

# Exploring Final Year Nursing Students' Perception on Soft Skills Integration in Objective Structured Clinical Examination (OSCE)

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## ABSTRACT

**Background:** The integration of soft skills into clinical skills assessment is critical in preparing nursing students for their professional role. The aim of this study was to investigate the perceptions of final-year nursing students regarding the implementation of soft skills in the Objective Structured Clinical Examination (OSCE). **Methods:** This is a qualitative study using a reflective thematic analysis approach. The participants consisted of twelfth final-year nursing students from the Kulliyah of Nursing, IIUM. The participants were selected through purposive sampling method and attended semi-structured interviews. **Results:** Four themes emerged after data analysis, including 1) perceived definition and its components 2) the benefits of integrating soft skills into OSCEs, 3) the factors that influence and hinder the use of soft skills in OSCEs, and 4) recommendations for overcoming barriers to integrating soft skills into OSCEs. **Conclusion:** The study concluded that the integration of soft skills in OSCE assessments is viewed positively by nursing students and is considered essential for their professional development. The integration of soft skills improves communication, enhances rapport and improves overall patient care. The findings highlight the importance of integrating soft skills into nursing training through workshops and simulations, preparing graduates for patient care and teamwork. Policymakers should establish standardised guidelines for consistent assessments aligned with healthcare standards.

**Keywords:** *Clinical Skills Assessment; Nursing Students; OSCE; Soft Skills Integration*

## INTRODUCTION

The integration of soft skills—such as communication, teamwork, empathy and professionalism—into nursing education has become more important as the healthcare sector increasingly values these skills alongside technical expertise. Soft skills are vital for fostering therapeutic relationships with patients, facilitating teamwork between healthcare professionals, and ensuring holistic care. Nursing educators are aware of their critical role in improving patient outcomes and recognise the responsibility to incorporate them into the curriculum (Bajjaly & Saunders, 2021; Ang *et al.*, 2022; Ng, 2020). For example, a caring and professional attitude is highly valued by both patients and healthcare providers and influences patient satisfaction and clinical outcomes (Jamaludin *et al.*, 2021). However, defining and categorising these skills is challenging as terms such as "enabling skills," "generic skills," "core skills," and "interpersonal skills" are often used interchangeably depending on the context (Widad & Abdellah, 2024). Despite these differences, soft skills generally refer to interpersonal and intrapersonal attributes—such as emotional intelligence, effective communication, conflict resolution and teamwork—that help individuals to successfully navigate their environment and achieve their professional goals.

The demand for these skills is growing given the increasingly complex and interdisciplinary nature of healthcare. Research shows that healthcare professionals who have strong soft skills are better able to manage the emotional and social aspects of patient care, leading to improved patient safety, fewer medical errors and better health outcomes. For example, studies show that effective communication between nurses and patients not only improves patient satisfaction but also reduces hospital readmissions (Oates *et al.*, 2013). Similarly, teamwork and

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collaboration are key to preventing errors in handover between healthcare providers, which have been linked to preventable adverse events (Pham *et al.*, 2021).

To teach these skills effectively, innovative pedagogical strategies are increasingly being used in nursing education. Simulation-based learning, in which students act out realistic clinical scenarios, has been shown to be a highly effective method of promoting soft skills in a safe and controlled environment (Ng, 2020; Widad & Abdellah, 2024). Through these simulations, students develop critical thinking, problem-solving skills and emotional resilience by overcoming real-world challenges without harming patients. In addition, interprofessional education (IPE) has helped improve students' understanding of collaboration in healthcare. IPE allows students from different healthcare disciplines to learn together, which promotes better teamwork, communication, and shared decision-making, ultimately leading to better patient care outcomes (Widad & Abdellah, 2022; Domo, Robalino & Fernandez, 2024). In addition, novel approaches such as escape room activities, which require students to solve complex problems under time pressure, have shown promise in improving skills in communication, leadership and critical thinking—key components of professional nursing practice (Morrell, Eukel & Santurri, 2020).

Despite these efforts, the integration of soft skills into nursing curricula remains a challenge. A major issue is that the development of social-emotional intelligence (SEI), which includes self-awareness, empathy and emotional regulation, requires sustained effort and commitment from students. According to Dolev, Naamati-Schneider and Meirovich (2021), building these skills requires a high level of commitment, and students often struggle to self-assess their competencies accurately. This can lead to gaps in the assessment process and hinder the comprehensive development of these essential skills. In addition, some educators struggle to find the right balance between teaching technical and soft skills, resulting in limited inclusion of the latter in many undergraduate nursing programs (Dolev, Naamati-Schneider & Meirovich, 2021).

Various educational interventions have shown positive results in overcoming these challenges. For example, a study by Priya and Vajrala (2022) showed that targeted educational interventions were able to significantly improve nursing students' knowledge of soft skills, with the mean knowledge score increasing from 10.92 to 19.92 after training. Similarly, the preceptorship management model, which provides students with guided, hands-on clinical experiences, has been shown to strengthen important soft skills such as communication, teamwork, and problem-solving and better prepare them for practice (Hariti & Rejeki, 2020). However, while immediate improvements are evident, the long-term sustainability of these interventions remains a topic for further research. Priya and Vajrala (2022) call for studies investigating whether the improvements in soft skills persist after students enter the workforce.

The Objective Structured Clinical Examination (OSCE) is a well-established tool for assessing clinical competence in nursing education. Traditionally, the focus has been on the assessment of technical skills and theoretical knowledge, but it is increasingly recognised that OSCEs should also assess soft skills to reflect the full complexity of real clinical practice. OSCEs consist of a series of stations where students perform specific tasks under observation, providing an ideal environment to assess soft skills in a structured way. By integrating scenarios that test communication, empathy, teamwork, and problem-solving, OSCEs can provide a more comprehensive assessment of a student's readiness for practice (Turner & Wallace, 2023). For example, assessing a student's ability to deliver bad news or resolve conflicts in patient care can provide insight into their emotional intelligence and interpersonal effectiveness.

The inclusion of soft skills in OSCEs not only ensures that nursing students can assess the full range of skills required in clinical practice but also emphasises the importance of these competencies for patient-centred care. Studies suggest that students who excel in soft skills during OSCEs are more likely to perform better in clinical practice as they are better equipped to manage the emotional and interpersonal complexities of healthcare (Bajjaly & Saunders, 2021). Furthermore, research shows that patient outcomes improve when healthcare professionals demonstrate empathy, active listening and effective teamwork—all skills that can be assessed during OSCEs (Turner & Wallace, 2023).

Despite these benefits, there are still some barriers to fully integrating soft skills into OSCEs. Many nursing students initially underestimate the importance of soft skills and instead focus on their technical skills, which can affect their preparation for soft skills assessment (Lan, 2023). In addition, the subjective nature of assessing interpersonal qualities such as empathy or emotional intelligence can complicate assessment and lead to

inconsistent grading at OSCE stations (Bajjaly & Saunders, 2021; Priya & Vajrала, 2022; Lan, 2023). These barriers, which are not yet fully understood, may hinder the comprehensive training of future nurses.

In summary, addressing the gaps in soft skills development in nursing education is critical to producing well-trained graduates who can meet the demands of modern healthcare. The aim of this study is to examine nursing students' perceptions of soft skills and how these competencies are integrated into OSCEs. By examining these perceptions, the study aims to find out how effectively soft skills are integrated into examinations and whether students recognise their importance for clinical practice. This will provide valuable insight into how educators can improve the integration of both professional and interpersonal skills into education to prepare students to provide high-quality, patient-centred care.

## METHODOLOGY

This study employed a descriptive qualitative research design to explore nursing students' perspectives on integrating soft skills into clinical skills assessments during the OSCE. A qualitative approach was preferred over a quantitative one as it is able to capture the depth and complexity of participants' perceptions, which are often nuanced and context-dependent (Richmond *et al.*, 2017). The study was conducted between January and February 2021 at the Kulliyyah of Nursing, IIUM, with a total population comprising 53 final-year nursing students. The inclusion criteria for this study consisted of final-year nursing students who had completed their clinical placements, passed all theoretical courses, and successfully cleared the OSCE. Students who were unavailable during the study period or unwilling to participate were excluded. Participants were recruited through purposive sampling in collaboration with nursing school lecturers. In this type of sampling, which is widely used in qualitative research, the researcher is looking for those who have a rich experience in the phenomenon studied and the ability and willingness to express it clearly.

An open invitation was extended during class, where the researcher provided information about the study and encouraged interested students to approach after class. Interviews were scheduled upon mutual agreement, with the timing and location determined by the participants. Written consent was obtained prior to the interviews, and participants were assured of their right to withdraw at any time without explanation. Confidentiality and anonymity were maintained, adhering to ethical standards for research involving human subjects. All interviews were audio-recorded with the participants' permission. During the sessions, students were encouraged to share their experiences with the OSCE. Each interview lasted between 40 and 45 minutes and was conducted in either Malay or English to accommodate language preferences and ensure comprehensive responses (Braun & Clarke, 2016). Individual interviews with nursing students were carried out face-to-face. In the place of conducting the interview, there were the researcher and participants and no one else present.

The sampling and coding process was stopped when additional data demonstrated frequent replication in the interview comments of the participants. Data saturation was a key determinant for the sample size, ensuring robustness in capturing the breadth of perspectives. Saturation was assessed iteratively during data collection and analysis, following Braun and Clarke's (2006) thematic analysis framework. After each interview, the data were analysed for emergent patterns, with subsequent interviews used to verify and expand identified themes. Saturation was confirmed when no new codes, themes, or categories emerged despite additional data collection, indicating that the dataset sufficiently addressed the research questions. The research team reached a collective consensus on saturation, relying on rigorous criteria, including repeated themes across interviews and redundancy in participants' responses. The decision to cease data collection was informed by established qualitative research standards, which suggest that thematic saturation often occurs with a relatively small participant pool when rich, in-depth data are obtained (Malterud, Siersma & Guassora, 2016). This approach ensured a well-justified sample size and comprehensive data coverage.

This interview contains some guiding questions for the participants. The interview guide for this study consisted of 22 questions organised into five categories. These categories included: (1) definition of soft skills with 6 questions to clarify participants' understanding; (2) implementation of soft skills with 7 questions to assess its perceived importance; (3) perception of soft skills integration in the OSCE with 3 questions to gather views on the effectiveness of integration; (4) factors influencing soft skills integration in the OSCE with 4 questions to identify influencing factors; and (5) suggestions to overcome obstacles with 2 questions aimed at suggesting solutions to integration problems. The analysis followed a six-step thematic approach (Braun & Clarke, 2006). Initially, relevant quotes were extracted from each paper and recorded to identify preliminary concepts. These

were then compiled into a dataset for open coding, utilising a colour-coding system to detect patterns. Reflection and discussion led to the formation of broader themes, which were then defined, labelled, and critically reviewed for accuracy. To ensure credibility, trustworthiness, and rigour, several strategies were employed: member checking verified the accuracy of findings against participants' experiences; peer debriefing involved discussions with colleagues to validate interpretations and enhance analysis thoroughness; and triangulation of data sources incorporated multiple participant perspectives through diverse data collection methods, enriching the findings' credibility. These practices collectively strengthened the study's validity and reliability.

**Ethical Consideration**

The study received ethical approval from the Faculty of Nursing Postgraduate Research Committee with reference number IIUM/313/G/14/3/1 on 18<sup>th</sup> February 2021 and also from the Research Management Centre of International Islamic University Malaysia, Malaysia with reference number IIUM/504/14/11/2/IREC 2020-KON2 on 20<sup>th</sup> October 2020.

**RESULTS**

Twelve final-year nursing students participated in the study, comprising 9 females and 3 males, with ages ranging from 24 to 26 years. Pseudonyms were used to maintain confidentiality. Despite the participants being only twelve, data saturation was reached (Braun & Clarke, 2006; Creswell & Poth, 2016), ensuring that no new themes or insights emerged from the collected data. Although varied interpretations of data saturation exist among researchers, Morse (2000) emphasises that achieving saturation depends on several factors, including the scope of the study, the nature of the topic, the quality of the data, and the study design (Mason, 2010). These considerations informed the study's sample size and confirmed that the data sufficiently addressed the research questions.

The results were obtained from the research questions using thematic analysis by creating a summary of the results for each theme. The analysis of the data from twelve participants identified four themes with their subthemes as shown in Table 1.

**Table 1: Thematic Analysis of the Findings**

Theme	Sub Themes
The definition of soft skills and its' components	Communication
	Teamwork
	Time Management
	Problem-Solving
	Professionalism
Benefits of the soft skills integration in OSCE	Enhanced Patient Interaction and Empathy
	Increased confidence and efficiency in clinical practice
	Effective time management
	Improved critical thinking and problem-solving skills
	Preparation for real-world clinical settings
Factors influencing and hinder the use of soft skills components into the OSCE	Environmental factors
	Personal factors
	Assessment and procedural challenges
	Practical application and preparation
Recommendations to faculty to strengthened soft skills components integration into the OSCE	Soft skills development in curriculum
	Developing a standardized tool for guidelines in the OSCE
	Enhancing practical training and preparation

## Theme 1: Perceived Definition of Soft Skills and Its' Components

Participants found it difficult to give a comprehensive definition of soft skills and often described them in terms of their key components. Components identified included communication, teamwork, time management and problem-solving. Although these components were frequently mentioned, participants' definitions did not always encompass the broader concept of soft skills, resulting in a focus on the specific attributes rather than a holistic understanding.

### *Communication*

Communication was highlighted as a crucial component of soft skills. Participants emphasised the importance of clear and empathetic communication in fostering understanding, trust, and collaboration between healthcare providers and patients. P6 noted the role of non-verbal cues, such as body language, in effective communication, stating, *"Examples of soft skills such as body language."* P1 mentioned professionalism in attitude and behaviour, noting, *"Professionalism such as attitude, professionalism, and behaviour."* P3 and P8 described soft skills as the way we interact with others, with P8 emphasizing real-world application: *"What I mean by soft skills is the way we communicate, the way we interact with a person and the respondent, in a real situation."* P2 and P7 focused on the professionalism required in patient interactions, with Baihaqi explaining, *"It's the way we speak, but in a more professional setting. So soft skills are about how they communicate with their patients, doctors, and colleagues."* P7 highlighted specific techniques to ensure patient understanding, stating, *"Soft skills are the techniques we use when we communicate with patients, the way we talk to patients."* P5 and P12 summarised that effective communication is essential for patient comprehension, with P5 noting, *"Soft skills are the way we communicate with patients so that patients can understand them, so we need to use soft skills to interact with patients,"* and P12 adding, *"Soft skills, how to communicate."*

### *Teamwork*

Teamwork was another key component, associated with collaboration among healthcare professionals. Participants recognised its importance in delivering comprehensive patient care. As a participant emphasised, *"Soft skills such as teamwork, communication, problem-solving, negotiation and time management. These are skills that help us collaborate effectively, express ourselves clearly, deal with challenges, find compromises and stay organised."* - P5

## Time Management and Problem-Solving

Time management and problem-solving were frequently cited as vital soft skills. P9 emphasised the need to complete tasks within allocated timeframes, stating, *"It's about convincing ourselves to complete the assigned task in the given time."* P2 added, *"Soft skills include body language, calming techniques, teamwork, communication, problem-solving, negotiation and time management."*

### *Professionalism*

Professionalism, particularly in attitude, behaviour, and workplace conduct, was also identified as a critical component of soft skills. Participants emphasised the importance of professionalism in ethical interactions, stating, *"Professionalism such as attitude, professionalism, and behaviour (P1). It also focused on how it influences communication with patients, doctors, and colleagues, noting, "So when it comes to soft skills, it's all about how they communicate with their patients, doctors, and colleagues." - P2*

In summary, participants identified communication, teamwork, time management, and problem-solving as essential soft skills in nursing. They emphasised the need to develop these skills through practice and real-world experience, though they struggled to provide alternative terms or synonyms for *"soft skills,"* suggesting a possible gap in conceptual understanding.

## Theme 2: Benefits of the Soft Skills Integration in OSCE

### *Enhanced Patient Interaction and Empathy*

The integration of soft skills in OSCE significantly improves patient interaction and empathy. Participants emphasised that demonstrating empathy and effective communication during OSCE is critical to building trust

and prepares them for complex patient interactions in clinical practice. *"In my opinion, this is very important because it prepares us for clinical practice. If I am not able to show good soft skills in OSCE, I will have difficulty interacting with patients in clinical practice."* – P5

#### *Increased Confidence and Efficiency in Clinical Practice*

Soft skills such as communication and time management practiced during the OSCE contribute to greater confidence and efficiency in the clinical environment. Participants indicated that effective communication and time management enabled them to complete tasks efficiently, build confidence and multitask without compromising quality. *"Soft skills such as communication and time management are essential for nurses to provide efficient patient care and build confidence in their abilities."* – P3

#### *Effective Time Management*

Time management, a key component of OSCE, has a direct impact on the efficiency and effectiveness of patient care. Participants emphasised that mastering time management during the OSCE helps students prioritise tasks, complete procedures within the time frame, and deal effectively with stressful situations *"For me, time management is probably time management for everyone else, because in an OSCE scenario where we are dealing with deteriorating patients, time management is very important to plan and deliver early treatment to patients."* – P5

#### *Improved Critical Thinking and Problem-Solving Skills*

The OSCE emphasises critical thinking and problem-solving, which are essential for effective patient care. Critical thinking enables the participant to organise procedures and solve problems efficiently: *"For me, the easiest skill is communication, and the second is critical thinking to figure out what procedure is needed and then solve the patient's problem."* – P8

#### *Preparation for Real-World Clinical Settings*

The integration of soft skills into the OSCE prepares students for the real clinical world. The OSCE experience helps students develop the skills necessary for successful clinical practice and ensures that they are well prepared to interact with patients and provide care effectively. *"Soft skills such as communication and time management are essential for us to manage patients efficiently and build confidence in our abilities."* – P4

### **Theme 3: Factors Influencing and Hindering the Use of Soft Skills Components into the OSCE**

#### *Environmental Factors*

Participants pointed out several environmental factors that affect the use of soft skills in the OSCE. Issues such as unfamiliar equipment and different teaching styles contributed to confusion and stress, which impacted student performance. The challenge of adapting to complex technologies and different environments was significant. *"At OSCE, for example, I had to deal with the equipment in the OSCE room. The equipment is not familiar with other hospital areas. So, it was quite difficult for me to get used to this situation."* – P1. The stress of having incomplete or inappropriate equipment further exacerbated anxiety and hindered the effective use of soft skills. *"It is difficult to imagine the real situation at the OSCE as there are differences in the exam environment and equipment."* – P2. This emphasises the need for better preparation and support to help students effectively overcome these challenges.

#### *Personal Factors*

Personal factors such as health problems, anxiety and lack of preparation also had a significant impact on the use of soft skills during the OSCE. Health issues such as asthma, which were exacerbated by pandemic-related measures, impacted students' performance. *"I have asthma when it comes back, you know. I used to do that because now, during the pandemic, we have to wear double masks and face shields, so I have to do things that make it harder for me to breathe."* – P11. Anxiety and nervousness, common during the OSCE, led to forgetfulness and affected students' ability to work effectively. *"Since it's an exam, all students are nervous; I myself am also nervous, and when I am very nervous, there are procedures that we understand and always do that make us forget some important parts."* – P6. Overcoming these personal challenges through mental and

physical preparation is crucial for better performance in the OSCE.

#### *Assessment and Procedural Challenges*

Assessment methods and procedural standards also had an impact on the integration of soft skills in the OSCE. Participants highlighted difficulties with the subjective nature of soft skills assessment and inconsistencies between assessors. *"These soft skills, as I said, belong to subjective skills. It's difficult for us to write a script because these soft skills are different for some people; for example, one examiner, the first examiner, assesses these soft skills one way, and the second examiner assesses these soft skills differently."* – P11. The lack of standardised procedures for assessing soft skills posed a challenge and underscored the need for consistent assessment criteria to ensure fairness and accuracy in assessing students' skills.

#### *Practical Application and Preparation*

Finally, participants emphasised the importance of practical application and preparation for the OSCE. Practical experience and familiarity with equipment and procedures are essential to effectively demonstrate both clinical and interpersonal skills. *"The challenge of finding and using equipment during OSCE. Unfamiliar or incomplete equipment is affecting performance."* – P10. Better preparation and practice in realistic environments are necessary to improve students' ability to effectively manage soft skills and clinical tasks during OSCE. *"If I could procrastinate, I would do more hands-on lab work so I can do better when I have to deal with OSCE pro."* – P11.

### **Theme 4: Recommendations to Faculty to Strengthen Soft Skills Components Integration into the OSCE**

The participants made several recommendations to address the obstacles encountered while they integrate soft skills in the OSCE. These suggestions focus on improving the curriculum, standardising assessment tools and improving practical training.

#### *Soft Skills Development in Curriculum*

The participants advocated a more structured and comprehensive approach to integrating soft skills into nursing curricula. They recommended that universities standardise the teaching of soft skills in all nursing programs to ensure consistency and thorough preparation. *"I believe the curriculum should be standardised across all universities"* – P8. In addition, participants recommended conducting specialised workshops on soft skills relevant to clinical practice to better prepare students for real-world scenarios. *"In my opinion, soft skills are best taught in conjunction with procedures. As educators, they can explain each procedure thoroughly to better understand the soft skills involved."* – P6. Such workshops can boost students' confidence and improve their ability to provide effective patient care – P9.

#### *Developing a Standardised Tool for Guidelines in OSCE*

Participants emphasised that they need a standardised tool to guide soft skills assessment in OSCE. They noted that *a standardised checklist or guidelines could help ensure fair and consistent assessment of students' soft skills. "These soft skills are indeed subjective, but maybe there's a way, I don't know if it's possible or not, in terms of payroll management, the admissions office or the admissions association, to create a standard curriculum."* – P8. Participants also suggested that instructors should explain the components of soft skills and their application in clinical practice in more detail. *"The instructors need to explain more to the participants because this is one of the most important components of soft skills so that the participants become more aware of soft skills."* – P5. To eliminate the inconsistency of assessments, it was suggested that separate guidelines or checklists be developed specifically for soft skills assessment. *"We need more efforts to improve soft skills, such as improving the OSCE checklist."* – P11.

#### *Improving Practical Training and Preparation*

Participants recommended focusing more on practical training and preparation to better integrate soft skills into the OSCE. They suggested holding intensive preparation courses to build confidence and skills before the OSCE. *"For me, I need to have an intensive OSCE preparation course to build my confidence when I go to the OSCE."* – P12. Improved training in the skills lab/clinical simulation centre and offering more realistic simulations and practical sessions were also suggested to bridge the gap between theoretical knowledge and

practical application. Participants emphasised the need for clearer and more practical guidelines to support the effective demonstration of soft skills during OSCE. *"There needs to be new guidelines. Because if the average person that we have has a checklist where soft skills have an item at the bottom, they just write a soft skills marquee on anything like that..."* – P6.

Overall, these recommendations underscore the importance of integrating soft skills training into nursing education and ensuring that assessments are standardised and reflective of real-world clinical settings. Implementing these changes can help improve the effectiveness of the OSCE and better prepare nursing students for their careers.

## DISCUSSION

This study highlights the current state of soft skills integration in nursing education and shows that while these skills are recognised as critical to effective nursing practice, there is a significant gap in their systematic inclusion in the curriculum. The findings suggest that student nurses often struggle with the practical application of soft skills, which is consistent with current literature.

The findings of this study are consistent with those of a previous study which found that nursing students often do not fully recognize the importance of soft skills until they are confronted with real-world challenges during clinical placements (Gencbas & Boztepe, 2023). This delay in recognition points to a critical gap in nursing education where theoretical knowledge is not always translated into practical competence. Similarly, it has been highlighted that students' awareness of non-technical skills (NTS) often does not match their actual practice until they gain more clinical experience, suggesting that the development of these skills is gradual and influenced by practical experience (Wevling *et al.*, 2023).

The study also identified several barriers to the effective acquisition of soft skills, including insufficiently structured educational approaches and limited practical application opportunities (Lan, 2023). These barriers contribute to the observed discrepancy between students' theoretical understanding and practical implementation of soft skills. Lan's (2023) observations are echoed by Sancho-Cantus *et al.* (2023) who noted that the COVID-19 pandemic has exacerbated challenges in soft skills development and highlighted the growing need for emotional intelligence and adaptability in nursing practice. This disruption has emphasised the urgency of integrating soft skills more effectively into nursing education.

In addition, one study found that the lack of integration of soft skills into nursing curricula was consistent with the findings of the study and emphasised the need to embed these competencies into educational standards (Novokreshchenova *et al.*, 2022). This need for curriculum improvement is also supported by Laari, Anim-Boamah and Boso (2022), who call for a more integrated approach to the teaching of soft skills in nursing education. In their report, they emphasise the importance of aligning education with the demands of practice in order to better prepare nursing students for professional challenges.

The challenges identified in this study, such as the limited emphasis on soft skills in clinical assessments and the need for more structured teaching strategies, are consistent with the findings of previous research. Widad and Abdellah (2022), for example, suggest that strategies such as simulation-based learning and interprofessional education can effectively address these gaps. Simulation-based learning provides a controlled environment in which students can practice soft skills such as communication, empathy, and teamwork without the immediate pressures of the real clinical setting (Azzouzi & Gantare 2024). Similarly, interprofessional education fosters collaboration and communication skills by allowing students the opportunity to work alongside peers from other healthcare disciplines, enhancing their ability to work effectively in a team-based environment Alshawish, El-Banna & Alrimawi, 2021. However, implementing these strategies requires significant commitment from faculty and students, as Scholtz and Hughes (2021) emphasise. They emphasise that faculty must be adequately trained and motivated to integrate these methods into their teaching, and students must actively engage in these learning opportunities. This engagement is critical to bridging the gap between theoretical knowledge and practical application, although it can be difficult to achieve.

The results of the study highlight a widespread problem: although the importance of soft skills in nursing education is widely recognised, current educational practices often fail to adequately prepare students for the complexities of nursing practice. This discrepancy suggests that a more focused integration of soft skills into



nursing curricula is needed, coupled with improved teaching methods and enhanced practice experiences. Research by Tadjer *et al.* (2022) supports this view, indicating that targeted curricula focused on soft skills development can lead to improved clinical performance and better patient outcomes. Furthermore, the work of Hardie *et al.* (2022) highlights that comprehensive educational programs that include soft skills significantly improve students' preparation for the challenges of practice. Future research should further explore and refine the methods of incorporating these skills into nursing education and evaluate their effectiveness in terms of student outcomes and quality of patient care. This research is critical to the development of evidence-based strategies that can effectively address the identified gaps and improve nursing education overall.

### **Limitation**

This study highlights the need for enhanced soft skills education in nursing programs to improve patient care and interdisciplinary collaboration. However, reliance on self-reported data may introduce bias, reflecting perceptions rather than actual abilities. Additionally, the small sample size, despite data saturation, limits generalizability. Future research should incorporate objective assessments and larger, diverse samples to strengthen findings and guide curriculum improvements.

### **CONCLUSION**

This study highlights a critical gap in the integration of soft skills into nursing education and emphasises the urgent need for a more structured and comprehensive approach to their inclusion. Although soft skills such as communication, teamwork and emotional intelligence are increasingly recognised as essential components of effective nursing practice, their systematic inclusion in curricula remains inadequate. Findings show that student nurses often struggle to apply these skills in clinical practice, a challenge exacerbated by existing gaps in educational strategies and limited opportunities for practical application. This discrepancy between theoretical understanding and practical competence calls for urgent reform of nursing education. More effective curriculum integration and the introduction of innovative teaching methods such as simulation-based learning and interprofessional education could significantly improve the preparation of nursing students for the complexities of modern healthcare.

Given the challenges identified, particularly in the assessment of soft skills during OSCEs, future research should focus on the development and validation of standardised assessment tools. These tools are essential to ensure that the assessment of soft skills by different assessors is both consistent and fair. A standardised assessment framework would mitigate the inherent subjectivity associated with soft skills assessment, thereby increasing the reliability of OSCEs as a comprehensive assessment procedure. In addition, longitudinal studies are crucial to assess the long-term impact of soft skills training on nursing practice. Such a study would provide valuable insight into the retention of these skills over time and their impact on patient care and professional development. By establishing clear assessment criteria and standardised guidelines, as well as evaluating the lasting benefits of soft skills training, educators can better prepare nursing students for the complex demands of clinical practice. This approach will not only improve the accuracy of assessment but also contribute to better patient care outcomes and more effective professional development of nurses.

For future research, it is recommended more diverse samples be utilised, such as among other nursing, medical and allied health students. Incorporating objective measures, such as direct observations, peer assessments, or standardised evaluations, could complement self-reported data and provide a more holistic perspective. Such methodological refinements would strengthen the validity of the findings and contribute to a deeper understanding of how soft skills are effectively integrated into nursing education.

### **Conflict of Interest**

The authors declared no conflict of interest.

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