

Clinical Teaching Effectiveness, Nurse Educator Capabilities, and Clinical Outcomes of Nursing Students: A Narrative Review

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Article Details:

Received: 25 March 2026
Revised: 30 March 2026
Accepted: 9 April 2026
Published: 31 May 2026
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Recommended Citation:

Orbecido, M F. M. (2026). Clinical Teaching Effectiveness, Nurse Educator Capabilities, and Clinical Outcomes of Nursing Students: A Narrative Review. *The International Review of Multidisciplinary Research*. 1 (6), 635-644.
<https://doi.org/10.5281/zenodo.20552314>

Index Terms:

clinical teaching effectiveness, nurse educator competencies, clinical outcomes, nursing education, clinical instruction

Abstract. Clinical education plays a critical role in preparing nursing students for professional practice, with clinical teaching effectiveness serving as a key determinant of learning outcomes. This study aimed to synthesize existing literature on clinical teaching effectiveness, the capabilities of nurse educators, and the clinical outcomes of nursing students. A narrative literature review design was employed, drawing from peer-reviewed studies published between 2020 and 2026 sourced from databases including Google Scholar, PubMed, ScienceDirect, and Wiley Online Library. Relevant studies were selected based on predefined criteria and analyzed using a thematic synthesis approach. Findings revealed that clinical teaching effectiveness is a multidimensional construct encompassing pedagogical competence, clinical expertise, interpersonal skills, and professional attributes. Nurse educator capabilities were found to be dynamic and interdependent, with pedagogical competence serving as the foundation, supported by clinical proficiency, leadership, research engagement, and technological adaptability. Clinical outcomes among nursing students were identified as multidimensional, including cognitive, psychomotor, and affective domains such as knowledge integration, clinical competence, critical thinking, professional behavior, and readiness for practice. The review further established a strong and consistent relationship between clinical teaching effectiveness and student outcomes, highlighting that effective teaching practices significantly enhance student competence, confidence, and preparedness for clinical roles. This relationship is influenced by contextual factors, including the clinical learning environment and institutional support. Overall, the study underscores the need for a holistic and competency-based approach to clinical education, emphasizing continuous faculty development, structured evaluation systems, and supportive learning environments to optimize nursing education and ensure the preparation of competent and practice-ready graduates.

Introduction

Clinical education is a fundamental component of nursing preparation, serving as the bridge between theoretical knowledge and real-world healthcare practice. Within this context, student nurses are expected to translate classroom learning into safe, competent, and ethical clinical performance. The quality of this transition largely depends on the effectiveness of clinical teaching, which shapes not only students' technical skills but also their clinical judgment and professional behavior. As healthcare systems become increasingly complex, the demand for competent nursing graduates highlights the critical role of clinical instruction in ensuring patient safety and quality care.

Clinical teaching effectiveness (CTE) has been widely recognized as a multidimensional construct that encompasses various educator-related competencies, including instructional ability, clinical expertise, communication skills, and professional attitudes. According to Benner (1984), the development of clinical competence in nursing follows a progression from novice

to expert, emphasizing the importance of guided experiential learning. In this regard, nurse educators serve not only as instructors but also as facilitators of experiential learning, role models, and evaluators of student performance. Their ability to integrate theory with practice significantly influences how students internalize clinical knowledge and develop practical competencies.

Several studies have identified key dimensions of effective clinical teaching, highlighting that teaching effectiveness extends beyond content delivery. For instance, research by Knox and Mogan (1985) introduced one of the foundational frameworks for evaluating clinical teaching, identifying characteristics such as teaching ability, interpersonal relationships, personality traits, and nursing competence as essential components. Similarly, later studies have reinforced that effective clinical educators demonstrate strong communication skills, provide constructive feedback, and create supportive learning environments that enhance student engagement and confidence (Gaberson & Oermann, 2010; Saarikoski et al., 2013). These dimensions collectively contribute to the overall perception and impact of clinical teaching effectiveness.

In parallel, clinical outcomes among student nurses have become an important indicator of educational quality. These outcomes typically include knowledge acquisition, psychomotor skill development, critical thinking ability, and professional attitudes. Studies have shown that students who are exposed to high-quality clinical instruction tend to exhibit higher levels of competence and confidence in performing clinical tasks (Henderson et al., 2012). Moreover, the development of clinical judgment, an essential skill in patient care, is closely linked to the guidance and mentorship provided by nurse educators during clinical rotations (Tanner, 2006). Thus, clinical outcomes serve as a measurable reflection of how effectively teaching strategies are implemented in practice.

Despite the growing body of research on clinical teaching and student outcomes, inconsistencies remain regarding how specific educator capabilities influence student performance. While some studies suggest a strong positive relationship between teaching effectiveness and clinical competence, others indicate that additional factors, such as the clinical environment, student motivation, and institutional support, may also play significant roles (Levett-Jones et al., 2009; Papastavrou et al., 2016). These variations suggest that clinical teaching effectiveness cannot be viewed in isolation, but rather as part of a broader educational ecosystem that shapes student learning experiences.

Furthermore, there is a noticeable gap in the integration of clinical teaching dimensions and measurable clinical outcomes within a single analytical framework. Many studies tend to focus either on evaluating educator performance or assessing student competencies, without fully examining the direct linkage between the two. This fragmented approach limits a comprehensive understanding of how specific teaching capabilities translate into improved clinical performance among nursing students. Additionally, there is limited context-specific evidence, particularly in developing countries, where variations in educational resources and clinical settings may influence both teaching practices and student outcomes.

Given these considerations, it becomes essential to examine clinical teaching effectiveness not only as a set of educator competencies but also in relation to its impact on student clinical outcomes. Understanding this relationship can provide valuable insights for improving nursing education practices, enhancing educator development programs, and ultimately ensuring the preparation of competent and practice-ready nurses. This study, therefore, aimed to synthesize existing literature on clinical teaching effectiveness, the capabilities of nurse educators, and their influence on clinical outcomes, with the goal of identifying patterns, gaps, and implications for future research and practice.

Methodology

This study employed a narrative literature review design to synthesize existing research on clinical teaching effectiveness, the capabilities of nurse educators, and clinical outcomes of nursing students. A narrative approach was selected to allow for a comprehensive and interpretive integration of findings across diverse study designs, contexts, and theoretical perspectives. Unlike systematic reviews, which emphasize strict procedural protocols and quantitative aggregation, narrative reviews focus on conceptual synthesis, thematic organization, and critical interpretation of literature (Ferrari, 2015).

A structured literature search was conducted using major electronic databases, including Google Scholar, PubMed, ScienceDirect, and Wiley Online Library, and other relevant databases to ensure broad coverage of peer-reviewed nursing and health sciences research. Search terms were developed based on the key constructs of the study and combined using Boolean operators. These included: clinical teaching effectiveness, nurse educator competencies, clinical outcomes of nursing students, clinical teaching and student performance, and clinical instructor effectiveness. Additional terms related to specific dimensions of teaching effectiveness, such as teaching ability, clinical competence, evaluation, and interpersonal

relationships, were also incorporated to refine the search. The search process was iterative, with keywords adjusted as needed to improve relevance and ensure comprehensive retrieval of studies aligned with the objectives of the review.

Studies were selected based on predefined inclusion and exclusion criteria to ensure relevance and quality. Eligible studies were those published between 2020 and 2026, written in English, and focused on clinical teaching effectiveness, nurse educator capabilities, or clinical outcomes of nursing students within nursing or health-related educational settings. Peer-reviewed journal articles, theses, and other reputable academic publications were included. Studies were excluded if they were published prior to 2020, lacked direct relevance to the core constructs, were opinion-based or non-academic in nature, or did not provide sufficient methodological detail to support interpretation. Seminal works published before 2020 were included selectively to support foundational concepts where necessary.

The selection process involved an initial screening of titles and abstracts to identify potentially relevant studies, followed by a full-text review to determine final eligibility. Selected studies were then organized according to their relevance to the key variables of the review. To facilitate coherent analysis, the literature was categorized into four thematic areas: (1) clinical teaching and clinical teaching effectiveness, (2) capabilities and dimensions of nurse educators, (3) clinical outcomes of nursing students, and (4) the relationship between clinical teaching effectiveness and clinical outcomes. This thematic structure guided the presentation of findings and ensured that related studies were synthesized collectively rather than described individually.

A thematic synthesis approach was employed to analyze the selected literature. This involved identifying recurring patterns, key concepts, and relationships across studies, and organizing them into coherent themes aligned with the objectives of the review. Rather than summarizing studies individually, the analysis focused on comparing findings, identifying consistencies and variations, and integrating insights to develop a comprehensive understanding of the topic. Particular attention was given to the dimensions of clinical teaching effectiveness, the competencies of nurse educators, and the types of clinical outcomes reported in the literature, as well as the relationships among these constructs. This approach enabled the development of an integrated conceptual understanding of how clinical teaching effectiveness and educator capabilities influence student outcomes in clinical nursing education.

This study utilized publicly available, previously published literature and did not involve human participants. As such, formal ethical approval was not required. All sources were appropriately cited and acknowledged to maintain academic integrity and adhere to ethical standards in scholarly writing.

Results and Discussion

Clinical teaching and clinical teaching effectiveness

The reviewed literature consistently positions clinical teaching as a central mechanism in nursing education, functioning as the bridge between theoretical knowledge and real-world clinical practice. Across studies, clinical teaching is not merely described as an instructional activity but as a transformative process that shapes students' clinical reasoning, technical competence, and professional identity. Evidence indicates that effective clinical teaching involves structured planning, experiential learning, reflective practice, and continuous evaluation, all of which contribute to meaningful and sustained learning outcomes in clinical settings (Gcawu & van Rooyen, 2022; Pedregosa et al., 2020).

Within this context, clinical teaching effectiveness (CTE) emerges as a multidimensional construct encompassing pedagogical competence, clinical expertise, interpersonal skills, and professional attributes. The literature consistently demonstrates that effective clinical instructors are those who can integrate theory with practice, provide clear guidance, and create psychologically safe learning environments that enhance student engagement and reduce anxiety (Alshammari, 2020; Manninen et al., 2024). This reinforces the understanding that teaching effectiveness is not a singular ability but a synergistic interaction of multiple competencies.

Empirical studies further validate this multidimensionality. For example, Maravillas and Mallorca (2025) identified teaching effectiveness, clinical expertise, leadership, and technological proficiency as key competencies of effective nurse educators, while Cerezo (2026) emphasized the importance of standardized competency-based evaluation tools in ensuring teaching quality. In addition, the continued use of the Nursing Clinical Teacher Effectiveness Inventory (NCTEI) highlights five core domains, teaching ability, nursing competence, evaluation, interpersonal relationships, and personality, as central

indicators of effective clinical instruction. Supporting this, Emock (2020) found that interpersonal relationships and personality significantly influence student learning, while evaluation practices remain an area requiring improvement.

However, the literature also reveals inconsistencies in how these domains are prioritized. Some studies identify evaluation as the most critical dimension, while others emphasize interpersonal relationships, suggesting that clinical teaching effectiveness is context-dependent and influenced by institutional culture, student expectations, and clinical environments. This variability indicates that effectiveness cannot be reduced to a single dominant factor but must be understood as a dynamic and situational construct.

Moreover, relational and affective components of teaching are increasingly recognized as central to effectiveness. Emotional intelligence, approachability, and supportive behaviors have been shown to enhance student confidence and clinical performance. Tolentino (2024) demonstrated that emotional intelligence is significantly associated with teaching effectiveness, while Rahimi et al. (2021) emphasized the importance of caring behaviors and respect in fostering effective learning environments. These findings suggest that how educators teach is as important as what they teach.

Despite strong evidence supporting effective clinical teaching, challenges persist. Variations in faculty preparation, lack of pedagogical training, and limited institutional support continue to hinder teaching quality. Farrar-Stern and Young-Brice (2024) highlighted that many nurse educators lack formal preparation in teaching, while other studies indicate that experience alone is insufficient without continuous professional development (Al-Rawajfah et al., 2022; Martínez-Sánchez et al., 2026).

Overall, the findings confirm that clinical teaching effectiveness is a multidimensional, competency-driven, and context-sensitive construct. Effective teaching results from the integration of pedagogical skills, clinical expertise, interpersonal competence, and continuous professional development. From an institutional perspective, these findings underscore the need for structured faculty development programs, competency-based evaluation systems, and sustained support for educator training. Strengthening these areas is essential for ensuring consistent and high-quality clinical instruction.

Capabilities / dimensions of nurse educators

The analysis of the reviewed literature reveals that the capabilities of nurse educators are consistently conceptualized as multidimensional, dynamic, and integrative competencies that extend beyond traditional instructional roles. Across studies, there is a clear shift from viewing teaching as a singular function toward understanding it as a complex professional practice requiring the integration of pedagogical, clinical, interpersonal, leadership, research, and technological competencies. These capabilities are not static traits but are continuously developed through professional learning, reflective practice, and institutional support (Hull, 2024; Ye et al., 2021). This indicates that educator effectiveness is not inherent but is constructed and sustained through ongoing development, aligning with contemporary competency-based frameworks in nursing education.

Pedagogical Competence and Instructional Capability

Findings across the literature consistently identify pedagogical competence as the core dimension of nurse educator capability. This includes expertise in instructional design, facilitation of learning, assessment strategies, and feedback delivery. However, the synthesis of studies reveals a critical imbalance: while nurse educators generally demonstrate strong content knowledge, there are persistent deficiencies in evaluation and feedback practices, which are essential for student learning progression (Kalyani et al., 2020). Further expanding this dimension, recent frameworks emphasize that pedagogical competence must evolve to accommodate contemporary educational demands. For instance, Oanh et al. (2023) highlight the importance of adaptability in teaching, including digital facilitation and learner-centered strategies, while Arrington et al. (2026) stress inclusivity as a fundamental component of effective instruction. These findings suggest that pedagogical competence is no longer limited to content delivery but must incorporate flexibility, inclusivity, and innovation, reflecting the changing landscape of nursing education.

Clinical Expertise and Practice-Based Competence

Clinical expertise remains a foundational capability, particularly in bridging the gap between theory and practice. The reviewed studies consistently indicate that educators with current and active clinical experience are better positioned to facilitate meaningful learning, as they can contextualize theoretical knowledge within real clinical scenarios (Tian et al.,

2025). However, a critical insight emerging from the literature is that clinical expertise alone does not guarantee teaching effectiveness. While it enhances credibility and instructional relevance, it must be integrated with pedagogical competence to produce optimal learning outcomes. This reinforces the idea that effective teaching in nursing is not solely practice-based but requires a deliberate integration of clinical and educational expertise, positioning clinical competence as necessary but insufficient on its own.

Interpersonal and Relational Competence

Another dominant theme in the findings is the importance of interpersonal competence, which includes communication skills, emotional intelligence, and the ability to establish supportive relationships with students. The literature consistently demonstrates that positive educator–student relationships enhance engagement, reduce anxiety, and improve learning outcomes (Rahimi et al., 2021). Moreover, recent studies highlight that relational competence extends beyond support to include transformative learning processes. For example, Zhou et al. (2023) found that empathy-driven and experiential teaching approaches significantly enhance students' professional identity and affective development. These findings suggest that interpersonal competence is not merely a facilitating factor but a central mechanism through which learning is internalized, particularly in emotionally complex clinical environments.

Leadership, Scholarship, and Research Competence

The findings also indicate an expanding role of nurse educators in leadership and scholarship. Educators are increasingly expected to contribute to curriculum development, institutional improvement, and evidence-based practice. Roa (2022) highlights the influence of instructional leadership in enhancing teaching quality and student outcomes, while Frangieh et al. (2025) emphasize the importance of leadership development in preparing students for professional roles. In addition, research competence is identified as a critical component of educator capability. Jimeno and De Guzman (2024) demonstrate that institutional support and professional motivation significantly influence research engagement among educators. These findings underscore that modern nurse educators are not only teachers but also leaders and knowledge producers, contributing to the advancement of nursing education and practice.

Technological and Innovative Teaching Competence

Another key finding is the increasing importance of technological competence in clinical teaching. With the integration of digital tools and artificial intelligence in education, educators must adapt their teaching strategies to incorporate technology effectively. Kulintang et al. (2026) highlight that technology enhances teaching efficiency and personalization but also introduces ethical and pedagogical challenges. The literature suggests that technological competence is not limited to tool usage but involves meaningful integration into teaching practice, ensuring that innovation enhances rather than replaces human-centered care. This reflects a broader shift toward digitally supported yet humanistic nursing education.

Integrated Competency Perspective

A critical synthesis across the reviewed studies is the recognition that nurse educator capabilities are interdependent and integrated. Frameworks developed by Maravillas and Mallorca (2025) and Cerezo (2026) emphasize that competencies such as teaching effectiveness, clinical expertise, leadership, and technological proficiency operate collectively rather than independently. This integrated perspective aligns with global trends in competency-based education, where effectiveness is viewed as the outcome of multiple interacting competencies. It also explains why isolated improvements in a single domain may not significantly enhance teaching effectiveness unless supported by other competencies.

Synthesizing the findings, it is evident that the capabilities of nurse educators are multidimensional, dynamic, and interdependent, with pedagogical competence serving as the foundation and other competencies enhancing its effectiveness. Importantly, the literature indicates that demographic factors such as age and experience have limited influence compared to continuous professional development and active engagement in educational practice. From a practical standpoint, these findings highlight the need for comprehensive faculty development programs that address multiple competency domains rather than focusing on isolated skills. Institutions must invest in competency-based evaluation systems, provide support for research and innovation, and ensure continuous training in pedagogy and technology. Ultimately, strengthening these capabilities is essential for improving clinical teaching effectiveness and ensuring that nursing students achieve desired learning outcomes.

Clinical outcomes of nursing students

The reviewed studies consistently describe clinical outcomes as multidimensional, encompassing cognitive, psychomotor, and affective domains. These include knowledge integration, clinical competence, critical thinking, professional behavior, and readiness for practice. Evidence suggests that these outcomes are not achieved through exposure alone but require structured learning experiences and effective supervision.

Clinical Competence and Performance Outcomes

Clinical competence is a central outcome of nursing education, reflecting students' ability to integrate knowledge, perform clinical skills, and deliver safe patient care. Recent studies emphasize that clinical competence is multidimensional, involving technical skills, communication, and decision-making abilities. For instance, Tian et al. (2025) found that structured clinical education and educator competence significantly improved students' clinical performance and reduced training gaps. Similarly, Salminen et al. (2024) reported that students supervised by highly competent educators demonstrated stronger clinical reasoning, higher confidence, and improved procedural performance. These findings indicate that clinical competence is not solely dependent on exposure but is strongly influenced by the quality of clinical instruction and supervision.

Cognitive Outcomes: Knowledge Integration

Clinical education plays a critical role in enhancing students' cognitive development, particularly in integrating theoretical knowledge into real-world practice. Studies have shown that experiential and competency-based learning approaches significantly improve knowledge retention and application. For example, Buc et al. (2026) demonstrated that competency-based clinical instruction improved students' ability to synthesize knowledge and apply it in complex patient care situations. In addition, Zhou et al. (2023) found that narrative and experiential teaching strategies enhanced students' understanding of patient care and promoted deeper cognitive engagement. These findings suggest that effective clinical education facilitates not only knowledge acquisition but also knowledge application, which is essential for competent practice.

Critical Thinking and Clinical Judgment

The development of critical thinking and clinical judgment is considered one of the most important outcomes of nursing education. These skills enable students to analyze patient conditions, make informed decisions, and respond effectively in complex clinical situations. Shin et al. (2024) found that nurse educators' reflective teaching practices significantly enhanced students' critical reflection abilities, which are closely linked to clinical judgment. Furthermore, Frangieh et al. (2025) highlighted that competency-based educational approaches support the development of decision-making and leadership skills among nursing students. These findings reinforce that clinical outcomes extend beyond task performance and include higher-order cognitive processes essential for safe and effective patient care.

Affective Outcomes: Confidence, Motivation, and Professional Identity

Clinical education also significantly influences affective outcomes such as confidence, motivation, and professional identity formation. Studies indicate that supportive clinical environments and positive interactions with educators enhance students' confidence and engagement in learning. For instance, Levett-Jones et al. (2009) demonstrated that a strong sense of belonging in clinical settings improves student motivation and learning outcomes. More recent evidence by Zhou et al. (2023) showed that experiential teaching approaches enhance empathy and professional values, contributing to the development of compassionate and patient-centered care. These findings highlight that affective outcomes are essential components of clinical education, influencing both learning and future professional behavior.

Readiness for Practice.

Ultimately clinical outcomes are reflected in students' readiness for professional practice, including their ability to function independently, adapt to clinical environments, and provide safe patient care. Salminen et al. (2024) found that students exposed to effective clinical teaching demonstrated higher levels of readiness, particularly in clinical reasoning and decision-making. However, challenges such as inconsistent supervision and limited clinical exposure continue to affect preparedness for practice. These findings suggest that achieving optimal clinical outcomes requires not only effective teaching but also structured clinical experiences and supportive learning environments.

Synthesizing the literature, clinical outcomes of nursing students are multidimensional, encompassing clinical competence, cognitive development, critical thinking, affective growth, and readiness for practice. These outcomes are shaped by the interaction of instructional quality, educator competence, and the clinical learning environment. Evidence consistently indicates that effective clinical education requires structured, competency-based, and student-centered approaches that promote active learning and continuous feedback. Strengthening these elements is essential to ensure that nursing graduates are competent, confident, and capable of delivering safe and high-quality patient care.

Relationship between clinical teaching effectiveness and clinical outcomes

The relationship between clinical teaching effectiveness and student clinical outcomes is well established in contemporary nursing education literature, with evidence consistently demonstrating that the quality of clinical instruction directly influences students' competence, confidence, and readiness for professional practice. Clinical teaching effectiveness, as a multidimensional construct encompassing pedagogical skill, clinical expertise, and interpersonal competence, serves as a critical determinant of how effectively students translate theoretical knowledge into practice. Studies indicate that when nurse educators demonstrate high levels of teaching effectiveness, students are more likely to achieve positive outcomes across cognitive, psychomotor, and affective domains (Al-Rawajfah et al., 2022).

Empirical research further supports the direct impact of teaching effectiveness on clinical competence and performance. For instance, Salminen et al. (2024) found that nurse educators who exhibited strong pedagogical and clinical competencies were significantly associated with improved student outcomes, particularly in clinical reasoning, decision-making, and skill performance. Similarly, Tawfeek et al. (2021), using the Nursing Clinical Teacher Effectiveness Inventory (NCTEI), reported that teaching ability and mentorship were strongly linked to increased student self-efficacy and clinical confidence. These findings highlight that effective teaching behaviors such as clear instruction, guided practice, and constructive feedback play a crucial role in enhancing students' ability to perform safely and competently in clinical settings. In addition to technical competence, clinical teaching effectiveness significantly influences students' critical thinking and clinical judgment. Shin et al. (2024) demonstrated that educators who engage students in reflective and inquiry-based learning strategies contribute to higher levels of critical reflection, which is essential for clinical decision-making. This is further supported by Frangieh et al. (2025), who emphasized that competency-based teaching approaches foster the development of higher-order thinking skills, enabling students to navigate complex clinical scenarios. These findings suggest that effective clinical teaching extends beyond procedural instruction and plays a pivotal role in developing students' cognitive and analytical capabilities.

The affective dimension of learning is also strongly influenced by clinical teaching effectiveness. Studies have shown that supportive educator behaviors, including approachability, encouragement, and constructive feedback, enhance students' motivation, confidence, and sense of belonging in clinical environments. Levett-Jones et al. (2009) found that positive student-educator relationships significantly improve engagement and learning outcomes, while more recent evidence indicates that emotionally supportive teaching practices contribute to reduced anxiety and improved clinical performance (Manninen et al., 2024). These findings underscore that interpersonal aspects of teaching are not merely supplementary but are integral to achieving positive educational outcomes. Moreover, the relationship between teaching effectiveness and clinical outcomes is often mediated by the quality of the clinical learning environment. Papastavrou et al. (2016) highlighted that effective supervision and supportive learning environments enhance students' satisfaction and competence, while inadequate supervision can hinder learning and reduce performance. This suggests that clinical teaching effectiveness operates within a broader educational context, where institutional support, clinical resources, and student engagement interact to influence outcomes. Therefore, while educator competence is critical, its impact is maximized when supported by conducive learning environments. Despite strong evidence supporting this relationship, some studies indicate variability in outcomes, suggesting that teaching effectiveness alone does not fully determine student performance. Factors such as student motivation, prior knowledge, and clinical exposure may moderate the relationship between teaching and outcomes (Al-Rawajfah et al., 2022). However, even in the presence of these variables, effective teaching remains a consistent and significant predictor of positive learning outcomes. This reinforces the idea that while clinical education is influenced by multiple factors, the role of the educator remains central.

Synthesizing the literature, it is evident that clinical teaching effectiveness has a direct and substantial impact on nursing students' clinical outcomes, including competence, critical thinking, confidence, and readiness for practice. The relationship is both direct and interactive, with teaching effectiveness influencing outcomes through instructional quality, interpersonal support, and the facilitation of meaningful learning experiences. Importantly, the evidence suggests that the most effective

educators are those who integrate pedagogical expertise, clinical competence, and relational skills to create a supportive and engaging learning environment. From an implication standpoint, these findings highlight the need for nursing education institutions to prioritize the development of clinical teaching effectiveness through structured faculty training, competency-based evaluation, and continuous professional development. Strengthening teaching effectiveness not only enhances student learning outcomes but also contributes to the preparation of competent and practice-ready nurses capable of meeting the demands of modern healthcare systems.

Conclusion and Recommendations

This narrative review set out to synthesize existing literature on clinical teaching effectiveness, the capabilities of nurse educators, and the clinical outcomes of nursing students. The findings demonstrate that clinical teaching effectiveness is a multidimensional construct that plays a central role in shaping student learning, and that it is fundamentally grounded in the integrated capabilities of nurse educators. Across the reviewed studies, it is evident that effective clinical teaching is not achieved through isolated competencies but through the interaction of pedagogical expertise, clinical proficiency, interpersonal skills, leadership, and adaptability to evolving educational demands.

A key integrative insight emerging from this review is that clinical teaching effectiveness, educator capabilities, and student clinical outcomes are not separate constructs but interdependent components of a unified educational system. The effectiveness of clinical teaching is determined by the competencies of nurse educators, while student outcomes such as clinical competence, critical thinking, professional behavior, and readiness for practice serve as direct manifestations of this effectiveness. Moreover, this relationship is influenced by contextual factors such as the clinical learning environment and institutional support, indicating that clinical education operates within a complex and dynamic system rather than a linear cause-and-effect model.

The primary contribution of this review lies in its integrative synthesis of previously fragmented literature, bringing together three critical domains teaching effectiveness, educator capabilities, and student outcomes into a coherent conceptual understanding. Organizing the literature thematically and examining the relationships among these constructs, the review provides a more comprehensive perspective on how clinical teaching functions as a system of interconnected processes. This contributes to the advancement of nursing education by clarifying the mechanisms through which educator competencies translate into meaningful student learning outcomes.

From a practical standpoint, the findings highlight several important implications for nursing education. First, institutions must prioritize the development of nurse educator capabilities through structured and continuous faculty development programs that address pedagogical, clinical, and interpersonal competencies. Second, the adoption of competency-based evaluation systems is essential to ensure consistent and evidence-based assessment of teaching effectiveness. Third, educational institutions should invest in supportive clinical learning environments that facilitate effective teaching and optimize student outcomes. Finally, there is a need to integrate innovative and technology-enhanced teaching strategies while maintaining the humanistic values central to nursing practice.

Overall, improving clinical teaching effectiveness requires a holistic and system-oriented approach that simultaneously strengthens educator capabilities, teaching practices, and learning environments. Such an approach is essential to ensure that nursing graduates are not only knowledgeable and skilled but also critically competent, professionally grounded, and fully prepared to meet the demands of contemporary healthcare systems.

Acknowledgement

The authors would like to thank the colleagues and institutions who provided guidance, feedback, and support throughout the conduct of this research and the preparation of this manuscript.

Funding

This study did not receive any external funding from public, commercial, or non-profit organizations, and no financial support was provided for its conduct, authorship, or publication.

Competing Interests Statement

The authors declare no competing financial interests or personal relationships that could have influenced the findings or conclusions of this study.

Data Availability Statement

Data sharing is not applicable to this study, as no new data were generated or analyzed. All information used was derived from previously published sources, which are properly cited in the reference list.

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Appendices

No appendices are attached to this study.