

Bridging the Gap between Academic Preparation and Clinical Needs: A CIPP Evaluation of the English for Nursing Program (ENP)

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Objective: To examine whether the English for Nursing Program (ENP) at STIKes Banyuwangi really supports students' clinical communication needs and is consistent with the institution's vision to prepare nurses who can compete internationally. **Methods:** A mixed-method approach was used by applying the CIPP (Context, Input, Process, Product) evaluation model developed by Daniel L. Stufflebeam. Data were collected from 32 nursing students, 2 ENP lecturers, the Head of the Nursing Study Program, 3 alumni, and 2 clinical instructors through questionnaires, interviews, document analysis, and classroom observation, then analyzed using descriptive statistics and thematic analysis. **Results:** The ENP goals align with institutional aims and national nursing standards, but implementation support remains limited because English is offered as a 2-credit subject in one semester. While most students self-report intermediate general English proficiency, listening and speaking were identified as their weakest skills, confirming these as the most urgent targets for revision to better meet real clinical communication demands. The syllabus includes basic nursing terminology and simple nurse-patient conversations, and many students achieve good scores in conversation and presentation; however, limited time and exposure constrain sustained practice of more complex and authentic tasks, such as handovers and emergency scenarios. **Novelty:** This research applies the CIPP model in an ESP context to link ENP evaluation with real communication demands in clinical settings, not only exam scores, and offers practical suggestions such as increasing contact hours, adding realistic simulations and varied listening input, and enhancing cooperation between English lecturers and clinical instructors.

INTRODUCTION

Currently, the practice of nursing requires the ability to communicate effectively, both in the local vernacular and in English, since most of the clinical guidelines, medical apparatus, and literature are written in English (Chetsadanuwat, 2024). Nursing professionals are required to explain aspects of the patient's condition (diagnoses), treatment, and instructions pertaining to the care of the patient at home. This explanation may sometimes, or require the usage of many English medical terms. Communication with other professionals in the field such as doctors, and pharmacists, and other members of the medical team may communicate in English, as they do in the reports, handover sheets, and the medical record electronic templates used in the hospitals. This is especially true for documentation in computers used in hospitals. This situation is the main reason why ESP, especially English for Nursing, is very important for students in the nursing field (Gultom & Basabih, 2025).

Nursing students in Banyuwangi do not only face local clinical communication demands, but they also study in a time when nursing education is being pushed to meet international competency standards. Nursing education today is expected to follow wider international quality ideas (Baker et al., 2021). The WHO global strategic directions for nursing and midwifery 2021–2025 says nursing education should be competency-

based, meet quality standards, and be aligned with population health needs, so graduates can match what the health system needs (WHO, 2025). This sounds quite close to the local situation, because hospitals also expect new nurses to communicate safely and clearly when giving instructions, taking patient history, or doing handover, and language ability can affect this process. If the program wants to support the institution's vision about global competitiveness, it is not enough to teach only basic dialogues. The learning outcomes should also show communication competence that fits international competency-based education trends, including teamwork and professional communication.

Research has been indicating that ENP focus on clinical speaking and listening skills like taking a patient history, giving instructions, and handing over reports (Marleni et al., 2023; Yuriatson et al., 2025). Needs analysis studies conducted in nursing programs show that learners desire more experience in working with real-life dialogues, role-plays, and clinical scenarios that deal with medical procedures, nursing actions, and typical situations that one might encounter in a hospital, rather than solely book-based activities (Aflah & Negara, 2025; Wanci et al., 2024). This suggests that English for nursing program (ENP) should be tailored to the actual needs of the workplace so that grammar and general topics are not the focus of the learning sequence. When the correspondence between course content and actual needs is poor, learners are likely to judge ENP as of a lesser value and feel the need of the language in clinical practice is lacking.

Students and stakeholders feel that there is a gap between what is learned in the classroom and what happens in clinical practice. Several previous studies on ESP for nursing report that students often still struggle with speaking and listening in real-time clinical communication, even after they have completed their English courses (Ashipala & Matundu, 2023; Daar & Beratha, 2024). They understand written texts or multiple-choice tests, but they feel nervous when they need to explain procedures to patients, make small talk, or respond quickly to doctors' instructions in English. Stakeholders such as clinical instructors and clinical supervisors also mention that students' English skills are not yet in line with the communication challenges in wards or emergency units, especially when they need to handle documentation and handovers that use English-based formats. Academic preparation that focuses too much on general English or written tests may not fully support the specific demands of bedside communication, handovers, and documentation. A study by Handayani et al. (2024) argue that without enough authentic practice and clinically oriented activities, ESP courses risk becoming too theoretical and less connected to the actual needs of the workplace.

The ENP at STIKES Banyuwangi is expected to prepare nursing students develop English skills that are relevant to academic and clinical contexts. At the same time, Banyuwangi is experiencing quite rapid tourism growth, and this development directly affect the health sector because more international visitors come and need medical services during their stay. The recent changes in patient demographics require an immediate response for English proficient of the health care team, particularly frontline nurses who are the initial and most often the primary contact (Haroen et al., 2024). The ENP at Stikes Banyuwangi covers body parts, vital signs, and nurse-patient communication at an elementary exchange level, adequate to prepare for entry level practice, however, insufficient to master reporting and other detailed structured tasks. The resultant lag in the communication competencies expected by the hospitals poses a challenge to the course outcomes listed in the curriculum which primarily shifts to

administrative complacency, and disengagement from the students and industry stakeholders. Such findings provide a greater need for relevance and effectiveness in ENP at Stikes Banyuwangi.

Considering all of its complex situation, the CIPP (Context, Input, Process, Product) model is appropriate as its structures aid in evaluating not only the results but also the planning and implementation of the program. CIPP assists educators in determining the context of the program, the resources and plans that are used in the inputs, the manner in which the program is applied as the process, and the outcomes that are achieved (Toosi et al., 2021). Recent studies in medical health show that CIPP can help identify strengths and weaknesses of curricula and training programs in a structured way (Lee et al., 2019). By using CIPP, this research is not limited to seeing whether students pass or fail, but tries to understand why the program works or does not work as expected. This study is guided four research questions: (1) How well do the objectives and content of the ENP align with the clinical communication demands? (2) How are the input components of the ENP, including curriculum structure, learning materials, facilities, and lecturer profiles, arranged to support nursing students' English proficiency? (3) How is the ENP process implemented in actual teaching and learning activities in the classroom? and (4) What is the level of English proficiency achieved by students upon completing the ENP at Stikes Banyuwangi?

Some previous studies related to CIPP evaluation in ESP have been conducted. Mahadewi et al. (2023) examined online learning during the pandemic using the CIPP model, but the subject was an Economics course, not an English for Nursing program, and the aim was to identify the effectiveness of online delivery rather than alignment with workplace communication needs. The study by Mazidah & Masruroh (2024) also used the CIPP model, but it evaluated a TOEFL preparation course, which mainly trains students in listening, structure, and reading for standardized testing, not in professional communication for clinical settings. Meanwhile, Chemir & Kitila (2022) focused on a needs analysis of students' academic English difficulties in Ethiopia, emphasizing reading, writing, and academic vocabulary, yet the study did not investigate a specific ESP curriculum nor any clinical-communication context. Compared with these studies, the present research is distinct because it evaluates ENP and investigates whether academic preparation truly matches real clinical communication tasks such as bedside explanations, handovers, documentation, or patient interactions, areas not explored in the previous studies.

The novelty of this research lies in combining a CIPP evaluation with the specific demands of clinical nursing communication. This study highlights gaps between academic instruction and workplace expectations that have not always been explored in detail. The findings can help the institution revise the ENP to make it more relevant to real clinical communication situations, guide lecturers in selecting more suitable materials and activities, and support students in developing clearer and safer communication with patients and healthcare teams. This evaluation also help curriculum developers and nursing colleges consider a stronger link between academic English learning and professional demands, and also encourage policymakers to strengthen ESP programs in health education, so students receive more meaningful learning experiences before entering clinical practice.

RESEARCH METHOD

This study used a mixed-method approach utilizing the CIPP evaluation model by Daniel L. Stufflebeam. The model is often recommended for educational and health-related program evaluations because it does not only look at final outcomes, but also at the context, available resources, and learning processes that shape those outcomes (Stufflebeam, 2003). In this research, the context component focuses on Institutional goals for ESP, ENP curriculum, Indonesian national competency standards for nursing, students' initial English Proficiency, and the relevance of ENP goals to nursing students' clinical English needs. The input component examines resources such as lecturers, materials, facilities, and time allocation. The process component observes how teaching and learning take place in the classroom, and the product component evaluates students' English abilities and their perceived readiness for clinical communication.

For quantitative data, results from questionnaires and achievement records were summarized using descriptive statistics, mainly frequencies, percentages, and simple averages to show the overall pattern of students' responses and scores. For qualitative data, thematic analysis was done step by step: the researcher read interview and observation notes several times, marked important statements, gave initial codes, combined similar codes into broader themes, and then checked again whether the themes really matched the data. Combining descriptive statistics with thematic analysis is effective as it enables the presentation of patterns discerned during the evaluative analysis alongside the integration of descriptive interpretations (Bagherzadeh et al., 2025).

Purposive sampling was conducted in this research due to the focus on depth and practicality (Campbell et al., 2020). The participants were 32 Stikes Banyuwangi nursing students who have completed ENP, 2 ENP lecturers, the head of the nursing study program, 3 alumni, and 2 clinical instructors or preceptors who supervise students in clinical practice. The primary instruments include interviews, surveys, document analysis, and classroom observation. Interviews are used to explore how lecturers and clinical stakeholders view the alignment of ENP goals, curriculum content, and national nursing competency standards with real clinical English demands. Questionnaires are distributed to students, lecturers to gather broader information about the perceived relevance of the program, teaching methods, facilities, and student engagement in a form that is easier to analyze quantitatively. Document analysis is applied to curriculum documents, syllabi, institutional policies, and students' assignment scores to check the written objectives, actual teaching plans, and evidence of learning outcomes. Class observation is also carried out to see directly how ENP is implemented, including teaching strategies, use of time and facilities, and the way students participate during lessons, which helps validate the information gained from interviews and questionnaires.

Ethics were kept as a priority in this study. All participants were given detailed information regarding the study including the purpose, processes, benefits as well as risks and students in the study were able to withdraw at any time as they were made aware their answers were confidential and were able to withdraw at any time. Consent was secured before the questionnaires were distributed and interviews were conducted. To ensure confidentiality, the study assigned numerical codes to participants rather than using their real names, and aggregated data in such a way that individuals could not be identified. Ethical guidelines for educational research emphasize the importance of the

fundamental principles of transparency, respect, and accountability in data management (Haneef & Agrawal, 2024).

Table 1. Indicators to be evaluated using CIPP model

Component	Indicator	Data Collection
Context	Alignment of ENP goals with institutional vision and mission.	Interview (2 ENP lecturers, Head of Nursing Study Program, and 2 clinical instructors).
	ENP Curriculum.	Questionnaire (32 nursing students).
	Indonesian national competency standards for nurses.	
	Students' initial English proficiency	
Input	Relevance of ENP to real clinical demands.	Document analysis (1 ENP curriculum document and 1 official course syllabi).
	ENP syllabus content.	Document analysis (syllabi, lesson plans, and assessment rubrics).
	ENP lecturers qualifications and teaching experience	Interview (2 ENP lecturers)
		Document analysis (institutional academic policy documents).
Process	Facilities and time allocation.	Class observation (6 class meetings= 10 total hours).
	Teaching method.	Interview (12 students).
Product	Students' engagement.	Document analysis (assignment scores & oral performance from 32 nursing students).
	Level of English proficiency.	Interview (3 alumni).
	Impact of the program.	

RESULTS AND DISCUSSION

Results

Context Evaluation

The vision of Stikes Banyuwangi is to become a provider of education that is able to produce health workers that are competitive globally by 2025. Its mission is to create a holistic educational process that is also global by integrating hard competencies (clinical skills) and soft competencies (interpersonal skills) that are crucial. This mission clearly stated that graduates are able to work and serve locally and also to other countries that are multicultural. To achieve its vision, STIKES Banyuwangi has established that English is a mandatory subject in the General Basic Education (MKDU) to all study programs.. The curriculum's explicit prioritization of speaking and communication competencies is a deliberate pedagogical strategy aimed at cultivating the soft skills articulated in the institution's mission.

The syllabus covers relevant terminology and simple dialogues but relies heavily on "controlled exercises and short written texts," leading to a mismatch with real-world complexities like handovers. The strongest limitation identified is the time allocation (2-credit course, 14 meetings). The results from questionnaire related to students' general English proficiency can be seen in the figure 1 below:

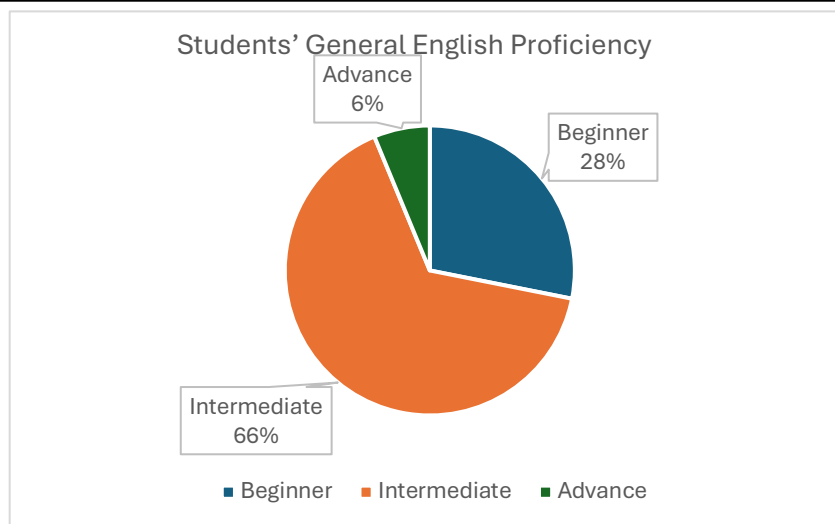


Figure 1. Students' general English proficiency

The figure 1 shows that most nursing students see themselves at an intermediate level of general English proficiency, while a smaller group still identify as beginners and only a few feel they have advanced skills. This pattern suggests that students already have some basic foundation to follow the English for Nursing Program, but their ability is not yet very high. Then the questionnaire results related to assessment of students' language skills can be seen in the figure 2 below:

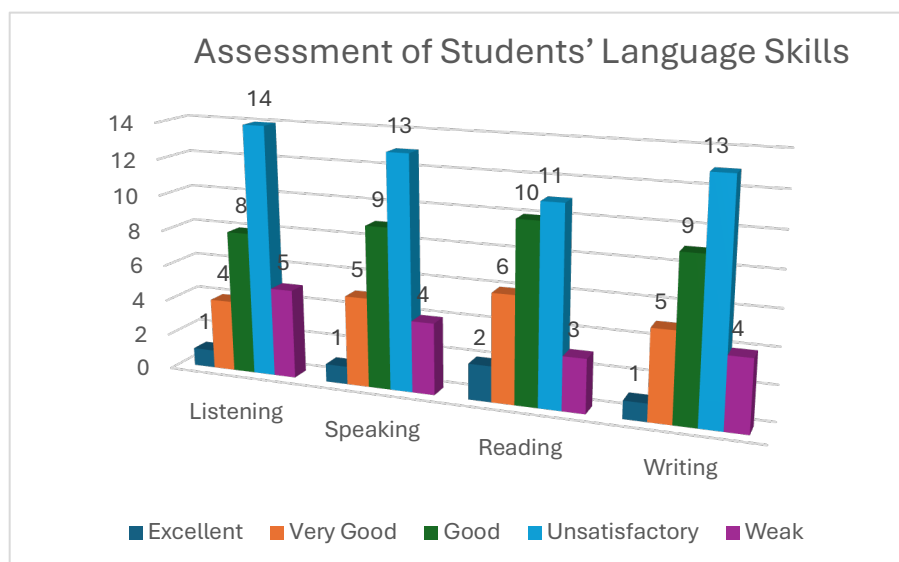


Figure 2. Assessment of students' language skills

The figure 2 shows that most respondents placed themselves in the "satisfactory" and "good" categories for all four skills, while only a very small number chose "excellent". Listening and speaking seem to be the weakest areas, with many students rating these skills as unsatisfactory or weak. Reading and writing are assessed slightly higher, but still not at a very strong level. So, it suggest that ENP needs to give more intensive and balanced practice, especially to build confidence in speaking.

Interviews with the two ESP lecturers suggest that they view speaking and listening as the most critical skills for nurses, particularly for face-to-face interaction with foreign patients, while reading is also important for understanding medical charts, guidelines,

and online information. The lecturers mentioned that the current ENP at STIKES Banyuwangi already introduces some clinical scenarios, including possible interactions with foreign patients or visiting doctors, yet they felt this preparation is still not very intensive and could be expanded with more role-plays and case discussions. When asked about the ideal amount of ESP class time, both lecturers believed that one semester is not always enough and suggested that at least two or three consecutive semesters. A higher number of contact hours, would be more realistic to develop functional communication skills. They also reported that feedback from hospitals, clinics, and alumni usually appreciates graduates' basic reading ability and familiarity with medical vocabulary, but stakeholders still comment that new nurses often lack confidence and fluency when speaking English in front of foreign patients.

Clinical instructors mentioned that English is not used all the time, but it still appears in important moments, for example when they meet foreign patients, read equipment manuals, or check international guidelines on the internet, so they feel nurses cannot ignore it. In their view, speaking and listening are the most crucial skills because nurses must ask questions, confirm symptoms, and give simple explanations about procedures or medication in English, while reading is also needed to understand written instructions and short clinical notes. Based on these experiences, they suggested that the Nursing ESP program should prioritize practical communication competencies such as using clear and simple English to explain procedures, taking patient history, and giving basic health education.

Input Evaluation

The ENP syllabus at STIKES Banyuwangi mainly covers basic nursing terminology, patient-nurse dialogues, simple documentation, and reading of short medical texts, so it already introduces language that is quite close to everyday clinical communication. At the same time, the content still tends to focus on controlled exercises and short written texts, so students do not always get enough extended practice with authentic cases or longer interactions that they might meet in real wards. The syllabus gives a useful starting point, but it could be strengthened with more tasks that connect directly to local hospital routines, such as handover, patient education, or explaining procedures step by step.

Regarding human resources, the ENP is supported by two lecturers with quite strong academic backgrounds and long teaching experience. One lecturer holds a master's degree in applied linguistics and has been teaching for about 13 years. The other has a master's degree in education with around 9 years of teaching experience, which suggests that both are familiar with language pedagogy and classroom management. Both lecturers have also attended at least one special workshop on English in nursing, so they have some exposure to ESP principles and nursing-related materials, although they still mention the need for continuous collaboration with clinical staff to keep the content aligned with current practice.

For facilities and time allocation, the ENP is offered as a 2-credit course in one semester, with 14 meetings and about 100 minutes per meeting. This schedule provides a regular contact rhythm, but the total number of hours is still quite limited if the goal is to build both receptive and productive competence in specialized English. Classroom facilities such as language laboratory, projectors, basic audio equipment, and standard seating are available. Students and lecturers feel that the time frame does not fully allow

for longer simulations, detailed feedback, and repeated practice that are usually recommended in ESP for health professionals.

Process Evaluation

The ENP was implemented through a mix of lecturing, guided practice, and group activities such as pair dialogues, small discussions, and short presentations. The lecturers tried to balance attention to vocabulary and grammar with communicative tasks, but some sessions still felt quite textbook-based, especially near assessment periods, so opportunities for longer role-plays or simulations were not always maximized. The overall implementation shows an effort to apply ESP principles, yet the link between every task and real clinical situations is still not fully consistent across all meetings. The interview results with students related to the implementation of ENP teaching learning process is presented in table 2.

Table 2. The thematic summary of students' interview responses

Category	Findings
Teaching Method	Role-plays, pair work, and case discussions were seen as the most effective because students could act like real nurses and try English in situations similar to clinical work. Long teacher explanations and translation drills were described as boring and less helpful for speaking practice.
Students Participation	Students generally felt that lecturers often invited them to answer, ask questions, or present in English. But they still hesitated to speak because they were afraid of making mistakes or being laughed at by friends.
Classroom atmosphere	The atmosphere was described as friendly and not too strict, which helped them to try using English. Some students still felt nervous when speaking in front class or when time was limited, so they preferred small-group activities.
Relevance to Real-World Situation	Activities directly connected to nursing, such as explaining procedures, talking about symptoms, or practicing admission dialogues. While some more general topics or textbook dialogues felt less relevant to their future job.
Feedback	Students received feedback mainly in the form of scores, brief oral comments, and corrections during speaking or writing tasks. They found this helpful but hoped for more specific guidance on pronunciation, fluency, and how to improve their clinical expressions in English.
Challenges	The biggest challenges mentioned were fear of speaking in front of others, lack of vocabulary for technical or clinical terms, and difficulty understanding fast spoken English in audio or teacher talk, which sometimes made them quiet and less active in class.

Product Evaluation

Alumni interviews suggest that the overall product of the ENP is quite positive but still limited. Table 3 below shows alumni views on ENP outcomes and impact on their career.

Table 3. Thematic summary of alumni views on ENP outcomes and impact

Category	Findings
English Proficiency	Alumni described their English after ENP as enough for reading simple texts and doing short conversations, but they did not feel advanced; they still struggled with long discussions or fast English.
Impact on Career	English skills make them easier to read guidelines, understand training materials, and communicate with foreign patients, which supported professional image and opportunities.
Match of ENP and workplace demands	ENP prepared them fairly well for basic patient communication and for understanding medical terminology, but it was less helpful for unpredictable conversations or more complex English.

Category	Findings
Typical English-using situations	explaining procedures to foreign patients, reading English articles, and answering simple questions from international visitors. In some of these cases they felt prepared, but in others they needed help from colleagues or used a mix of English and Indonesian.
Most useful aspects of ENP	The parts they valued most were learning medical terms, basic conversation patterns for taking history and giving instructions, and exposure to sample dialogues that they could adapt in real practice.
Suggested changes to ENP	Alumni recommended more hours of speaking practice, stronger focus on listening to different accents, more realistic simulations based on actual hospital scenarios, and closer collaboration with clinical instructors when designing tasks.

Alumni rated their English level after the program as moderate, enough to handle basic tasks at work, but not always strong enough for more complex communication. They felt that ENP helped them build a foundation, especially in vocabulary and simple patient interaction. Their real confidence and competence continued to grow only after they had more practice in the workplace. Then the students' scores during the in-class activities are shown in the Table 4.

Table 4. Students' English performance scores in ENP

Score Range	Category	Conversation (n, %)	Presentation (n, %)
86-100	High	7 (21.9%)	6 (18.8%)
75-85	Good	15 (46.9%)	14 (43.8%)
60-74	Fair	8 (25%)	9 (28.1%)
<55	Low	2 (6.3%)	3 (9.4%)

Most students achieved scores in the "good" range for both conversation and presentation, with a smaller group reaching high performance and only a few remaining in the low band. This pattern indicates that the majority managed to meet the basic ENP targets for oral communication. This proves that the course helps them build some functional ability to interact in simple nursing-related situations, even if their language is not always very fluent.

Discussion

Context Evaluation

The findings show a strong rhetorical alignment between the ENP goals, the institutional vision, and the Indonesian national nursing competency standards, but the practical support is still limited. The institution expects graduates to be internationally competitive and able to work in cross-cultural settings, which is consistent with national standards. However, the national curriculum only allocates a 2-credit English course in one semester, so students have relatively little structured time to develop higher-level communication skills that match those expectations. ESP studies also report a similar gap where English is officially positioned as important for global readiness, but in practice it still receives limited contact hours (Jubhari et al., 2022; Le & Hoang, 2023). It is treated more as a support subject than an integrated professional competence (Rihatmi et al., 2025).

Students' self-assessment data, where most rated their general English as intermediate and their skills as mainly satisfactory or good. Speaking and listening emerged as the weakest skills, while reading and writing were slightly stronger. These patterns are in line with Kinas et al. (2025) showing that nursing students often feel

anxious and underprepared for oral communication, even when they can handle written materials reasonably well. The perspectives of ESP lecturers and clinical instructors also match the needs-analysis literature that identifies oral communication and clinical listening as top priorities for nursing ESP (Nurriza et al., 2023). Nursing students most urgently need English for patient communication, explaining procedures, and understanding medical terminology. At the same time, the lecturers felt that 2-credit course in a single semester is not enough and suggested more contact hours and more realistic tasks. It is similar to Huang & Pun (2022) who argue that short, exam-oriented ESP courses cannot fully address complex clinical communication needs.

The clinical instructors suggest that the ENP should mainly develop practical skills, for example explaining procedures in simple English, taking a patient's history, and giving basic health education. This idea is in line with Maryani & Arroyyani (2024) task-based and scenario-based ESP models, which seem to give more attention to real communication in clinical situations instead of just teaching grammar or vocabulary lists. From these similar findings, it appears that the ENP at STIKES Banyuwangi is generally moving in a positive direction, especially in relation to its official objectives and its alignment with both institutional and national standards. However, in my opinion, the program still needs a longer implementation period, more chances for students to practice with authentic clinical situations, and stronger connection with real hospital settings so that it can fully support the goal of preparing nurses who are competitive at the international level.

Input Evaluation

From the syllabus review and lecturer evaluation, it seems that the ENP at STIKes Banyuwangi already has a quite strong basic structure, but there is still a mismatch in how the content is actually delivered in class. The syllabus already lists key components such as medical terminology and simple patient dialogues, which is positive. However, the results also indicate that classroom activities still depend a lot on controlled drills and short reading or dialogue texts. This situation is not fully similar to real hospital contexts, where nurses usually need to communicate in longer and more complicated interactions, for example when doing handovers. This condition supports the argument of Khafidhoh et al. (2018) that nursing students should be exposed to authentic materials and specific tasks that represent daily clinical routines, not only general medical vocabulary. The lecturers' strong academic qualifications and teaching experience help them to organize lessons quite well, but in my opinion, their background in English education means they sometimes miss detailed clinical aspects. Therefore, this situation highlights the need for continuous collaboration as suggested by Huang & Pun (2022), where English lecturers regularly cooperate with clinical instructors so that the teaching materials really match the current needs of hospitals..

One major difficulty in this program is related to time allocation. Even though the facilities such as the language laboratory and LCD projectors are already available, the total time is quite limited because the course only has 2 credits with 14 meetings. In this situation, 100 minutes per meeting seems not enough for students to really practice speaking and become more fluent. The findings suggest that both students and lecturers often feel in a hurry, so they do not have enough opportunities to conduct role-plays or classroom simulations. This condition is quite serious because ESP courses need sufficient time for repetition and corrective feedback to help students gain confidence in

using English (Ferdian & Purnawan, 2020). If the time remains too short, students may only understand the theory in class but still cannot apply it in real communication. This situation is in line with Kailani et al. (2025), who reported that limited credit hours are often a key factor that makes many nursing graduates in Indonesia still face difficulties in using English effectively, even though they have already completed the course..

Process Evaluation

Based on the interview data in Table 2, most students seem to prefer active learning strategies such as role-plays and pair work because these activities help them prepare for their future professional roles. They feel that listening to long teacher explanations or doing a lot of translation exercises is quite boring and does not really support their speaking fluency. This result supports the view that nursing students tend to learn better when they can simulate actual clinical situations in class (Tong et al., 2024). In line with this, Gutiérrez-Huancayo (2022) argues that the use of simulation and role-play in ESP lessons can significantly increase students' motivation because they can clearly see the connection with their future career. However, some students also commented that the textbook content is sometimes too general and not really related to their real needs. If ESP materials are not closely matched with the learners' specific contexts, their participation and interest in classroom activities are likely to decrease (Wanci et al., 2024).

Although the classroom situation was generally described as friendly, many students still experienced anxiety when they had to speak English. The data indicates that they were worried about making mistakes or being laughed at by their classmates, especially when speaking in front of the whole class. Rodriguez (2022) explains that foreign language anxiety, especially the fear of negative evaluation, is a major factor that makes students remain silent even when the teacher encourages them to talk. To reduce this problem, the students in this study said they preferred working in small groups. This preference is consistent with Nhi et al. (2022), who found that small-group discussion can create a safer environment that lowers students' anxiety and helps shy learners participate more actively compared to individual presentations.

In relation to the challenges and feedback, students reported that their biggest difficulties were technical vocabulary and understanding fast spoken English. They felt that when their vocabulary is limited, they cannot fully express their ideas during clinical dialogues. Thongsongsee & Watanapokakul (2023) point out that learning technical medical terms is often the hardest aspect for nursing students who are not native speakers. The students also mentioned that the feedback they received was useful, but sometimes too general, for example only in the form of a score. They actually expect more detailed comments, especially on their pronunciation and fluency. Nhac (2021) argues that in ESP contexts, teachers should provide specific corrective feedback on particular errors so that students clearly understand how to improve their professional language competence.

Product Evaluation

Based on the scores presented in Table 4, most students achieved good results in the ENP, with the majority placed in the Good range (75–85) for both conversation and presentation. This pattern seems to indicate that the teaching approach is quite effective in helping students reach the basic targets of the ENP. However, the alumni in this study only described their own English ability as moderate, suitable mainly for simple tasks and not for more advanced communication. This gap between high classroom scores and

actual performance in real contexts is quite interesting. It is in line with Alrashidi et al. (2023), who argue that strong achievement in classroom simulations does not always mean that students will feel confident in spontaneous real-life interaction. Students may be able to memorize dialogues for an exam, but still feel limited when they need to speak English without prior preparation.

Furthermore, the fact that most students identified their proficiency as "intermediate" in the initial survey deserves a more critical look. This self-report might suggest a misalignment between student perception and clinical reality. Students might feel they are "intermediate" because they can understand general English rules or pass written tests, but this does not always translate to the specific communication competence required in a hospital ward. This difference implies that the current assessment methods focus too much on general language knowledge rather than functional clinical skills. To address this, practical changes in teaching methods are needed. Based on the Process evaluation where students showed a preference for active learning, one practical recommendation is to strengthen Task-Based Instruction (TBI) in the ENP, by designing tasks that are closer to real nursing work and require spontaneous language use, not only memorized scripts. Sánchez (2004) explain that TBI focuses on meaning and completing specific tasks, which can help students become more accustomed to using language for real goals rather than just learning grammar. By using TBI, lecturers can design activities that mimic real work, like complex discharge planning, which may help close the gap between the classroom and the workplace.

The alumni generally agreed that learning medical terms and common clinical instructions was the most beneficial element of the ENP. They explained that these competences helped them understand written guidelines and explain medical procedures to foreign patients. This result is in line with Vuong (2022), who argues that knowing specific technical vocabulary is a key factor for nursing students in developing their professional identity in the workplace. However, the alumni also felt that the course was less effective for dealing with unexpected or unplanned conversations. Aziz & Anjaniputra (2025) point out that many ESP classes in Indonesia still depend heavily on fixed textbook dialogues, so graduates may feel confused when real patients speak in a different way from the audio materials used in class. To make the ENP more useful, the alumni suggested including more realistic simulations and listening materials with a variety of accents. This suggestion seems important because the data showed that alumni sometimes needed to ask their colleagues for help or switch to Indonesian when the interaction became too fast or too complicated. Such situations indicate that they still need more exposure to authentic practice. As Azis et al. (2025) suggest, ESP courses should integrate complex problem-solving activities, not only memorized scripts, so that students are better prepared for the unpredictable nature of communication in hospital settings.

CONCLUSION

Using the CIPP evaluation in this research, the ENP appears to have a clear purpose that fits the institution's vision to prepare nurses who can compete globally, but there is still a noticeable gap between what is planned and what actually happens. The context and input findings indicate that the syllabus already includes important elements such as medical vocabulary and patient dialogues, yet the small allocation of only two credits makes it difficult to explore more complex clinical communication in depth. During the

process, students showed a strong preference for active learning activities like role-plays, but their participation was sometimes limited by feelings of anxiety and fear of making mistakes. The product evaluation also shows that, even though many students receive good scores, the alumni tend to describe their real English ability as only moderate and still not fully adequate for unpredictable situations in real practice. Therefore, the ENP seems effective in providing a basic foundation, but it has not completely managed to close the gap between classroom preparation and the high communication demands in hospital settings.

To address this issue, institutional leaders should consider adding more ENP course time so students can practice speaking often enough to become more fluent and more automatic, not only ready for short classroom tasks. Closer collaboration between lecturers and clinical instructors is also important, because it can help the course shift from fixed textbook dialogues into more realistic, unscripted simulations that reflect real ward routines and emergency situations. The main transformation needed is not just “revising materials,” but changing the ENP into a competency-focused pathway where key clinical communication tasks are practiced repeatedly, given feedback from both language and clinical sides, and assessed with performance-based methods, so the gap between high scores and real workplace readiness becomes smaller. If the CIPP framework is used regularly, it can support this change by helping the department check not only outcomes, but also whether the learning design, time allocation, and teaching process are truly building safe and effective communication for real nursing practice.

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