

# Clinical Supervision, Feedback Quality, Psychological Safety and Intern Satisfaction among Paramedical Interns

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## ABSTRACT

This study examined the influence of clinical supervision, feedback quality, and psychological safety on the satisfaction of paramedical interns at a higher education institution. Recognizing that an internship serves as a critical transition from classroom learning to real clinical practice, the study aimed to determine how these factors shape the overall training experience of interns. The study employed a descriptive-correlational research design with predictive analysis. A total of 250 paramedical interns were assessed using a validated questionnaire measuring clinical supervision, feedback quality, psychological safety, and intern satisfaction. Data were analyzed using descriptive statistics, Pearson product-moment correlation, and multiple linear regression. Results showed that interns perceived high levels of clinical supervision, feedback quality, psychological safety, and satisfaction. Significant positive relationships were found among clinical supervision, feedback quality, psychological safety, and intern satisfaction. Findings further revealed that psychological safety and clinical supervision significantly predicted intern satisfaction, whereas feedback quality did not make a unique contribution when analyzed simultaneously. Psychological safety emerged as the strongest predictor of intern satisfaction. The findings highlight the importance of supportive supervision and psychologically safe learning environments in enhancing internship satisfaction and strengthening clinical education in paramedical programs.

**Keywords:** clinical supervision, feedback quality, psychological safety, intern satisfaction, paramedical education

## INTRODUCTION

Internship programs are widely recognized as essential components of professional education in healthcare and allied health disciplines. These programs provide students with opportunities to apply theoretical knowledge in real clinical settings, develop technical skills, and gain professional experience under the guidance of experienced healthcare practitioners. The transition from classroom learning to clinical practice is a critical stage in professional development, as students must integrate knowledge, clinical skills, and professional behaviors in complex, dynamic healthcare environments. Consequently, the quality of internship experiences plays a significant role in determining students' readiness for professional practice and long-term career development in the health professions.

Intern satisfaction has increasingly been recognized as an important indicator of the effectiveness of internship programs. Satisfaction reflects the extent to which students perceive their training experiences as meaningful, supportive, and conducive to learning. When interns experience positive learning environments, they are more likely to demonstrate confidence, motivation, and professional engagement in clinical practice. In contrast, negative internship experiences may lead to stress, reduced motivation, and diminished professional performance. Therefore, understanding the factors that influence intern satisfaction is essential for strengthening clinical education and improving the quality of health professions training.

Among the factors influencing intern satisfaction, three variables have been consistently identified as critical components of effective clinical education: clinical supervision, feedback quality, and psychological safety. Clinical supervision refers to the structured guidance and support provided by supervisors to facilitate students'

professional growth and ensure safe and competent clinical practice. Effective supervision supports the development of clinical competence, promotes professional confidence, and reinforces adherence to professional standards. Feedback quality refers to the clarity, timeliness, and usefulness of information provided to students regarding their performance. High-quality feedback supports learning by helping interns recognize strengths, identify areas for improvement, and refine clinical skills. Psychological safety refers to the perception that the learning environment is safe for interpersonal risk-taking, allowing students to ask questions, express concerns, and learn from mistakes without fear of negative consequences.

Despite the recognized importance of these factors, limited research has examined their combined influence on intern satisfaction, particularly among paramedical interns in developing country contexts. Most existing studies have focused primarily on medical and nursing students, leaving other paramedical programs, such as physical therapy, occupational therapy, pharmacy, and medical technology, relatively underrepresented in the literature. This gap highlights the need for empirical research that examines how supervision practices, feedback processes, and psychological safety interact to influence internship experiences and learning outcomes in paramedical education.

The present study addresses this gap by examining the relationships among clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns in a higher education institution. Specifically, the study investigates the extent to which these factors are associated with intern satisfaction and identifies which variables significantly predict satisfaction in the clinical training environment. By identifying the factors that influence intern satisfaction, the study aims to provide evidence-based insights that can support the improvement of internship programs, strengthen supervision practices, and enhance professional development in health professions education.

## **THEORETICAL FRAMEWORK**

The present study was grounded on three major theoretical perspectives that explain how learning environments influence student satisfaction and professional development in clinical education: Self-Determination Theory, Feedback Intervention Theory, and Psychological Safety Theory. These theories collectively provide a framework for understanding how supervision practices, feedback processes, and interpersonal climate shape interns' learning experiences and satisfaction during paramedical internship. In clinical education, effective supervision, meaningful feedback, and supportive interpersonal environments are essential elements in promoting professional competence and positive learning outcomes.

### **Self-Determination Theory**

Self-Determination Theory (SDT), developed by Deci and Ryan (2000, 2020), emphasizes the importance of fulfilling three basic psychological needs: autonomy, competence, and relatedness in promoting motivation and engagement. In clinical education, supervision that supports these needs encourages interns to develop confidence, improve clinical skills, and maintain productive relationships with supervisors and healthcare teams.

Research in health professions education demonstrates that autonomy-supportive supervision enhances motivation and persistence in demanding learning environments (Ryan & Deci, 2020; Jang, Reeve, & Deci, 2022). Within the present study, Self-Determination Theory provides the theoretical basis for examining how clinical supervision contributes to intern satisfaction and professional development.

### **Feedback Intervention Theory**

Feedback Intervention Theory, proposed by Kluger and DeNisi (1996), explains how feedback improves performance by directing attention toward specific behaviors that require improvement. Constructive feedback helps learners recognize performance gaps, refine clinical skills, and strengthen competence.

In clinical training, timely and clear feedback supports learning by guiding interns through complex clinical responsibilities and reinforcing appropriate professional behaviors (Shute, 2020; Carless & Boud, 2018). In

this study, Feedback Intervention Theory explains how feedback quality influences intern satisfaction through improved performance and learning outcomes.

### Psychological Safety Theory

Psychological Safety Theory, introduced by Edmondson (1999), emphasizes the importance of environments in which individuals feel comfortable expressing ideas, asking questions, and reporting mistakes without fear of negative consequences. Such environments support collaboration, communication, and continuous learning in healthcare settings.

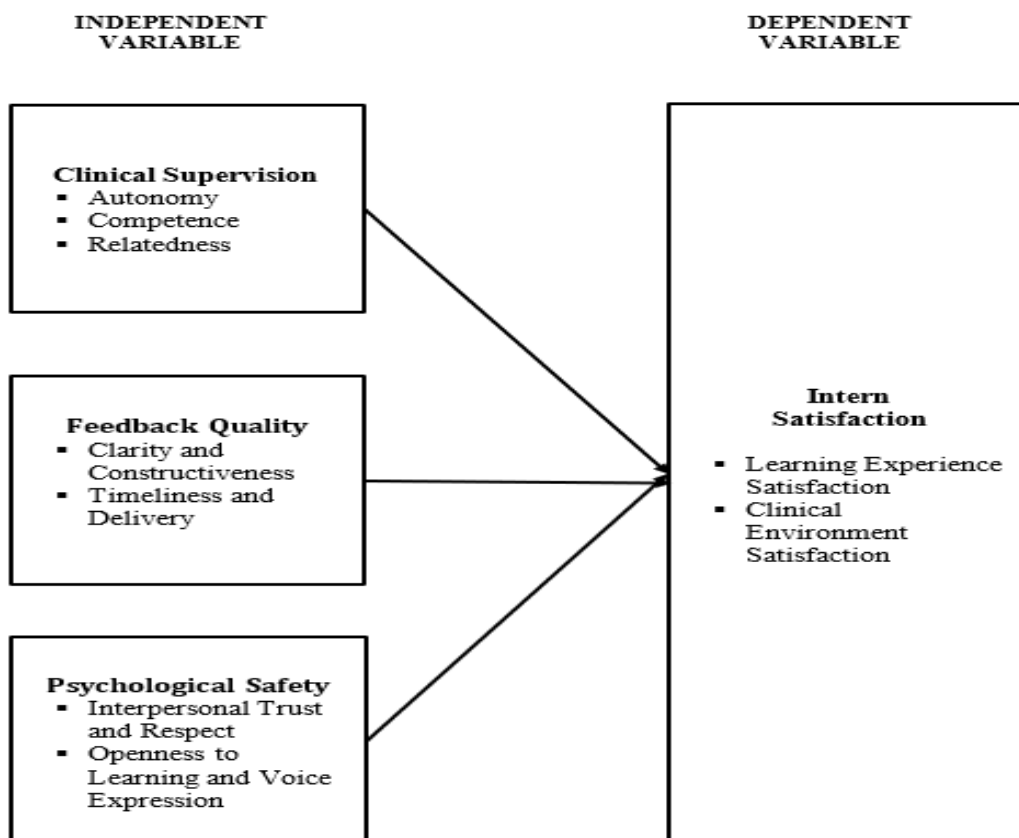
Studies have shown that psychologically safe environments promote teamwork, engagement, and professional development among healthcare trainees (Edmondson & Lei, 2022; Newman, Donohue, & Eva, 2020). In the present study, Psychological Safety Theory provides the conceptual basis for understanding how a supportive interpersonal climate influences intern satisfaction.

### Integration of Theories

Self-Determination Theory, Feedback Intervention Theory, and Psychological Safety Theory together explain how supervision, feedback, and interpersonal climate influence intern satisfaction in clinical education. Each theory addresses a distinct but complementary component of the learning environment: supervision supports motivation and competence, feedback guides performance improvement, and psychological safety fosters open communication and participation.

The integration of these theoretical perspectives supports the conceptual model of the study, which proposes that clinical supervision, feedback quality, and psychological safety function as key determinants of intern satisfaction among paramedical interns. This framework provides a coherent basis for examining the relationships and predictive influence of these variables in clinical training environments.

**Figure 1 Schematic Diagram Showing the Variables of the Study**



The schematic diagram further implies that each independent variable exerts a direct and independent effect on intern satisfaction, without the inclusion of mediating or moderating variables in the model. This suggests that clinical supervision, feedback quality, and psychological safety are treated as parallel predictors of intern satisfaction. These hypothesized relationships will be tested to determine their individual and combined contributions to explaining variations in intern satisfaction among paramedical interns.

### **Objectives of the Study**

This study aimed to determine the relationships among clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns in a higher education institution located in a major city in Southern Philippines.

Specifically, the study sought to:

1. Determine the level of clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns.
2. Determine the significant relationships between clinical supervision, feedback quality, psychological safety, and intern satisfaction.
3. Determine the predictive influence of clinical supervision, feedback quality, and psychological safety on intern satisfaction.

### **Hypotheses**

**Based on the objectives of the study, the following null hypotheses were formulated:**

**H<sub>01</sub>:** There is no significant relationship between clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns.

**H<sub>02</sub>:** Clinical supervision, feedback quality, and psychological safety do not significantly predict intern satisfaction among paramedical interns.

### **LITERATURE REVIEW**

A substantial body of literature highlights the importance of clinical supervision, feedback quality, psychological safety, and intern satisfaction in improving the quality of paramedical internship experiences. Across health professions education, these variables have consistently been associated with stronger learning outcomes, better professional adjustment, and greater readiness for practice. The literature reviewed in the attached thesis presents internship not merely as a placement requirement, but as a critical period in which students translate classroom knowledge into clinical competence under the influence of supervision, communication, and the workplace climate. Within this context, the study is anchored on Self-Determination Theory by Deci and Ryan, Feedback Intervention Theory by Kluger and DeNisi, and Psychological Safety Theory by Edmondson, which collectively explain how supportive supervision, constructive feedback, and safe interpersonal environments shape intern satisfaction and professional growth.

### **Clinical Supervision**

The literature in the attached study emphasizes that clinical supervision is central to effective internship learning because it provides structure, guidance, and emotional support as interns navigate real clinical responsibilities. Drawing from Deci and Ryan (2020), the study explains that supervision is most effective when it supports the psychological needs of autonomy, competence, and relatedness. When supervisors encourage decision-making, provide clear guidance, and build supportive relationships, interns are more likely to become motivated, engaged, and satisfied with their training. The thesis further notes that Ocampo et al. (2020) found that clinical supervision enhanced Filipino student interns' satisfaction and perceived competence, while Li and Xu (2021) reported that healthcare interns in China experienced greater satisfaction

when supervisors promoted autonomy, competence, and relatedness. These findings support the view that clinical supervision is not only instructional in nature but also motivational and relational, making it a major contributor to positive internship outcomes.

The literature also shows that effective supervision improves interns' confidence and reflective learning. The attached study cites Butterworth, Bell, Jackson, and Pajnkihar (2008) in identifying supervision as a key component of professional development in clinical education, particularly when it creates opportunities for reflection, accountability, and guided improvement. In the same way, the thesis frames supervision as a process that helps interns interpret clinical expectations and manage the stress associated with professional transition. This makes clinical supervision especially important in paramedical internships, where students must rapidly integrate technical skills, ethical conduct, and patient-centered practice.

### **Feedback Quality**

Another major theme in the literature is the importance of feedback quality in shaping internship learning. Guided by Kluger and DeNisi's Feedback Intervention Theory, the attached study explains that effective feedback improves performance when it directs attention to task improvement and gives learners practical guidance for action. Feedback is most useful when it is clear, constructive, timely, and respectful. In the literature reviewed in the thesis, Liu et al. (2024) found that interns who received mentor feedback felt more satisfied and motivated during their internship, while Garcia and Mendoza (2021) reported in the Philippine context that interns who viewed feedback as helpful rather than critical became more engaged and enthusiastic about learning. These studies suggest that feedback does not simply evaluate performance; it actively shapes how interns understand their progress and develop clinical confidence.

The thesis also presents evidence that clear and constructive feedback improves clinical competence and reflective practice. For example, Porter et al. (2023) found that clarity in feedback significantly predicted clinical competence and learning satisfaction among health professions students. Likewise, Ramirez and Gomez (2021) demonstrated that feedback highlighting both strengths and weaknesses was associated with increased reflective practice and self-regulated learning among medical interns. The study further notes that Tai et al. (2021) identified timely and actionable feedback as a strong predictor of student satisfaction and self-regulated learning in professional training programs. Together, these findings show that high-quality feedback supports not only skill correction but also deeper reflection, self-monitoring, and motivation, all of which are essential in paramedical internships.

### **Psychological Safety**

The reviewed literature strongly supports the role of psychological safety as a foundational condition for learning in clinical settings. Building on Edmondson's theory, the thesis defines psychological safety as the extent to which interns feel safe asking questions, sharing ideas, admitting mistakes, and voicing concerns without fear of embarrassment or punishment. This is particularly important in healthcare, where high-stakes situations require open communication, teamwork, and early correction of errors. The literature cited in the study shows that psychologically safe environments improve participation, confidence, and engagement. For instance, O'Donovan et al. (2020) found that higher levels of psychological safety among healthcare trainees were significantly associated with increased learning behaviors and speaking up during clinical activities. Similarly, Leroy et al. (2022) reported that psychological safety significantly predicted engagement and team learning behaviors in training contexts.

The thesis also highlights the importance of openness to learning and the expression of voice as dimensions of psychological safety. In this regard, Martinez et al. (2023) found that psychological safety significantly predicted voice behavior and proactive engagement during clinical discussions, while Kim and Park (2022) showed that higher perceived psychological safety was associated with greater willingness among nursing interns to report concerns and participate in team-based decision-making. Additional support comes from Lee et al. (2021), who found that supervisors who encouraged questioning significantly increased trainees' engagement and knowledge retention, and Ahmed and Khan (2024), who reported that openness to inquiry was positively correlated with clinical competence and confidence among allied health interns. The study also cites

Hirak et al. (2021), Edmondson and Lei (2021), and West et al. (2020) in emphasizing that supportive responses to mistakes and emotional support from supervisors strengthen psychological safety, resilience, and learning behavior. Collectively, these studies underscore that psychological safety is not simply an emotional comfort factor; it is a core educational condition that enables active learning and professional development.

### **Intern Satisfaction**

The literature reviewed in the attached study treats intern satisfaction as a key outcome of internship quality and an indicator of successful professional socialization. Intern satisfaction reflects whether students perceive their training as meaningful, supportive, and developmentally useful. The thesis notes that satisfied interns are more likely to demonstrate confidence, motivation, and commitment to their future professional roles. In support of this, Fernandez and Ramos (2022) found that medical technology interns in the Philippines who rated their internships as satisfying also reported stronger confidence in their professional competencies. Similarly, Baranik et al. (2019) highlighted that satisfied interns are more likely to transition smoothly into employment and maintain positive attitudes toward their chosen careers. These findings suggest that internship satisfaction has both immediate educational value and long-term career implications.

The study also points out that intern satisfaction carries institutional significance. According to Mendoza-Villafaina and Lafuente (2024), students who were satisfied with their educational experiences, including internships, perceived their universities more positively and showed stronger loyalty to their institutions. This suggests that internship satisfaction benefits not only the learner but also program reputation, graduate employability, and stronger partnerships between academe and clinical training sites. At the same time, the literature acknowledges that dissatisfaction may arise when expectations and actual internship experiences do not align, especially when interns are assigned tasks that are irrelevant, unsupported, or poorly structured. This reinforces the importance of maintaining strong supervision, high-quality feedback, and a psychologically safe environment throughout the paramedical internship.

### **Synthesis of the Literature**

Taken together, the literature in the attached study demonstrates that clinical supervision, feedback quality, psychological safety, and intern satisfaction are closely interconnected dimensions of effective paramedical internship. Clinical supervision provides direction and motivational support; feedback on quality refines performance and learning; and psychological safety creates the interpersonal conditions that allow interns to participate fully and learn from mistakes. Intern satisfaction emerges as the outcome of these combined experiences. The literature also makes clear that, while each factor contributes independently to the internship experience, their real strength lies in their collective impact. This synthesis supports the conceptual model of the present study, which posits that clinical supervision, feedback quality, and psychological safety predict intern satisfaction among paramedical interns.

## **METHODOLOGY**

The participants of this study were paramedical interns officially enrolled in the internship programs of a higher education institution located in a major city in Southern Philippines during the academic year of the study. The internship programs included students from allied health disciplines, including Physical Therapy, Occupational Therapy, Medical Laboratory Science, Radiologic Technology, Nursing, and Pharmacy.

Specific inclusion and exclusion criteria were established to ensure that only appropriate participants were included in the study.

**Inclusion Criteria.** Participants were required to be bona fide paramedical interns who were officially enrolled in their respective internship programs and actively engaged in clinical training during the data collection period. In addition, they must have completed at least one clinical rotation and been available at the time of data collection.

Exclusion Criteria. Interns who were on a leave of absence, had incomplete clinical requirements, or did not fully complete the survey were excluded from the study. Responses that were incomplete or submitted beyond the specified data collection period were also excluded from the analysis.

Establishing clear inclusion criteria and exclusion criteria helped ensure the validity and reliability of the findings while minimizing potential sampling bias (Polit & Beck, 2021).

The study involved a subset of paramedical interns selected through proportionate stratified random sampling. The total population consisted of approximately 712 interns from various paramedical programs within the institution. This approach ensured that each program was fairly represented according to its size in the population, which is recommended when working with distinct groups (Creswell & Creswell, 2018). By doing so, the sampling method strengthened the representativeness of the sample and minimized sampling bias, allowing the study to capture a more balanced range of internship experiences while maintaining statistical reliability and validity.

A minimum sample size of 250 respondents was initially determined using the Raosoft Sample Size Calculator. To account for possible incomplete or unusable responses, a total of 325 paramedical interns were invited to participate in the study. Of these, 250 fully completed questionnaires that met the inclusion criteria were included in the final analysis. This resulted in a usable response rate of 76.92%, which is considered acceptable to very good for survey-based research (John W. Creswell & J. David Creswell, 2018).

## Research Setting

The study was conducted at the Paseo del Rio Campus of Liceo de Cagayan University (LDCU), a private higher education institution located in Cagayan de Oro City, Philippines. The university offers internship programs for various paramedical courses, including Physical Therapy, Occupational Therapy, Medical Laboratory Science, Radiologic Technology, Nursing, and Pharmacy. These programs require students to complete supervised clinical training as part of their academic requirements. The institution is recognized for its commitment to academic excellence and professional preparation in health professions education (Liceo de Cagayan University, 2023).

Although paramedical interns were deployed to hospitals, laboratories, and healthcare facilities accredited by the Department of Health (DOH) and the Commission on Higher Education (CHED), the data collection for this study was conducted within the university setting. The Paseo campus served as the primary research site where interns were accessible during scheduled academic activities and internship-related meetings. Conducting the study within the university environment ensured organized and systematic data collection while maintaining compliance with institutional policies and ethical research standards.

The internship program of the institution provides a structured learning environment that integrates theoretical knowledge with clinical practice through supervised training in accredited healthcare affiliations. These clinical placements are designed to support professional competence, performance evaluation, and readiness for healthcare practice. The deployment of interns to accredited clinical institutions ensures that training experiences meet national standards for healthcare education and professional practice.

The selection of the Paseo del Rio Campus as the research setting was guided by both accessibility and relevance to the study variables. Since the researcher was affiliated with the institution, there was feasible access to paramedical interns while ensuring adherence to ethical guidelines and institutional protocols. Research conducted in authentic academic settings enhances the reliability and applicability of findings in educational research and supports the examination of factors influencing student learning and professional development (Creswell & Creswell, 2019; Saunders et al., 2019). Furthermore, the learning environment plays a significant role in shaping interns' experiences and satisfaction, emphasizing the importance of situating research within the academic context where supervision, feedback, and professional interactions occur (Quevedo et al., 2022).

Therefore, the Paseo del Rio Campus provided an appropriate and relevant setting for examining the relationships among clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns.

### **Research Instruments**

The primary instrument used in this study was a structured questionnaire designed to measure the key variables of clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns. The questionnaire consisted of multiple domains adapted from validated instruments commonly used in clinical education and organizational research. The use of standardized questionnaires enables systematic data collection and enhances the reliability and comparability of research findings in educational and healthcare research settings (Creswell & Creswell, 2018).

The first section of the questionnaire measured clinical supervision using 30 items, with 10 items assigned to each of the dimensions of autonomy, competence, and relatedness. These components are aligned with the constructs of Self-Determination Theory, which emphasizes the role of psychological needs in promoting motivation, engagement, and professional development among learners (Deci & Ryan, 2020). The instrument was adapted from established tools, including the Learning Climate Questionnaire by Edward L. Deci and Geoffrey C. Williams (1996), the Manchester Clinical Supervision Scale by Tony Butterworth et al. (2008), and the Basic Psychological Needs at Work Scale. The items in this section assessed the extent to which supervisors supported interns' decision-making, skill development, and professional relationships during clinical training.

The second section of the questionnaire assessed feedback quality using 10 items adapted from the Feedback Environment Scale by Lisa A. Steelman et al. (2004). The items focused on key aspects of feedback, including clarity, constructiveness, timeliness, and the manner in which feedback was delivered during clinical supervision. Feedback quality is widely recognized as an important factor in supporting professional learning, improving performance, and developing clinical skills (Kluger & DeNisi, 1996). In this section, the items examined how effectively supervisors communicated expectations, provided guidance, and supported interns' learning through their feedback.

The third section of the questionnaire assessed psychological safety using 10 items adapted from the scale developed by Amy C. Edmondson (1999). This section focused on key aspects such as interpersonal trust, respect, openness to learning, and the willingness to express concerns or ask questions within the clinical learning environment. Psychological safety refers to the perception that individuals can communicate openly and participate in professional interactions without fear of negative consequences. The items in this section examined how comfortable interns felt speaking up, asking questions, sharing ideas, admitting mistakes, and seeking support during their internship experiences.

The fourth section of the questionnaire assessed intern satisfaction using 10 items drawn from the Student Satisfaction in Internship Experience Scale by Al Hemyari et al., the CLES+T by Minna Saarikoski et al. (2008), and other related literature. This section focused on interns' perceptions of their learning experiences and the overall quality of the clinical environment. Intern satisfaction is widely recognized as an important indicator of educational effectiveness, learning engagement, and readiness for professional practice in health professions education (Baranik et al., 2019). The items examined interns' overall satisfaction with supervision, learning opportunities, and the clinical training environment.

Responses to the questionnaire were measured using a five-point Likert scale, ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Likert-type scales are widely used in social and educational research because they provide reliable and consistent measures of attitudes, perceptions, and experiences (Polit & Beck, 2021).

### **Validity and Reliability**

Because the instruments were adapted from established questionnaires, validity and reliability procedures were

conducted prior to data collection to ensure the accuracy and consistency of the measurement tool. In terms of validity, the questionnaire underwent content validation by a panel of research experts in health professions education and clinical supervision. Content validity ensures that the instrument adequately represents the constructs being measured and reflects the objectives of the study (Polit & Beck, 2021). The experts evaluated the relevance, clarity, and appropriateness of each item in relation to the study variables. All domains of the instrument achieved acceptable content validity ratings, indicating that the questionnaire appropriately measured the constructs of clinical supervision, feedback quality, psychological safety, and intern satisfaction.

Following the validation process, the instrument was pilot-tested among respondents who were not included in the main study to assess its reliability and internal consistency. Reliability analysis was conducted using Cronbach's alpha, a widely used statistical measure for evaluating the internal consistency of research instruments (Cronbach, 1951). The results showed that all variables and subconstructs demonstrated high to excellent levels of reliability, exceeding the recommended threshold of 0.70 (Field, 2020), indicating that the instrument was suitable for data collection.

For clinical supervision, the autonomy, competence, and relatedness subscales obtained Cronbach's alpha values of 0.870, 0.888, and 0.940, respectively, reflecting strong internal consistency. Feedback quality also showed excellent reliability, with the clarity and constructiveness subscale yielding an alpha of 0.936 and timeliness and delivery at 0.927. Similarly, psychological safety demonstrated very strong reliability, with interpersonal trust and respect at 0.931 and openness to learning and voice expression at 0.949. Finally, intern satisfaction showed high reliability, with learning experience satisfaction at 0.904 and clinical environment satisfaction at 0.898.

Overall, these findings confirm that the questionnaire is reliable and appropriate for measuring the constructs included in the study.

To further strengthen the rigor of the research design, procedural strategies were implemented to minimize the risk of common method bias. These strategies included assuring participants of anonymity and confidentiality, using standardized instruments adapted from validated scales, and providing clear instructions to encourage honest and independent responses. In addition, the structured administration of the questionnaire helped reduce response bias and enhance the reliability and validity of the collected data.

### **Data Gathering Procedure**

Prior to data collection, permission to conduct the study was obtained from the appropriate academic authorities of the institution. The researcher coordinated with program coordinators and clinical supervisors to identify eligible participants and to schedule data collection sessions in an organized and systematic manner. Participants were provided with information regarding the purpose of the study, the voluntary nature of participation, and their right to withdraw from the study at any time without penalty. Obtaining informed consent is a fundamental ethical requirement in research involving human participants and ensures that participation is based on free and informed decision-making (World Health Organization, 2011).

The questionnaire was administered to participants through an online survey platform to ensure convenience, accessibility, and efficient data management. To help reduce possible bias in the responses, several steps were taken during data collection. The survey was administered anonymously through an online platform, allowing participants to answer more freely and honestly without pressure. Instead of using names, code numbers were assigned to protect their identity and further encourage candid responses. In addition, the survey was completed without the presence of supervisors or authority figures, helping ensure that participants did not feel influenced when answering the questions. Online data collection methods are widely used in educational and health research because they facilitate organized data handling, minimize administrative burden, and support accurate recording of responses (Creswell & Creswell, 2018). Data collection was conducted during periods that did not interfere with clinical duties or academic responsibilities. Participants were given sufficient time to complete the questionnaire, and completed responses were automatically recorded in a secure digital database.

All collected data were reviewed for completeness and accuracy prior to statistical analysis. Responses that were incomplete or did not meet the study requirements were excluded from the final dataset to maintain the integrity and reliability of the research findings.

### **Ethical Considerations**

Ethical considerations were strictly observed throughout the conduct of the study to ensure the protection of participants' rights, dignity, and welfare. Prior to data collection, the study protocol was reviewed and approved by the Research Ethics Board (REB) of the Liceo de Cagayan University, with document number 2025-12-2034-CON-GS, issued on February 26, 2026. The approval confirmed that the research procedures complied with institutional ethical standards for research involving human participants.

Permission to conduct the study was obtained from the appropriate academic authorities of the institution. The researcher coordinated with program coordinators and clinical supervisors to identify eligible participants and schedule data collection sessions in an organized and systematic manner. Participants were informed about the purpose of the study, the voluntary nature of participation, and their right to withdraw from the study at any time without penalty. Providing informed consent is a fundamental ethical requirement in research involving human participants (World Health Organization, 2011).

Confidentiality and anonymity were maintained throughout the research process. Participants were assigned code numbers instead of personal identifiers to ensure that individual responses could not be traced back to specific individuals. All collected data were stored in password-protected digital files accessible only to the researcher and authorized personnel involved in the study.

The study adhered to the provisions of the Data Privacy Act of 2012 (Republic Act 10173), which protects the privacy and security of personal information in research and professional practice. Participation in the study was entirely voluntary, and no coercion or undue influence was used. Participants were assured that declining or withdrawing from participation would not affect their academic standing or professional evaluation.

### **Statistical Treatment of Data**

The collected data were analyzed using appropriate statistical techniques to address the objectives of the study. Descriptive statistics, including mean and standard deviation, were used to determine the levels of clinical supervision, feedback quality, psychological safety, and intern satisfaction among paramedical interns. Descriptive statistics provide a systematic summary of data and help describe patterns, trends, and variability within a dataset, allowing researchers to interpret the general characteristics of the variables under investigation (Field, 2020).

To determine the relationships between the independent variables and the dependent variable, the Pearson Product Moment Correlation Coefficient was employed. This statistical technique was used to examine the strength and direction of the relationships between clinical supervision, feedback quality, psychological safety, and intern satisfaction. Pearson correlation analysis is widely used in educational and behavioral research to measure the degree of association between continuous variables and to test the statistical significance of those relationships (Creswell & Creswell, 2018). The level of significance for all statistical tests in this study was set at 0.05.

Furthermore, multiple linear regression analysis was conducted to determine the predictive influence of clinical supervision, feedback quality, and psychological safety on intern satisfaction among paramedical interns. Regression analysis is an appropriate statistical technique for identifying significant predictors of an outcome variable and estimating the extent to which independent variables explain variation in the dependent variable (Field, 2020). The regression model generated coefficients for each predictor variable, including unstandardized coefficients (B), standardized coefficients ( $\beta$ ), t-values, and p-values, as well as overall model statistics such as the coefficient of determination ( $R^2$ ), adjusted  $R^2$ , and F-value. These statistical indicators were used to evaluate the strength, direction, and significance of the predictive relationships among the study variables.

All statistical analyses were conducted using appropriate software, and the results were interpreted according to established statistical decision rules. Statistical significance was determined when the computed p-value was less than 0.05, indicating that the observed relationships and predictive effects were unlikely to have occurred by chance.

## RESULTS AND DISCUSSION

This section presents the findings of the study on the relationships and predictive influence of clinical supervision, feedback quality, and psychological safety on intern satisfaction among paramedical interns. The data were analyzed using descriptive statistics, Pearson’s Product–Moment Correlation, and multiple linear regression. These statistical procedures were applied to determine the strength and significance of the relationships among the variables and to identify the factors that significantly influence intern satisfaction. The findings are discussed in relation to the objectives of the study and interpreted using relevant theoretical and empirical literature.

### Relationship Between Intern Satisfaction and Clinical Supervision, Feedback Quality, and Psychological Safety

**Table 1 Correlation Between Clinical Predictors and Intern Satisfaction**

		Internship Satisfaction	Clinical Supervision	Feedback Quality	Psychological Safety
Internship Satisfaction	Pearson Correlation	1			
	Sig. (2-tailed)				
	n	250			
Clinical Supervision	Pearson Correlation	.803**	1		
	Sig. (2-tailed)	< .001			
	n	250	250		
Feedback Quality	Pearson Correlation	.819**	.888**	1	
	Sig. (2-tailed)	< .001	< .001		
	n	250	250	250	
Psychological Safety	Pearson Correlation	.870**	.855**	.884**	1
	Sig. (2-tailed)	< .001	< .001	< .001	
	n	250	250	250	250

\*. Correlation is significant at the 0.05 level (2-tailed).

\*\*. Correlation is significant at the 0.01 level (2-tailed).

The results of the correlation analysis showed that clinical supervision, feedback quality, and psychological safety were all significantly and positively related to intern satisfaction. Specifically, clinical supervision ( $r = .803, p < .001$ ), feedback quality ( $r = .819, p < .001$ ), and psychological safety ( $r = .870, p < .001$ ) each demonstrated strong positive relationships with intern satisfaction, with psychological safety showing the strongest association.

Clinical supervision showed a strong positive relationship with intern satisfaction ( $r = .803, p < .001$ ), indicating a large effect size. This means that interns who perceive higher levels of support from their supervisors also tend to report higher satisfaction with their internship experience. Looking more closely, the elements of autonomy, competence, and relatedness were all positively associated with satisfaction. This suggests that when supervisors give interns some level of independence, help them build their skills, and maintain respectful and supportive relationships, interns are more likely to feel satisfied with their clinical training. These findings align with the principles of Self-Determination Theory, which highlight the importance of autonomy, competence, and relatedness in fostering motivation and engagement. In practical terms, when interns feel guided, respected, and supported, they are more likely to feel confident in their

abilities and more engaged in their learning. Previous studies have also shown that effective clinical supervision is linked to better learning outcomes and professional growth in healthcare education.

Feedback quality was also strongly related to intern satisfaction ( $r = .819, p < .001$ ), indicating a large effect size. This suggests that interns who receive clearer, more constructive, and timely feedback tend to feel more satisfied with their internship experience. In practice, effective feedback helps interns better understand what is expected of them, recognize areas for improvement, and refine their clinical skills. When feedback is delivered in a way that is clear and useful, it becomes easier for interns to correct mistakes and build confidence in their performance. These findings are consistent with Feedback Intervention Theory, which explains that feedback improves performance by helping individuals focus on specific tasks and behaviors that need improvement. Similarly, previous studies have shown that meaningful feedback supports reflection and contributes to professional growth among students. Overall, the strong relationship observed in this study highlights how important it is to have structured and meaningful feedback systems in place, as these play a key role in shaping interns' learning experiences and overall satisfaction.

Among the variables, psychological safety showed the strongest relationship with intern satisfaction ( $r = .870, p < .001$ ), indicating a very large effect size. This means that interns who feel safe speaking up, asking questions, and sharing concerns are more likely to feel satisfied with their overall internship experience. In real clinical settings, this sense of safety makes a big difference. When interns know they won't be judged or dismissed, they're more willing to participate in discussions, clarify doubts, and ask for help when they need it. This not only improves their learning but also builds their confidence as they handle clinical tasks. The strong link between psychological safety and satisfaction highlights how important it is to create an environment where interns feel respected and supported. When that kind of atmosphere is present, it naturally encourages open communication, teamwork, and continuous learning all of which are essential for meaningful training and professional growth in healthcare.

Overall, the results of the correlation analysis show that the quality of the clinical learning environment is closely linked to intern satisfaction. Clinical supervision, feedback quality, and psychological safety were all positively associated with satisfaction, with psychological safety showing the strongest relationship among the three. This suggests that while supervision and feedback are important, how safe and supported interns feel in their environment may matter even more in shaping their overall experience.

Taken together, these findings highlight the value of creating a learning environment where interns feel guided, supported, and comfortable participating in the process. Strengthening supervisory practices, improving how feedback is delivered, and fostering a sense of psychological safety can help enhance learning experiences, build confidence, and support the professional growth of paramedical interns.

### Predictors of Intern Satisfaction

Table 2 Multiple Regression Results for Predictors of Intern Satisfaction

variables	Unstandardized Coefficients		Standardize Coefficients	t	p	95% CI	
	B	SE	$\beta$			LB	UB
Clinical Supervision	.160	.074	.152	2.169	.031	.015	.305
Feedback Quality	.137	.078	.137	1.769	.078	-.016	.290
Psychological Safety	.579	.064	.169	9.003	.001	.452	.705
	R	R <sup>2</sup>	Adjusted R <sup>2</sup>	F-value	p-value		
Model	.879	.773	.770	278.576	.001		

Note: Significant when computed p-value < 0.05

The results of the multiple regression analysis indicated that the overall model was statistically significant,  $F(3,$

246) = 278.576,  $p < .001$ , suggesting that clinical supervision, feedback quality, and psychological safety collectively predicted intern satisfaction among paramedical interns.

In terms of model fit, the regression model demonstrated strong explanatory power. The predictors accounted for 77.3% of the variance in intern satisfaction ( $R^2 = .773$ , Adjusted  $R^2 = .770$ ). The adjusted  $R^2$  value, which corrects for the number of predictors in the model, remained very close to the  $R^2$  value, indicating that the model is stable and not overfitted. In terms of practical significance, this represents a very large effect size. Based on Cohen's framework, the computed effect size ( $f^2 \approx 3.40$ ) indicates an exceptionally strong practical impact, suggesting that the predictors meaningfully explain variations in intern satisfaction in real-world clinical settings.

Examining the individual predictors, psychological safety emerged as the strongest predictor of intern satisfaction ( $B = .579$ ,  $SE = .064$ ,  $\beta = .169$ ,  $t = 9.003$ ,  $p < .001$ , 95% CI [.452, .705]). The large  $t$ -value and statistical significance indicate a strong contribution of psychological safety to the model. The confidence interval does not include zero, further confirming that psychological safety has a statistically reliable and meaningful positive effect on intern satisfaction. The standardized beta coefficient ( $\beta$ ) further reflects its relative importance compared to other predictors. This suggests that interns who perceive a safe and supportive clinical environment are more likely to report higher levels of satisfaction.

Clinical supervision was also a significant predictor ( $B = .160$ ,  $SE = .074$ ,  $\beta = .152$ ,  $t = 2.169$ ,  $p = .031$ , 95% CI [.015, .305]), although its effect size is smaller compared to psychological safety. Similarly, the confidence interval does not cross zero, indicating that the effect of clinical supervision on intern satisfaction is statistically significant and reliable. This indicates that supportive supervisory practices contribute to intern satisfaction, but to a lesser extent when other variables are considered.

In contrast, feedback quality did not demonstrate a statistically significant unique contribution in the regression model ( $B = .137$ ,  $SE = .078$ ,  $\beta = .137$ ,  $t = 1.769$ ,  $p = .078$ , 95% CI [-.016, .290]). Despite its significant relationship with intern satisfaction in the correlation analysis, its non-significance in the regression suggests that its effect may overlap with other predictors. The confidence interval includes zero, which further supports the finding that feedback quality does not have a statistically significant independent effect when the other variables are taken into account. This indicates that feedback quality may operate indirectly, particularly within the context of psychological safety and clinical supervision. The lack of a unique contribution from feedback quality may be explained by shared variance among predictors. When variables such as psychological safety and clinical supervision are included in the model, the independent effect of feedback quality may diminish. This suggests that feedback is most effective when delivered within a supportive and psychologically safe learning environment.

Overall, psychological safety stood out as the strongest predictor of intern satisfaction, while feedback quality did not show a significant independent effect when the other variables were considered.

The regression results suggest that psychological safety and clinical supervision play key roles in shaping intern satisfaction, whereas feedback quality may function more as a supporting or contextual factor. The large effect size of the model highlights the practical importance of creating supportive clinical learning environments. These findings point to the need for training institutions to focus on building psychologically safe spaces and strengthening supervisory relationships to enhance intern satisfaction and improve the overall quality of clinical education. Institutions should prioritize the development of psychologically safe spaces and strong supervisory relationships to enhance intern satisfaction and improve clinical education outcomes.

## CONCLUSIONS

Based on the findings of the study, the following conclusions were drawn:

Clinical supervision, feedback quality, and psychological safety were found to be significant factors associated with intern satisfaction among paramedical interns. These variables represent essential components of effective

clinical education, as supportive supervision provides guidance for professional development, constructive feedback supports learning and performance improvement, and psychological safety fosters an environment that encourages communication, collaboration, and active participation in clinical training.

The significant relationships observed between the independent variables and intern satisfaction indicate that the quality of the clinical learning environment plays a critical role in shaping students' internship experiences. Interns who perceived higher levels of supervision, effective feedback, and supportive interpersonal relationships reported greater satisfaction with their learning experiences and the clinical environment.

The results of the multiple regression analysis further revealed that psychological safety emerged as the strongest predictor of intern satisfaction, while clinical supervision also demonstrated a significant predictive influence. In contrast, feedback quality, although significantly related to intern satisfaction, did not show a significant unique contribution when analyzed simultaneously with the other variables in the regression model.

Overall, the study concludes that strengthening clinical supervision practices and promoting psychologically safe learning environments are essential strategies for improving intern satisfaction and enhancing the quality of paramedical internship programs. These findings highlight the importance of supportive educational environments in preparing competent and confident healthcare professionals.

## RECOMMENDATIONS

In light of the findings and conclusions of the study, the following recommendations are proposed:

Academic institutions are encouraged to strengthen clinical supervision programs by providing supervisors with continuing training and professional development opportunities focused on mentoring, communication, and supervisory skills. Enhancing supervisory competence may improve the quality of guidance provided to interns and support their professional development during clinical training.

Clinical supervisors are advised to maintain consistent and supportive communication with interns to ensure that guidance and feedback are delivered clearly, constructively, and in a timely manner. Establishing structured supervision practices may help interns better understand expectations, improve clinical performance, and increase satisfaction with their learning experiences.

Healthcare institutions and clinical training affiliates are encouraged to promote psychologically safe learning environments that support open communication, teamwork, and mutual respect among interns and healthcare professionals. Creating an environment in which interns feel comfortable expressing ideas, asking questions, and reporting concerns may strengthen learning outcomes and improve overall internship satisfaction.

Program administrators are recommended to implement regular monitoring and evaluation mechanisms to assess the quality of supervision, feedback practices, and learning environments within internship programs. Continuous assessment of these factors may support quality improvement initiatives and ensure the effectiveness of clinical education programs.

Future researchers are encouraged to conduct similar studies in multiple institutions or healthcare settings to determine the generalizability of the findings across different educational and clinical contexts. Expanding the scope of research may provide a broader understanding of factors influencing intern satisfaction in paramedical education.

Future studies may also examine additional variables that could influence intern satisfaction, such as workload, stress levels, organizational support, and opportunities for professional development. Investigating these factors may contribute to a more comprehensive understanding of the determinants of satisfaction in clinical training environments.

## **Implications of the Study**

The findings of this study provide important implications for academic institutions, clinical supervisors, healthcare organizations, policymakers, and future researchers involved in paramedical education and internship training. The significant relationships identified among clinical supervision, feedback quality, psychological safety, and intern satisfaction emphasize the importance of supportive learning environments in promoting professional development and positive internship experiences. The identification of psychological safety as the strongest predictor of intern satisfaction further underscores the critical role of workplace climate in shaping students' engagement and confidence during clinical training.

For academic institutions, the results highlight the importance of strengthening internship programs through structured supervision systems and faculty development initiatives. Ensuring that clinical supervisors are equipped with appropriate mentoring and communication skills may improve the quality of supervision and enhance student learning outcomes. These findings also support the need for institutions to continuously review internship policies and supervision practices to maintain program quality and meet accreditation standards in health professions education.

For clinical supervisors, the findings reinforce the central role of supportive relationships in facilitating effective clinical learning. Supervisors who provide clear guidance, constructive feedback, and consistent encouragement contribute to the development of interns' professional competence and confidence. Establishing psychologically safe learning environments allows interns to communicate openly, seek assistance when needed, and participate actively in clinical decision-making, thereby strengthening professional growth and readiness for practice.

For healthcare institutions and clinical training affiliates, the results emphasize the importance of fostering organizational cultures that support teamwork, respect, and open communication. Since psychological safety emerged as the strongest predictor of intern satisfaction, workplace environments that encourage collaboration and learning from experience may improve both educational outcomes and overall quality of clinical training. Promoting supportive workplace cultures may also contribute to improved staff engagement and more effective patient-centered care.

For policymakers and program administrators, the findings suggest the need to establish clear standards and monitoring mechanisms to evaluate the effectiveness of internship programs. Regular assessment of supervision quality, feedback practices, and learning environments may help identify areas for improvement and support evidence-based decision-making in health professions education. Strengthening institutional policies that promote supportive supervision and safe learning environments may enhance workforce preparedness and contribute to the development of competent healthcare professionals.

For future researchers, the results provide a basis for further investigation into factors influencing intern satisfaction and professional development in clinical education. Future studies may explore additional variables such as workload, stress, organizational support, leadership style, and resilience to gain a more comprehensive understanding of internship experiences. Longitudinal and multi-institutional research designs may also be conducted to examine changes in satisfaction and professional competence over time and to improve the generalizability of findings across different educational settings.

## **Limitations of the Study**

Despite the valuable insights generated by this study, several limitations should be considered when interpreting the findings.

First, the study was conducted within a single higher education institution, which may limit the generalizability of the results to other academic institutions or healthcare settings. Internship programs may vary across institutions in terms of supervision practices, organizational culture, available clinical resources, and institutional policies. As a result, the findings of this study may primarily reflect the experiences of paramedical interns within the specific institutional context in which the research was conducted.

Second, the study relied on self-reported data collected through structured questionnaires. Although self-report measures are widely used in educational and behavioral research, responses may be influenced by individual perceptions, recall bias, or social desirability bias. Participants may have provided responses that reflected favorable impressions of their training environment rather than their actual experiences. Nevertheless, efforts were made to minimize this limitation by ensuring anonymity and confidentiality of responses throughout the data collection process.

Third, the cross-sectional research design limits the ability to establish causal relationships among the variables examined in the study. While the analysis identified significant relationships and predictive influences among clinical supervision, feedback quality, psychological safety, and intern satisfaction, the design does not allow for causal conclusions. Longitudinal or experimental research designs may provide stronger evidence regarding the direction and stability of these relationships over time.

Fourth, the study focused on selected variables related to clinical supervision, feedback quality, and psychological safety as predictors of intern satisfaction. Other factors that may influence internship experiences, such as workload, stress levels, organizational support, leadership style, and individual coping strategies, were not included in the analysis. Future research incorporating these additional variables may provide a more comprehensive understanding of the determinants of intern satisfaction in clinical education settings.

### **Contribution of the Study to the Field**

This study contributes to the field of health professions education by providing empirical evidence on the factors that influence intern satisfaction in paramedical internship programs. Specifically, the findings demonstrate that clinical supervision, feedback quality, and psychological safety are significant factors associated with interns' perceptions of their learning experiences and clinical training environments. By identifying these variables as key components of effective clinical education, the study strengthens the understanding of how structured supervision and supportive learning conditions influence professional development among healthcare trainees.

A major contribution of the study is the identification of psychological safety as the strongest predictor of intern satisfaction in the regression model. This finding highlights the critical role of interpersonal relationships, communication, and workplace climate in shaping learning experiences in clinical education settings. By empirically demonstrating the predictive influence of psychological safety and clinical supervision, the study provides evidence-based support for strengthening supportive supervision practices and fostering psychologically safe environments in internship programs. These insights may assist academic institutions and clinical training providers in designing interventions that enhance interns' engagement, confidence, and readiness for professional practice.

Furthermore, the study contributes to the application of established theoretical frameworks in clinical education research. The findings support the relevance of Self-Determination Theory, Feedback Intervention Theory, and Psychological Safety Theory in explaining the dynamics of clinical learning environments and intern satisfaction. By integrating these theoretical perspectives with empirical findings, the study offers a conceptual basis for developing evidence-informed strategies to improve supervision practices, communication processes, and learning environments in paramedical education.

In addition, the study contributes to the limited body of research focusing specifically on paramedical internship programs in the Philippine context. Most previous research has concentrated on medical and nursing education, leaving other allied health disciplines relatively underrepresented in the literature. By examining multiple paramedical programs within a single institutional setting, this study provides context-specific evidence that may inform policy development, program evaluation, and quality improvement initiatives in health professions education.

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