

Precepting

The term preceptor, or teacher, has been known since 15th century England. Preceptors are the most important teachers in providing a solid clinical experience for nurse practitioner students. Preceptors help to synthesize the didactic information into the clinical arena where students are given the opportunity to develop their own standards and strategies for independent clinical practice. Preceptors provide a learning atmosphere where students can refine their clinical skills, increase their knowledge base and practice efficiently. The preceptor's continuing support, feedback, and evaluation will help the student achieve mastery to become independent nurse practitioners. (Burns, Beauchesne, Ryan-Krause, & Sawin, 2006).

Preceptors are integral to the professional development of advance practice nursing students. The preceptor is one who “engages the student in the guided experience of applying knowledge to practice.” The preceptor serves as a role model and promotes clinical and professional competency, student autonomy, and socialization into the particular role the student has chosen. The preceptor works in partnership with faculty to provide the student with opportunities to develop and refine necessary skills and critical reasoning in the clinical management of patients, or populations (“The Catholic,” n.d.).

A preceptor is an experienced practitioner who provides role support and learning experiences to student and staff learners. A preceptor works with the learner for a defined period of time to assist the learner in acquiring new competencies required for safe, ethical and quality practice (“BC Academic,” n.d.).

The primary role of the preceptor is one of clinical instructor, supervisor, and evaluator. The course work provides the student with the knowledge and principles required to graduate as a safe practitioner. The preceptor continues this instruction as the student observes and then gradually becomes responsible for assessment, diagnosis, treatment, health care evaluation and monitoring, health promotion and counseling that form the basis of their practice (“Concordia,” n.d.).

Precepting students in the clinical arena is a special form of teaching, involving both formal and informal methodologies. We have all had teachers throughout our lifetime that we remember with fondness. They are the ones who seem to be gifted, and had an almost instinctive knowledge of how to help someone learn. If we try to categorize what makes us feel this way about a particular teacher, we'd probably come up with a variety of qualities:

- Those willing to give of themselves.
- Those willing to share knowledge, yet encourage self-learning and independence.
- Those who are humble, able to put the spotlight on the students.
- Those who are nonjudgmental, allowing all students to be themselves, who help the students' qualities to shine.

- Those who use positive, rather than negative reinforcement.
- Those who are flexible, allowing students to do things their way, even if that isn't the teachers' way.

The Perfect Preceptor is a role model who others strive to emulate. They have patience, enthusiasm, knowledge, a sense of humor, and respect their peers. They are competent and have a willingness to learn. They are advocates, teachers, confidants, nonthreatening, nonjudgmental, and cognizant of personal weaknesses.

Precepting is NOT

- Someone to do your work
- An opportunity to show off all that you know
- An opportunity to judge others
- About you
- Easy

Why Nurses Become Preceptors

1. Opportunity to teach/share knowledge/personal satisfaction/increase own knowledge base, promotion, influence change.
2. The more benefits that preceptors perceive associated with the role, the more committed they were and the more support they perceive for the role.
3. Students bring vigor and provide challenging opportunities for the preceptor.
4. Effective clinical teaching requires preceptors to assess the process they use for clinical decision making.
5. Preceptors remind themselves that precepting is an opportunity to reassess assessment techniques to provide more focused, time efficient, and cost-effective care.
6. Precepting provides an opportunity to keep current with the literature.
7. Being a role model.
8. Precepting stimulates personal and professional growth and increase preceptor's knowledge base.

(Adopted from the Partners in NP Education Preceptor Manual; NONPF, 2000)

Benefits of Precepting Students

We understand that having a student takes extra time and organization, and increases your own responsibilities within your practice. Nonetheless, we hope that you will discover many benefits to working with our students both professionally and personally. Some preceptors find they are able to be more productive as their students develop assessment and diagnostic skills. Many of our preceptors have found that working with students challenges them to expand their own base of knowledge and discover new ideas. Students often bring information about recent research and a desire to gather information that you have not had time to seek out given your busy clinical practice. Additionally, you will gain teaching and mentoring skills, and enjoy the satisfaction of watching your students grow and develop into safe, effective, and successful practitioners.

Preceptors/mentors report many individual and varied reasons and benefits associated with precepting students. Preceptors often note the satisfaction they receive in knowing the value of what they are contributing to the “next generation” of advance practice nurses. Some feel the need to “pay back” the debt they incurred during their own professional education and believe that it is a professional responsibility. A great number report that they themselves benefit from the stimulation and challenge of working in collaboration with a student. The student’s questions may stimulate the preceptor to investigate the latest evidence for a problem or dig deeper for an explanation. (Adopted from the Catholic University School of Nursing Preceptor Handbook)

Challenges with being a Preceptor:

- It takes time
- It takes skill in clinical education
- It can be difficult if the student is not meeting expectations
- The rewards are not always immediate

A Nurse Practitioner Preceptor:

- Is an experienced and competent clinician
 - Facilitates and evaluates student learning in the clinical arena
 - Provides a learning environment for students
 - Encourages the student to function at their highest level of competence
 - Develops the student to have a positive role concept, confidence and competence
 - Adapts to accommodate to the expectations and needs of the student
 - Utilizes timely, direct, honest and open communication
 - Establishes boundaries of safety early
 - Analyzes and provides positive feedback and constructive criticism to students
- (Adopted from BSU Clinical Preceptor Information & Concordia University Nurse Practitioner Preceptor Handbook)

What is Expected of a Preceptor?

- Evaluating the student's ability to apply knowledge learned in the classroom to the clinical setting
 - Teach content material and clinical skills based on the expectations of the student's clinical course and student's learning needs
 - Evaluate the student's clinical performance
 - Provide the opportunity for students to assess, diagnose, treat, and teach clients
 - Be physically present in the clinical setting or provide a qualified substitute
 - Be responsible to individual needs
- (Adopted from Concordia University Nurse Practitioner Handbook)

Student – Preceptor Process

Prior to the Beginning of the Clinical Rotation

- Meet with the learner to discuss the clinical experience
- Preceptor and student to sign the clinical site form
- Review the learning plan and objectives
- Assist the learner to identify strategies for achieving learning objectives

During the Clinical Rotation

- Facilitate learner's introduction to the clinical setting
- Act as a clinical expert and role model sharing experiences and knowledge
- Provide clinical supervision and consultation to the learner during clinical experience
- Meet with the learner regularly to discuss progress towards achievement of learning objectives , as outlined in the student's objectives
- Inform the NP Advisor of any problems arising from the learner placement
- Complete midterm evaluation as required

After Completion of the Clinical Rotation

- Review the learning objectives with the learner to determine if successfully achieved
- Meet and discuss evaluation of performance with the student and complete the required final evaluation
- Discuss evaluation of performance with the Clinical Faculty, if necessary

(Adopted from Concordia University Nurse Practitioner Handbook)

The Phases of Preceptorship

I: Establishing the Relationship

Establishing trust is one of the most important steps in the preceptor-student relationship and provides the foundation upon which the learning experience will develop. The student frequently experiences anxiety in this new learning situation and can benefit from structure provided by the preceptor in the form of carefully scheduled meetings and conferences. The preceptor's availability at the beginning of the student's placement is crucial in planning the student's experience.

In the first few weeks of the semester, the focus of the relationship is to clarify roles, discuss mutual experiences, review the student's background, career goals and learning objectives and to discuss agency policy.

II: The Working Phase

The implementation of an educational plan is the main focus of the working phase. Reviewing the student's experience, discussing patients, exploring feelings regarding the experience and identifying the meeting of learning objectives are all appropriate areas that can be discussed. Feedback from the preceptor on a regular basis assists the student in maximizing his/her strengths and systematically addressing problems that may interfere with the achievement of the professional role.

During this phase, the preceptor serves as role model, resource person and consultant to the student. By demonstrating his/her own skills as an expert clinician, the preceptor assists the student in role development, application of theory and science, problem solving and decision making. An effective strategy is to encourage the student to observe and analyze the preceptor's role as he/she works with patients and families and interacts with colleagues and staff members. Mutually sharing observations and discussing strategies for nursing practice enables the student to enrich his/her own understanding of how the role is operationalized and how problems are solved.

By applying the principles of adult education, the student's self-direction and autonomy are fostered. Over time, utilization of the preceptor changes: the preceptor becomes less directive and the student becomes more independent and self-reliant. A loss may be felt by the student and preceptor as the relationship changes.

Evaluation is an ongoing process to assess how the learner is achieving his/her goals. At least daily verbal feedback is helpful. Students, through their clinical logs and competency check lists, should track their own progress and accomplishments. Formal, written evaluation procedures should occur at midterm and at the end of the experience, using the program evaluation forms from the school.

(Adopted from the Columbia University School of Nursing Preceptor Handbook)

III. Ending the Relationship

Similar to other professional relationships, the preceptor-student relationship is time-limited. Central issues involved in ending a professional relationship include emotionality and review. These central issues also apply to the preceptor-student relationship. For instance, during the disengagement process, emotions such as feelings of happiness or satisfaction with the experience may alternate with other feelings such as sadness or frustration. However, ending a professional relationship is most satisfying when there is a mutual review of what happened during the experience. It is recommended that this review be accomplished by means of a mutual dialogue that is conducted during the evaluation phase of the practicum.

(Adopted from Virginia Commonwealth University School of Nursing: *Undergraduate Nursing Preceptor-Guided Clinical Education Orientation Manual*)