Report-Summer_Internship.docx

Summer Internship Report

At

Rajiv Gandhi Cancer Institute & Research Centre

(May 12th to July 12th 2025)

A Report on

Assessment of Nursing Staff Perception Towards Soft Skills Training Programs at RGCIRC Based on Structured Feedback

By

Ms. Asmita Shastri

Post-graduate Diploma in Hospital and Health Management

2024-2026

IIHMR DELHI

International Institute of Health Management Research, New Delhi

Internship Certificate



RGCIRC
Ethics, Empathy & Excellence

HR/2025

12th July 2025

WHOMSOEVER IT MAY CONCERN

Rajiv Gandhi Cancer Institute and Research Centre is today counted amongst Asia's premier exclusive cancer centers that offer unique advantage of cutting-edge technology, put to use by renowned super specialists. This potent combination of man and machine ensures world-class cancer care to not only patients from India, but also from neighboring SAARC countries and others. We are fortunate to have touched lives of more than 3.5 lakh patients since inception in 1996.

The Institute offers super specialized tertiary care services in Medical, Surgical and Radiation Oncology, streamlined into dedicated Site-specific teams. Super Specialists at RGCIRC practice an organ specific multi-disciplinary approach to cancer diagnosis and treatment, with the Tumor Board acting as second opinion clinic for cases that are more critical than others.

RGCIRC has been consistently ranked amongst India's Best Oncology Hospitals, and has been the recipient of many awards, including National Business Leadership & Service Excellence Award 2017 for Best Oncology Hospital in India, Indywood Medical Excellence Award 2017, Most Trusted Hospital in Oncology 2017 by India Today (Reader's Digest), India's Most Trusted Hospital for Oncology (Reader's Digest Most Trusted Brands 2016) and Runner up in Finest India Skills & Talent Award 2020 organized by Fire & Security Association of India, Ranked no. 1 (Best Oncology Hospital) in Delhi 2023 by Outlook, Best Specialized Hospital in Asia Pacific region specializing in oncology 2023 by an American Leading Magazine News Week and World's Best Specialized Hospital 2024 specializing in oncology by News Week.

This is to certify that **Ms. Asmita Shastri** has completed her internship in this Institute in the Department of **Human Resources** from **12th May 2025 to 1st July 2025.**

During this period her conduct and behavior was found to be commendable.

We wish her all the best for her future endeavors.

Rekha Sharma
Senior Manger-HR

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Certificate of Approval

The Summer Internship Project of titled

"Assessment of Nursing Staff Perception Towards Soft Skills Training Programs at RGCIRC Based on Structured Feedback"

at International Institute of Health Management Research, New Delhi is hereby approved as a certified study in management carried out and presented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of Post Graduate Diploma in Health and Hospital Management for which it has been submitted.

It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed, or conclusion drawn therein but approve the report only for the purpose it is submitted.

Name of the Mentor Dr. Shikha Bassi

Designation Assistant Professor

IIHMR, Delhi

FEEDBACK FORM

(Organization Supervisor)

Name of the Student: Asmita Shastri

Summer Internship Institution: Rajiv Gandhi Cancer Institute & Research Center

Area of Summer Internship: Human Resource Management

Attendance: 100 %.

Objectives met:

Deliverables:

Strengths: Punctual, attentive

Suggestions for Improvement:

P. Kumar

Signature of the Officer-in-Charge (Internship)

Date: 28-06-2025

Place: Delhi

FEEDBACK FORM

(IIHMR MENTOR)

Name of the Student: Asmita Shastri

Summer Internship Institution: Rajiv Gandhi Cancer Institute & Research Center

Area of Summer Internship: Human Resource Management

Attendance:

Objectives met:

Deliverables:

Strengths:

Suggestions for Improvement:



Signature of the Officer-in-Charge (Internship)

Date:

Place:

Asmita ST 1

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ACKNOWLEDGEMENT

I could not have finished this report without the people below.

Dr. Shikha Bassi, my institutional mentor, gave me steady support and patient guidance, and her suggestions improved both the quality and the direction of this report.

At RGCIRC, Mr. Prateek Kumar (Deputy Manager, Training & Development) and Mr. Jeevan Singh (Senior Manager, HR) mentored me through the internship. Both were busy, and both still found time to give me real responsibilities and to explain how the work is done in practice.

My family kept me going with their patience and encouragement, and gave me the space to focus. Any errors that remain are mine.

TABLE OF CONTENTS

Section A

1. Introduction……4
2. Vision, Mission and Values……6
3. Overview of the HR Department - Department Structure…….7
4. Key Roles & Responsibilities…….……7
5. Core HR Processes Observed…….……8
   5.1 Employee Onboarding process…….……8
   5.2 Payroll & Benefits Administration…….……..8
   5.3 Employee Engagement Activities……9
   5.4 Training & Development Initiatives…….……9
   5.5 Performance Appraisal Process…….…..…10
   5.6 Handling Grievances & Conflict Resolution……..10
   4.7 Exit Process & Employee Offboarding……...…….……11
6. My Weekly Activities……...…….……11

Section B : Project

1. Introduction…….…….14
2. Rationale……..….14
3. Aim and Objective……14
4. Review of Literature…….……15
5. Methodology…….……15
6. Data Analysis and Interpretation…….……..17
7. Discussion…….22
8. Conclusion…….……....22
9. References…….23

Observational Learning

Section-A

1. Introduction:



(1) RGCIRC is one of Asia's leading dedicated cancer centres. It pairs advanced technology with senior specialists and treats patients from India, the neighbouring SAARC countries and beyond. Since it opened in 1996 it has treated more than 3.5 lakh patients.

The hospital was set up in Delhi in 1996 by the Indraprastha Cancer Society and Research Centre, a not-for-profit body registered under the Societies Registration Act 1860. Its founders were philanthropists with no funds of their own, who raised the money to start the hospital through sustained effort.

As a not-for-profit, RGCIRC works alongside government efforts in healthcare.

Its tertiary services cover medical, surgical and radiation oncology, organised into site-specific teams. Specialists treat each organ site through a multidisciplinary approach, and the Tumor Board acts as a second-opinion clinic for the harder cases.

Technology is a large part of the pitch. The campus covers nearly 2 lakh square feet and has over 500 beds, and a second unit operates at Niti Bagh in South Delhi, which makes RGCIRC one of the largest tertiary care centres on the continent. It has 14 modular operation theatres, with three-stage air filtration and gas scavenging, plus 3 minor theatres for day-care surgery.

Critical care is covered by a 51-bed surgical ICU and a 21-bed medical ICU. There is a dedicated leukemia ward, a separate thyroid ward, and an independent 22-bed Bone Marrow Transplant Unit, which is credited with pioneering unrelated-donor, MUD and stem cell transplants. Renal replacement therapy and endoscopy, including EBUS and endoscopic ultrasound, are also available.



Mission

To provide cancer care at an international standard at an affordable price, and to contribute to the fight against cancer in India through patient services, education, prevention and research.

Vision

To be India's most trusted cancer care institution, known for:

- a wide range of oncology services that patients can afford
- a highly skilled team working with the latest medical technology

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Values

Every individual is treated with empathy, and every action is held to the highest ethical standards. The organization is built on mutual respect, honesty and transparency, and is committed to accurate diagnosis, honest medical guidance and effective treatment.

(1)

3. Overview of the HR Department - Department Structure

At RGCIRC the HR department reports to the Chief People Officer, who sits on the executive leadership team. The Senior HR Manager runs it day to day.

There are 5 sub-functions:

- **Recruitment & Talent Acquisition**
- **Payroll & Benefits Administration**
- **Training & Development**
- **Employee Relations & Engagement**
- **Compliance & Grievance Redressal**

Each sub-function has its own HR executives, reporting to a team lead.

In practice the HR team sits between employees and administration.

4. Core HR Processes Observed

4.1. Employee Onboarding Process

- New joiners handed in their Aadhaar card, qualification proofs and medical reports.
- HR then created employee IDs and logins for the hospital systems.
- A welcome session covered hospital rules, dress code, shift timings and departments.
- New staff met their team and were taken on a hospital tour.
- Each joiner was assigned a senior colleague as a mentor for the first few weeks.
- Example: newly joined staff went through a one-day induction.

5.2 Payroll & Benefits Administration

- Payroll runs monthly through HR software, which calculates salary, deductions (PF, ESI) and net pay.
- Before payroll is finalised, HR updates attendance and leave records.
- HR also manages benefits such as health insurance and meal coupons.
- I watched salary slips being issued and saw how HR handled queries about tax deductions.
- Example: one employee's confusion about tax on HRA was sorted out during a salary discussion.

5.3 Employee Engagement Activities

- Monthly birthday celebrations, with cake and greetings.
- Festivals such as Diwali, marked with team games and decoration competitions.
- Feedback forms asking employees what they liked and what they wanted changed.
- Doctors' Day and Nurses' Week, to honour clinical staff.
- Example: a talent show where staff sang and danced.

5.4 Training & Development Initiatives

- Internal sessions ran regularly on infection control, soft skills, disaster management, fire safety and Excel, among other topics.
- External trainers were brought in for soft skills, for example Dr. Reddy's trainers.
- Nurses attended these soft skills sessions every month.
- Admin staff were given online modules on the hospital software.
- After each session I helped take attendance and prepare the feedback forms.
- Example: a workshop on "Dealing with Patient Attendants" helped front desk staff with communication, and a session on personal grooming and hygiene was run for the security staff.

5.5 Performance Appraisal Process

- Every six months employees submit a self-appraisal form describing their work.
- Reporting managers rate them against goals achieved.
- In some cases peers also give feedback (360-degree feedback).
- Results are discussed in review meetings and feed into salary increments.
- HR keeps the appraisal history on record for future promotions.
- Example: a lab technician received appreciation and a bonus for covering extra workload during a staff shortage.

5.6 Handling Grievances & Conflict Resolution

- Employees can bring issues such as workplace behaviour or shift problems to HR.
- HR speaks to both parties confidentially to understand the problem.
- Where needed, HR sets up a meeting between the employee and their reporting head.
- Written complaints are tracked and closed within a fixed time frame.
- I saw one shift timing issue resolved by adjusting the duty roster.
- Example: a ward assistant complained about a colleague's rude behaviour, and HR handled it calmly.

5.7 Exit Process & Employee Offboarding

- The resignation letter is accepted and discussed with the reporting manager.
- The employee returns ID cards and uniforms and clears any dues.
- HR holds an exit interview to find out why the person is leaving and to collect feedback.
- Full and final payment includes any pending leave or allowances.

- I saw exit interview forms being filled in and filed for HR's analysis.

MY WEEKLY ACTIVITIES

Week 1&2: 12th May – 25th May

- I entered past training data into Excel and learned that training records feed into annual performance appraisals.
- I attended the Management Development and Disaster Management training sessions and handled attendance at both.
- I made calls about internship certificates and sat through a Basic Life Support (BLS) session to see how emergency preparedness is taught.
- I updated training attendance, designed employee birthday cards and made a PPT on email etiquette.
- I also helped draft observership and internship completion letters, which gave me a feel for HR's documentation formalities.
- I attended the Abhilasha soft skills programme for nursing staff and kept up the training attendance entries.

Week 3 & 4: 26th May – 08th June

I made e-birthday cards for employees and put together a presentation on Personal hygiene and grooming matter for workplace decorum.

- The hospital's staff orientation program gave me a wide view of how it runs Structure, values, and how HR runs things.
- I brought volunteering candidates in for interviews and confirmed their Attendance.
- I was still logging training attendance in Excel, and I went to a NABH session My first look at quality norms in hospitals, standards. I also picked up how outside trainings get documented and how the hospital covers what it costs, and the Learning & Development Manager turns in Quarterly training reports go to the HR HOD.

- I went through the HR Manual/SOP, and it laid out the departmental policies and rules and Processes.
- That's where I picked up a thing or two about Motivation and recognition matter**.**

Week 5 to 8: 9th June – 11th July

- I helped coordinate onboarding paperwork for new hires: forms, Photo collection and ID card requisition.
- I drafted job descriptions and offer letters while the [supervisor] oversaw my work. Recruitment Officer.
- I called and emailed the candidates I'd picked to confirm they were joining And then there's the chase for missing documents. I sat through a quick training session on the ATS, the Applicant Tracking System. hospital uses.
- I put together a daily recruitment status report. It lists open positions and candidates Work on the pipeline and the joinings is done.
- I put together welcome kits for new hires, with ID card forms, the HR A handbook, plus a checklist for joining.

Section-B

Project Report

Assessment of Nursing Staff Perception Towards Soft Skills Training Programs at RGCIRC Based on Structured Feedback

1. Introduction

Communication, emotional intelligence, teamwork, empathy and stress Management now counts as a core competency for nurses. They shape how well patients are cared for, and they matter for nurse satisfaction too. Teamwork and safety. Yet companies rarely measure soft skills training in a In hospitals, especially in India, it's done in a structured way. Research that's out there points in the same direction.

Hussein and Elsaiad Soft skills training was found by (2021) to improve how nurses perform. Leadership. Communication. Conflict resolution. In a randomized controlled trial, Zhang et al. (2021) found that tiered, varied training modules improved nurse-patient rapport and the efficiency of teamwork.

To evaluate the training at RGCIRC, this study uses the Kirkpatrick Four-Level Training Evaluation Model (Kirkpatrick & Kirkpatrick, 2006)(3), which looks at four levels:

- Reaction (participant satisfaction and relevance),
- Learning (knowledge or confidence gained),
- Behavior (use of the skills at work), and
- Results (effect on organizational or patient outcomes).

A recent systematic review by Olsen et al. (2025) argues that evaluation has to go beyond learner satisfaction and examine behavioral change and clinical practice. This study looks at one soft skills training program at Rajiv Gandhi Cancer Institute and Research Centre (RGCIRC), a tertiary care hospital in India. Feedback came in through a structured questionnaire from Nursing staff took part, and the training was tied to the first three Kirkpatrick levels. (Reaction, learning, and the behavior change they intend) (3). One open-ended Suggestions for improvement were collected from the question.

2. Rationale

In India, the systematic evaluation of soft skills training for nurses in hospitals is rarely done, so there is little local evidence on whether it works. This study is a first step to fill that gap at RGCIRC using Kirkpatrick's Four-Level Evaluation Model(2) . Satisfaction and confidence is the substitute for Level 1 (Reaction) and Level 2 (Learning). Nurses' stated intention to use the skills is Level 3 (Behavior). In previous work, this kind of training has been linked to improved performance and nurse-patient relationships (Hussein & Elsaiad, 2021; Zhang et al., 2021), and Teaching and Learning in Nursing (2024) supports interactive, experiential methods.

3. Aim and Objective

Aim: Assessment of Nursing Staff Perception Towards Soft Skills Training Programs at RGCIRC Based on Structured Feedback

Objectives:

- To assess nurses' satisfaction with soft skills training sessions.
- To evaluate the perceived applicability of training content in day-to-day patient care.
- To understand the effectiveness of trainers and training methods.
- To collect feedback and suggestions for improving soft skills training initiatives.

4) Review of Literature

A very important and indeed fundamental aspect of nursing care and patient safety is teamwork and communication, along with emotional resilience. Stress management is the single most important skill in the hospital environment where there is already so much stress and so many emergencies. Therefore specialised training for the staff, particularly the nurses, is absolutely essential. The type of training that should be delivered is one that is developed through a structured approach, namely the Kirpatrick's Four Levels (Reaction, Learning, Behaviour and Results) which provides a robust framework. All of the studies listed below form the evidence base for this assessment.(2)

● A quasi-experimental study of soft skills was conducted by Hussein and Elsaiad (2021) - a programme for Head Nurses resulted in real gains in leadership and communication. Conflict

resolution was one of the components and the nurses were quite happy with both the content and the way the trainer delivered it - that's Kirkpatricks Level 1 (reaction) and Level 2 (learning) (2). That study is a useful reminder to track what people say they've seen and indeed Level 2 as well. Relevance and actual knowledge gained. Azzouzi and Gantare (2024) looked at active learning strategies, specifically role plays. They looked at simulations and group discussions among the nursing students and found that their attitudes towards communication and stress improved significantly on the plus side (i.e. their attitudes towards managing people and working as a team). That's the case with the hands-on approaches when it comes to soft skills (3). That training clearly falls within Level 2 (Learning) and Level 3 (Behaviour) as the students were clearly ready to apply what they had learned (2). A study(Azzouzi and Gantare,2024) looked into various active-learning mechanisms, including

● Kawashima et al (2024) carried out a systematic review and meta-analysis of the research on emotional intelligence training for nursing staff. The programmes were found to improve emotional intelligence, stress management, communication and resilience. The review makes the case for building Emotional regulation fits into soft skills modules, and it's also used to assess them at Level 3 [Behavior].(4)

● Pang et al (2023) put a layered soft skills training model to the test (one that was delivered in a variety of ways) in the context of clinical nursing training and found real gains in both communication and teamwork. Professional conduct too.(5)

5.Methodology

Study Setting:

Rajiv Gandhi Cancer Institute and Research Centre (RGCIRC), June 2025.

Target Population:

Nursing staff who attended soft skills training.

Study Design:

Descriptive cross-sectional

Sample Size:

30 nurses who had undergone soft-skills training.

Sampling Method:

Convenience sampling

Data Collection Tool:

Structured Google Form questionnaire with:

- 8 close-ended Likert Scale Questions

- 1 open-ended Question asking for suggestions

  Justification for Likert Scale:

  Used to quantify participant attitudes and satisfaction, supported by Joshi & Goyal (2020) and Boone & Boone (2012).

  Data Analysis:

- **Quantitative:** MS-Excel used to generate percentages and stacked bar charts.
- **Qualitative:** Thematic Analysis of open-ended question (Braun & Clarke, 2006 Framework)

  Theoretical Framework:

  Based on Evaluation Model of Kirkpatrick [Level 1 – Reaction, Level 2 – Learning].

- **QUESTIONNAIRE:**

1. The training content was relevant to my daily nursing duties.

	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree

2. The trainer communicated effectively and used understandable language.

	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree

3. The session kept me actively engaged throughout.

	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree

4. I feel more confident now in handling communication with patients and their families.

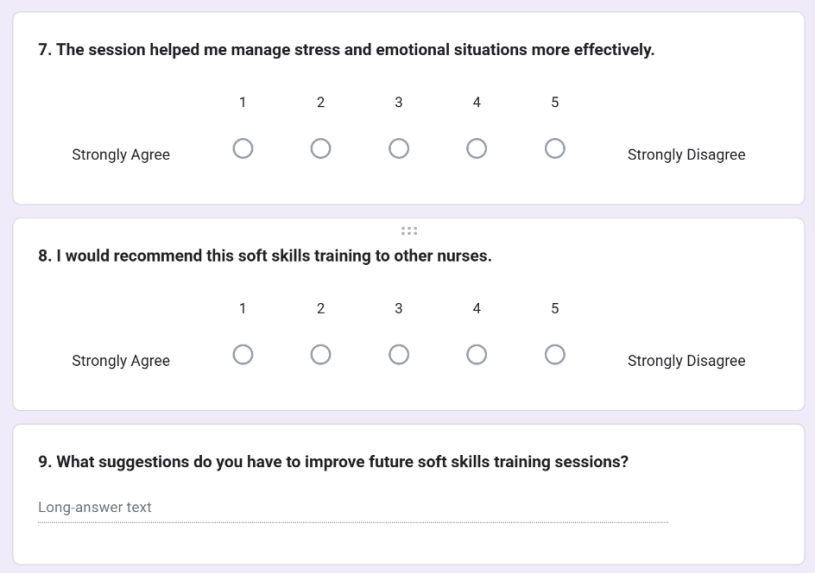
	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree

5. The examples and activities used in the session were relatable and practical.

	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree

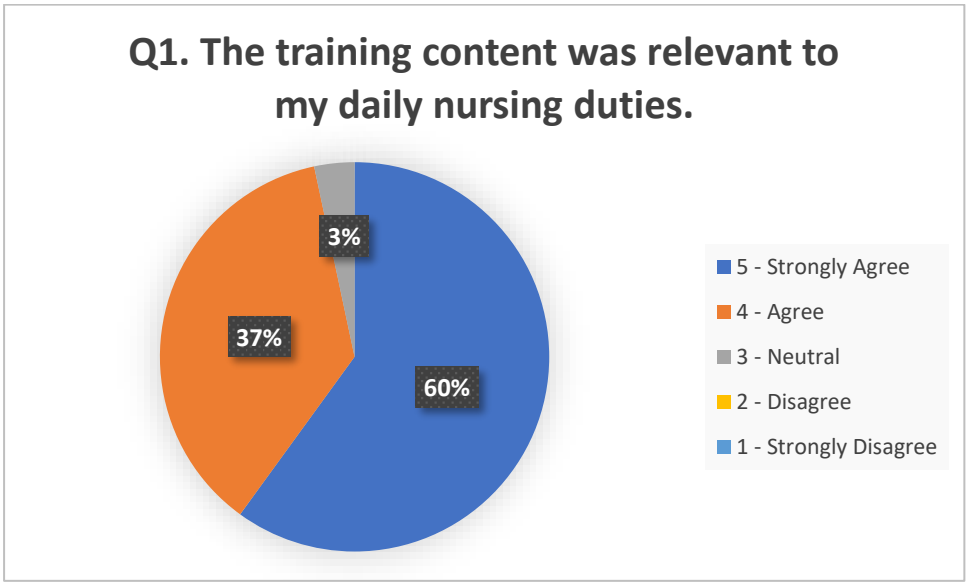
6. I will be able to apply the soft skills learned in real-life hospital situations.

	1	2	3	4	5	
Strongly Agree	○	○	○	○	○	Strongly Disagree



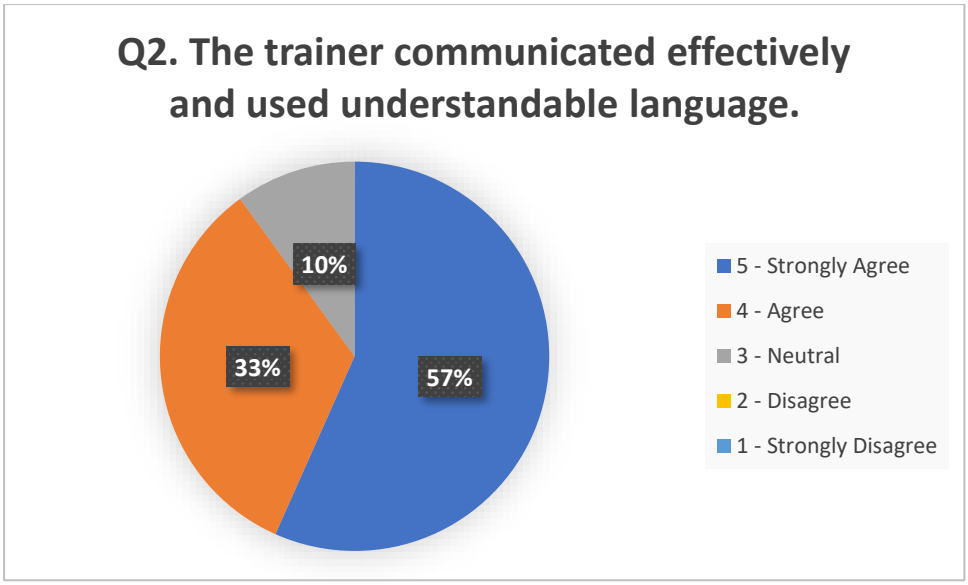
6.Data Analysis and Interpretation

The following section presents the analysis of structured feedback from 30 nurses who participated in soft skills training sessions at RGCIRC.



- **18 nurses (60%)** strongly agreed
- **11 nurses (36.7%)** agreed

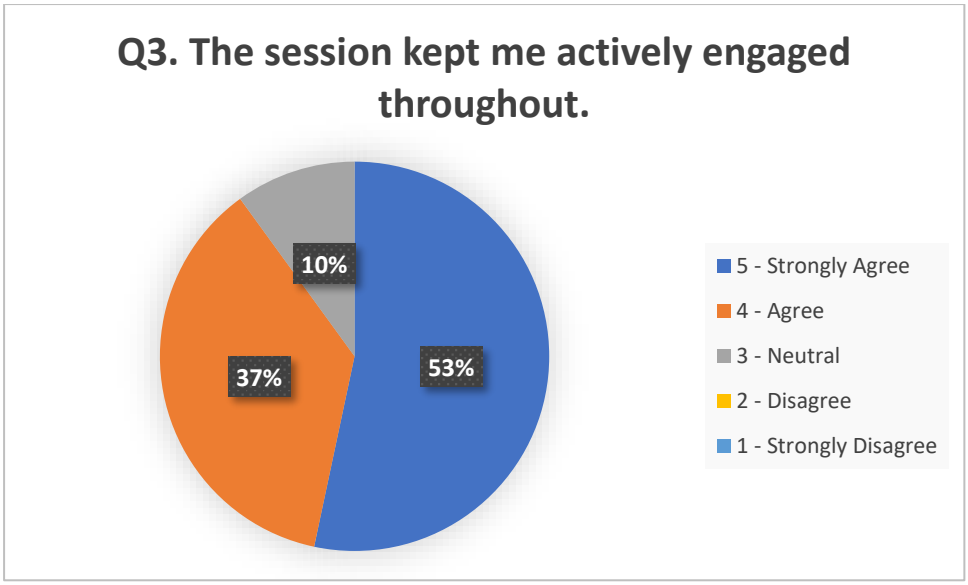
- 1 nurse (3.3%) wasn't sure either way, so that's neutral. Interpretation: Nearly all nurses, 96.7%, said the content was relevant, so the training lined up with what they do each day.



- **17 nurses (56.7%)** strongly agreed
- **10 nurses (33.3%)** agreed
- **3 nurses (10%)** were neutral

Interpretation:

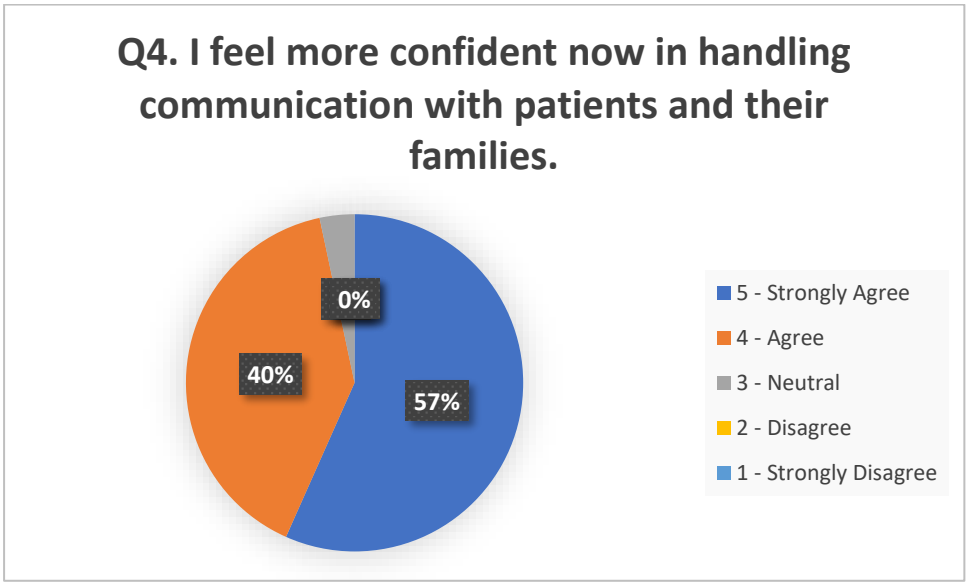
Majority said the trainers were clear and effective. The three who didn't That responses point to a bit of room for clearer delivery.



- **16 nurses (53.3%)** strongly agreed
- **11 nurses (36.7%)** agreed
- **3 nurses (10%)** were neutral

Interpretation:

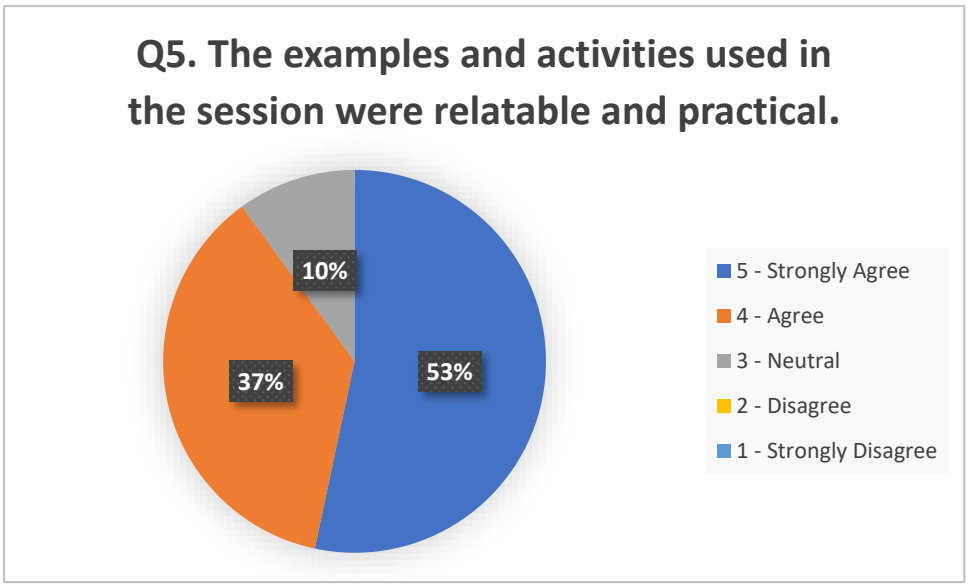
Majority called the sessions engaging. The ones who stayed neutral pointed that more role-plays or group activities would help. Nurses said they felt more confident after the training. This suggests that the sessions built communication skills.



- **17 nurses (56.7%)** strongly agreed
- **12 nurses (40%)** agreed
- **1 nurse (3.3%)** was neutral

Interpretation:

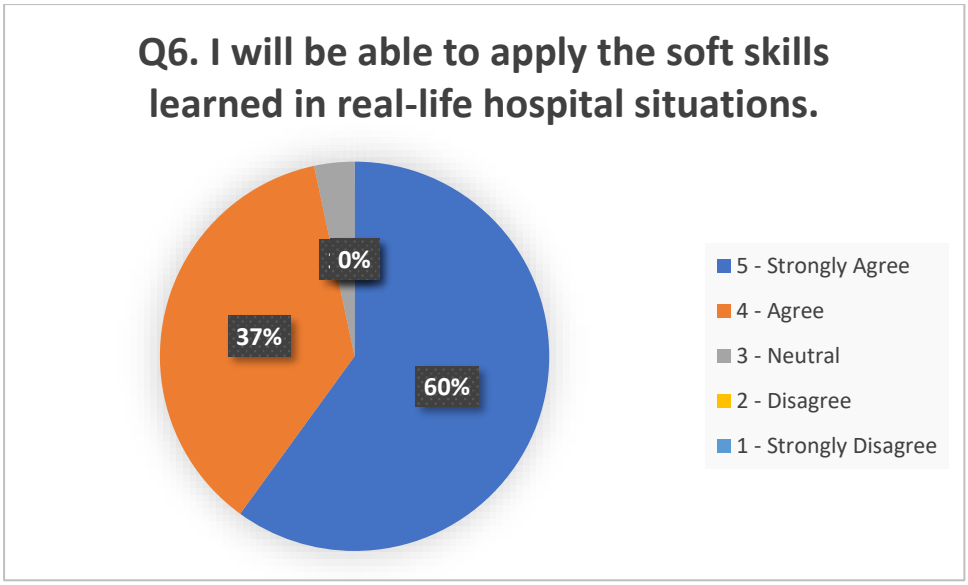
Majority felt more confident after the training, which suggests the sessions built emotional intelligence and communication skills.



- **16 nurses (53.3%)** strongly agreed
- **11 nurses (36.7%)** agreed
- **3 nurses (10%)** were neutral

Interpretation:

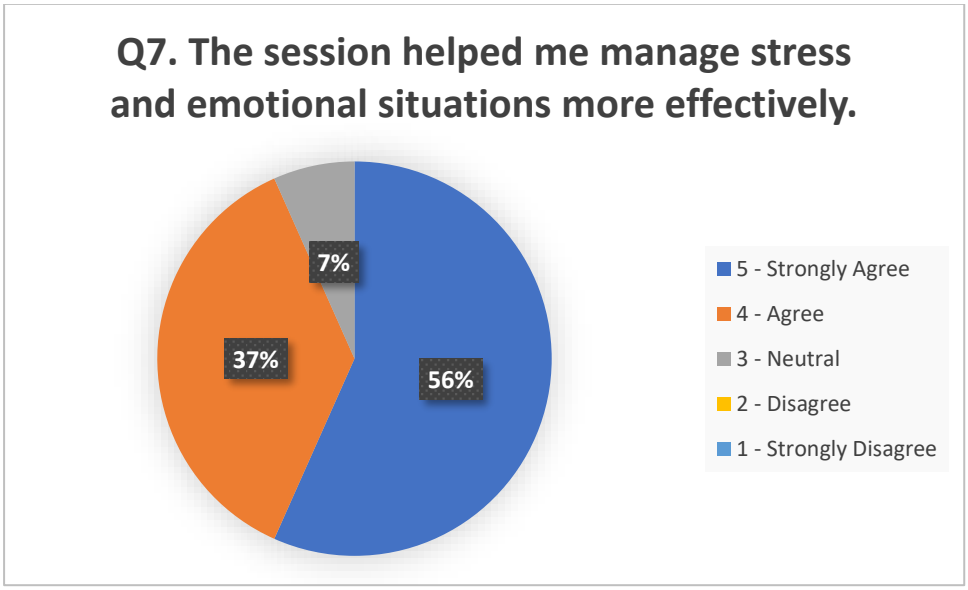
Majority said the training was practical and relevant to their day-to-day work situations, which helped them to put it to use.



- **18 nurses (60%)** strongly agreed
- **11 nurses (36.7%)** agreed
- **1 nurse (3.3%)** was neutral

Interpretation:

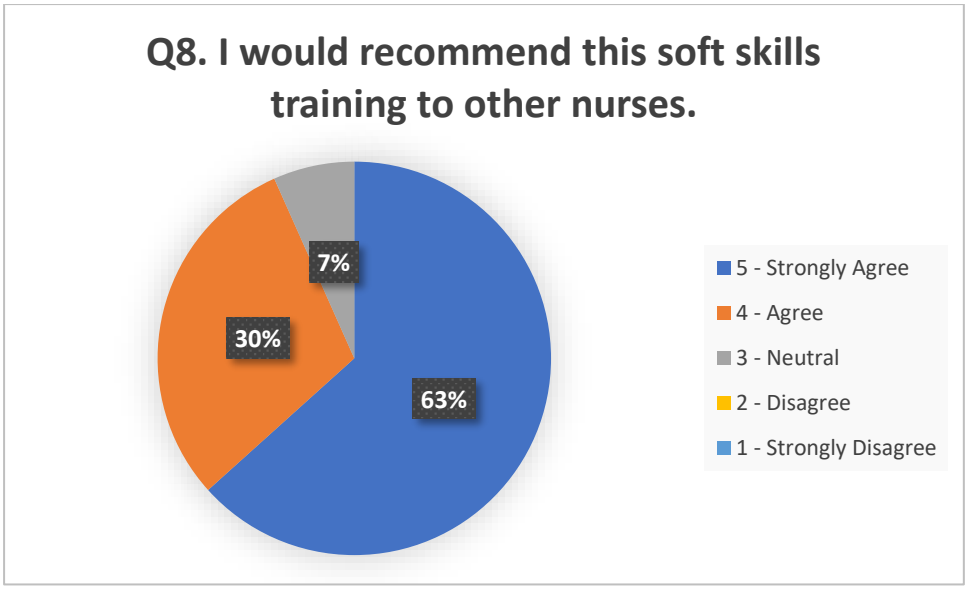
Nurses didn't treat the training as just theory because the skills being taught carried over to real hospital situations.



- **17 nurses (56.7%)** strongly agreed
- **11 nurses (36.7%)** agreed
- **2 nurses (6.6%)** were neutral

Interpretation:

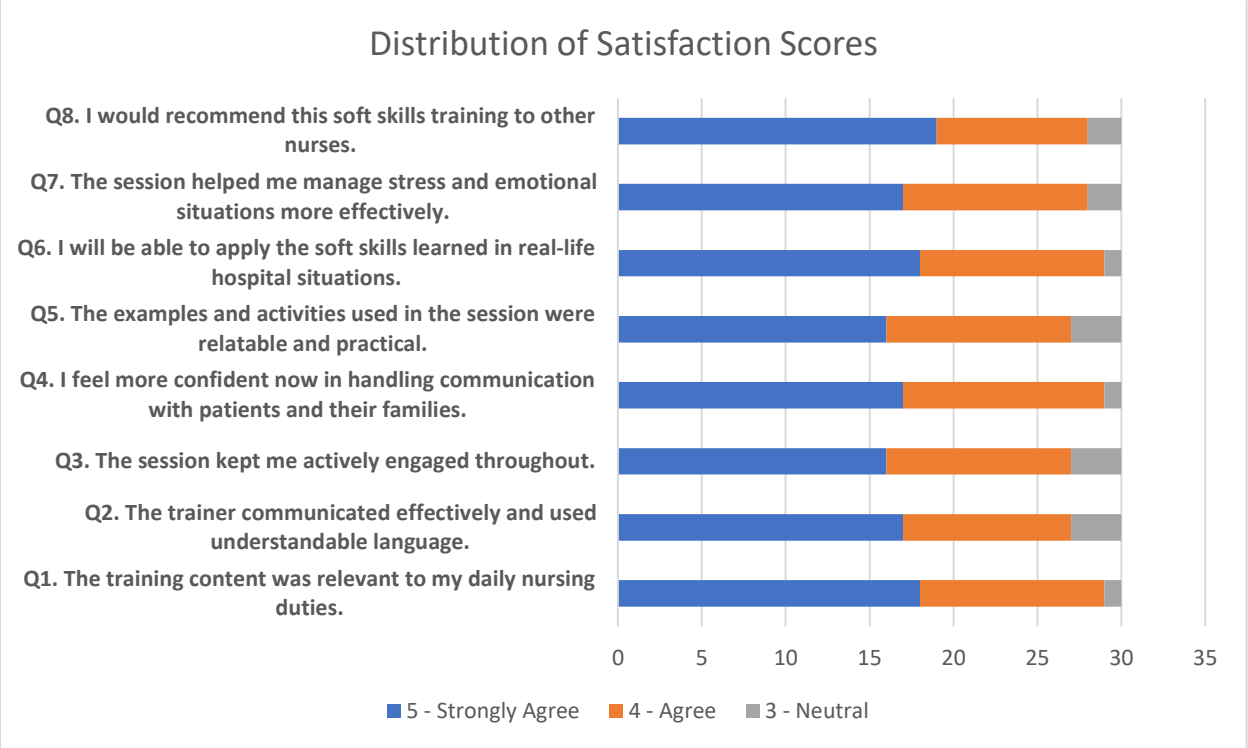
This result backs up the emotional resilience side of soft skills training.



- **19 nurses (63.3%)** strongly agreed
- **9 nurses (30%)** agreed
- **2 nurses (6.6%)** were neutral

Interpretation:

Neutral responses came from the nurses who wanted more material and depth in the content.



Q9. What suggestions do you have to improve future soft skills training sessions?

4 main Themes were derived. Each response was well-represented in at least one theme.

Theme	No. of Nurses Mentioning It	% of Responses
Practical Engagement (role-plays, demos)	12	40%
Modify Session Duration / Structure	8	26.70%
Increase Training Frequency	6	20%
Department-Wise Customization	4	13.30%

7.Discussion

Nurses at RGCIRC did well with the soft skills training. Hussein and Elsaiad (2021) found that head nurses had improved communication, leadership and decision making as a result of

the soft skills training. Our nurses likewise felt that the training had improved their confidence and professional behaviour. In the open ended question 40% of the respondents wanted to see more role plays and demonstrations. Kawashima et al (2024) in their review found that EI training helped nurses to deal with stress and be more resilient. That's precisely what our nurses have told us about dealing with the emotional side of things. Pang et al (2023) found that structured soft skills training was of benefit to the nurse in terms of how patients are communicated with and the professional behaviour that underpins that (5). Our participants also said they would apply what they'd learned on the job (96.7% agreed). Pimenta et al (2025) looked at ICUs and found soft skills training to be beneficial (6). Teamwork and communication need to be properly assessed and we used feedback forms for that and the results were positive. The suggestions from the open ended question indicated what could be improved. Of the 30 nurses, 12 (40%) wanted more hands on content, i.e. more role play. Some wanted demonstrations (8 (26.7%)). Others wanted the session shorter or restructured (6 (20%)). 4 (13.3%) wanted the content to be individualised and the remainder wanted to train more frequently. That department.

8. Conclusion

The nurses at RGCIRC showed overall preference for soft skills training. The sessions of the trainings were engaging for them. They felt their confidence went up due to those sessions. Most of themy really liked the sessions. However, some wanted the sessions' length to be altered, more frequent sessions. They wanted structured and very customised and personalised session content as well.

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