Preceptorship Today: Moving Toward Excellence

THE EVOLVING ROLE OF THE PRECEPTOR

Traditionally, registered nurse (RN) preceptor roles have included that of expert, role model, coach, and facilitator (Forneris & Peden-McAlpine, 2009). The expert possesses and demonstrates broad knowledge, explains the basis for actions and decisions, answers learners’ questions clearly and precisely, and communicates well-defined goals and expectations. The expert makes learning relevant to the professional role and even makes learning fun! The role model “talks the talk” and “walks the walk.” The role model demonstrates skillful interaction with patients, organizes and controls the learning experience, and articulates thought processes during a real-time clinical encounter. The coach asks the learner to execute a previously modeled skill to accurately and directly assess the learner’s performance. The coach promotes positive behavior while providing necessary guidance through feedback. Finally, the facilitator provides opportunities for systematic practice and self-evaluation while balancing clinical and teaching responsibilities. The overriding goal of each of the four preceptor roles is to provide opportunities for questioning and reflection by the learner to enhance critical thinking and understanding. As in most professional roles that involve clinical practice, the RN can be a more effective preceptor by using context and dialogue to link thinking and doing as novice nurses transition into professional practice or as experienced RNs transition from one area of practice to another (Forneris & Peden-McAlpine, 2009).

Currently, the role of the preceptor is undergoing many challenges associated with several factors, including financial constraints, newly developed types of nursing to meet medical advancements, pressure to care for more patients at one time, increasing difficulty in fitting education and teaching into a busy schedule, and varying learning needs to meet highly technical clinical advancements (Hyrkäs & Shoemaker, 2007). On a personal level, preceptors may find themselves in situations where they experience significant inner turmoil and anxiety before calling for assistance or passing judgment on another RN’s performance. Challenges such as these are adding stress and making it more difficult for the nurse preceptor to maintain a positive and enthusiastic approach. Despite these many changes, research continues to show, and com-
mon sense dictates, that excellence in preceptorship during transitions in clinical practice remains critical for RNs’ development of competencies and confidence. A high-quality preceptorship experience depends on a skilled and knowledgeable preceptor who is committed to the precepting role and who has the potential to facilitate the clinical experience by creating a healthy, trusting environment that supports safe practice while encouraging the development of critical thinking and clinical reasoning skills.

CONTINUING NURSING EDUCATION AS A CONDUIT FOR PRECEPTOR EXCELLENCE

Every patient deserves a good nurse and every nurse deserves a good preceptor (Ulrich, 2011). Studies have shown that as health care has become increasingly complex, consistent educational opportunities have been associated with increased job satisfaction as well as improved job performance. If preceptors are to achieve excellence in their many roles and remain effective at ensuring seamless transition for new nurses and future retention of RNs, ongoing continuing education opportunities must be available to them as support in their preceptorships. RNs must acquire and maintain the specialized knowledge needed to provide highly skilled care and to demonstrate their competence to their peers, their patients, their employers, and the public on an ongoing basis throughout their careers. Because of this need, nurses rank continuing nursing education as the third most vital component of nursing skill building, just after workplace experience and basic nursing education (Whitehead & Lacey-Haun, 2008). RNs strive to constantly improve their skills to better care for their patients. This characteristic often extends to working with new RN staff, where they seek to continue improving their skills as a nurse preceptor.

Preceptor competencies are not intuitive—they must be learned. A proficient and well-planned preceptorship education program is the conduit that helps preceptors on their journey to excellence. The development of meaningful and available activities is key to preceptor education. The objectives and framework for such a program should provide activities that incorporate several key features: adult learning principles, clinical inquiry, constructive feedback, goal setting, and sharing of experiences and perspectives. The focus of all of these activities should be on the four key roles of preceptors.

Administrators of provider units can integrate this information in several ways. First, recognizing the importance of the role of the preceptor adds credibility to efforts to reduce barriers to preceptor engagement. Second, capitalizing on the four preceptor roles and evaluating the effectiveness of the preceptor provides evidence of implementing the quality outcome of nursing professional development. This can include development of the preceptor and his or her increased effectiveness as well as development of the preceptee in critical areas of clinical reasoning, effective communication, clinical practice, and increased competence in a new nursing role. Third, organizational commitment can be quantified in terms of engagement and nurse/work satisfaction.

Administrators also need to acknowledge the barriers that have been identified related to preceptor education. Planned education activities that use a variety of learning settings and strategies will be more available to preceptors across the practice continuum. Identifying the clinical experts who possess the characteristics to be successful preceptors and offering them the opportunity and education to work with less experienced RNs is a win–win for organizations. The overwhelming certainty is that the provision of education contributes to the competence of both the preceptor and the preceptee, thus supporting a safe patient care environment.

SUMMARY

Like any other health care professional responsibility, RN preceptorship requires specific knowledge, skills, and attitudes. The literature confirms that preceptorship has a positive impact on recruitment and retention of new graduate nurses and is viewed as the vital link between the nursing educational environment and clinical practice. If professional RNs are to achieve excellence in the preceptor role as champions of new graduate nurses and transitional RNs, continuing nursing education must be available to support this role. To be effective, preceptors must be able to work through the challenges of a fast-paced, highly technical clinical environment, understand individual learning styles, deal effectively with conflict, and instill nursing passion and motivation. To achieve excellence, the preceptor role must be enhanced through and supported by a proficient and well-planned preceptorship continuing education program.

REFERENCES


