoring culturally and linguistically diverse nursing students. The instrument comprises 13 items organised into domains addressing cultural awareness, cultural sensitivity, intercultural communication, and

linguistic diversity. Responses are measured using a 4-point Likert scale (“strongly disagree” to “strongly agree”), with higher scores reflecting higher perceived cultural competence. The Italian version of the MCCI has shown acceptable validity and reliability, with evidence of construct validity and good internal consistency across domains.

Bringing MCI and MCCI together will provide a complete and detailed understanding of the tutor's role. This will include both the usual teaching skills and those that are growing in the area of cultural diversity. The original authors of the instruments authorised the researchers to use the instruments on 22/05/2025.

The survey will also comprise three optional open-ended questions with optional answers, inviting respondents to describe the role of the tutor and the strengths and weaknesses of current nursing students.

### **Data collection procedures**

The administration of the questionnaires will be conducted digitally, utilising the Microsoft Form™ platform (Microsoft Corp., Redmond, WA, USA) [18]. The data collection period is scheduled to occur between September and December 2025. The survey will be distributed using a combination of methods: a direct web link disseminated through Nursing Degree Programme Coordinators and internship coordinators at participating universities, and QR codes shared during educational and professional training events targeting nursing tutors. To minimise the risk of unauthorised access or duplicate responses, the survey platform will implement IP address tracking, allowing only one submission per device. Participation will be anonymous, and no personally identifiable information will be collected. A system of periodic reminders will be employed to enhance response rates. Reminder messages will be sent at fortnightly intervals throughout the data collection period. Data confidentiality will be ensured through secure data management procedures. All collected data will be stored exclusively on a password-protected external hard drive, with encrypted access enabled

via the BitLocker security system of Windows 10® (Microsoft Corporation, WA, USA). Data will be accessible only to the research team and will be handled in accordance with applicable data protection regulations.

### **Data analysis**

The survey data will be entered into a Microsoft Excel™ 2019 spreadsheet (Microsoft Corp., Redmond, WA, USA) and quality checked by a researcher to ensure accuracy. All responses remain anonymous. The questionnaire will not identify participants. Upon reaching the target sample size or by 31 December 2025, the data will be exported to Excel™ and subsequently analysed using SPSS™ software, version 27 [19]. The statistical analysis will follow a progressive approach: initially, descriptive statistics will be calculated, such as frequencies and percentages for categorical variables, means and standard deviations or medians and interquartile ranges for continuous variables, after verifying the distribution of the data using normality tests.

Inferential analyses will include Chi-square tests to assess associations between categorical variables. For continuous variables, data distribution will be assessed using tests of normality. Parametric tests (t-test or ANOVA) will be applied to normally distributed variables, while non-parametric alternatives (Mann–Whitney U test or Kruskal–Wallis test) will be used when normality assumptions are not met. The level of statistical significance will be set at  $p < 0.05$ .

In addition, correlation analyses will be performed to explore associations between continuous competence scores (overall and domain-specific scores of the Mentors' Competence Instrument and the Mentors' Cultural Competence Instrument) and selected socio-demographic and professional variables, such as age, years of professional experience, years of tutoring experience, and prior tutor training. Pearson's correlation coefficient will be used for normally distributed continuous variables, while Spearman's rank correlation coefficient will be applied for non-normally distributed or ordinal variables. These analyses will be exploratory in nature.

Responses to the open-ended questions will be analysed using a qualitative thematic analysis approach. The analysis will involve familiarisation with the textual data, inductive coding, and the identification of recurring patterns and themes. The qualitative results will be used to complement the quantitative findings and provide a deeper understanding of tutors' perceptions regarding their role and the strengths and weaknesses of nursing students.

### **Ethical considerations**

The study will be conducted in full compliance with the principles of the Declaration of Helsinki. All participants will receive comprehensive information regarding the objectives and methodologies of the research and will be able to provide their free and informed consent. Participation is voluntary and anonymous: no personal data or information that could directly or indirectly identify participants will be collected. The data shall be used exclusively for scientific research purposes and shall be processed in accordance with Italian law, Legislative Decree No. 196 of 30 June 2003, "Personal Data Protection Code" [20], updated with the new Legislative Decree No. 101/2018 [21], which adapts Italian legislation to the European privacy regulation (EU Reg. No. 679/2016, GDPR) [22]. The study was approved by the Regional Ethics Committee of the Umbria Region on June 18, 2025 (Prot. No. CE-2376/25).

## **RESULTS**

### **Reporting results**

The presentation of results will adhere to the guidelines of the CHERRIES checklist [23], the CROSS Checklist [24] and the recommendations published by Latour and Tume [25], ensuring consistency, transparency and completeness in survey reporting and compliance with international best practices for the description of questionnaire-based studies.

## **Expected outcomes**

The survey is expected to provide a clear and detailed description of the current mentoring and cultural competence profiles of Italian nursing tutors, based on domain-specific scores obtained from validated instruments. The integration of the MCI and MCCI will facilitate the delineation of an overall profile of the clinical tutor, emphasising their strengths and areas for improvement, as well as identifying potential disparities associated with the socio-demographic and professional characteristics of the participants. The data collected will also facilitate the exploratory identification of associations and correlations between mentoring and cultural competence scores and selected socio-demographic and professional variables. The study is expected to provide valuable information to guide institutional strategies for enhancing the role of tutors and improving the quality of clinical training programmes.

## **LIMITATIONS AND STRENGTHS**

### **Limitations**

The study is subject to certain inherent limitations, which are intrinsic to the adopted methodological framework. The utilisation of convenience sampling has the potential to compromise the representativeness of the sample with respect to the national population of nursing tutors. Furthermore, the utilisation of self-assessment tools carries with it the risk of bias, as participants may overestimate or underestimate their own skills. Finally, voluntary participation may favour responses from individuals who are more motivated or sensitive to the topic, thus introducing the possibility of a self-selection bias.

### **Strengths**

A significant strength of the study is the utilisation of two internationally validated instruments, which ensure the reliability and comparability of the data collected. The magnitude of the sample in

question serves to enhance the robustness of the statistical analyses conducted, thereby facilitating the identification of potential associations between the various variables under consideration. The content explored is of particular significance for improving mentoring practices and enhancing the role of the clinical tutor, due to its relevance to training needs and organisational policies in the field of nursing education.

## **CONCLUSION**

The present protocol delineates a national survey designed to evaluate the general and cultural competencies of nursing tutors through the MCI and MCCI. The anticipated outcomes of this study are expected to provide valuable insights that will inform the development of training programmes, the enhancement of the quality of clinical placements, and the strengthening of the role of tutors in nursing education.

### **Author contributions**

Conceptualization: G.D.G.

Methodology: G.D.G.; A.G.

Writing—original draft preparation: G.D.G.; Y.L.; S.B.; R.M.

Writing—review and editing: G.D.G.; Y.L.; S.B.;

Supervision: S.B.; Y.L.; R.M.

### **Ethics statement**

The study will be conducted in full compliance with the principles of the Declaration of Helsinki. The study was approved by the Regional Ethics Committee of the Umbria Region on 18/06/2025 (Prot. No. CE-2376/25).

**Conflicts of interest**

The authors declare no conflicts of interest.

**Funding sources**

This research received no external funding

**Declaration on the use of ai**

We used ChatGPT and DeepL.com to assist with English language refinement and grammar checking. No AI was used for interpretation, or scientific content generation.

**Data availability statement**

Data sharing is not applicable to this article as no datasets were generated or analysed during the current study.

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