CRITICAL ISSUES IN THE PREPARATION OF PRECEPTORS FOR NEWLY LICENSED NURSE TRANSITION TO PRACTICE:

WHAT DOES THE EVIDENCE TELL US?

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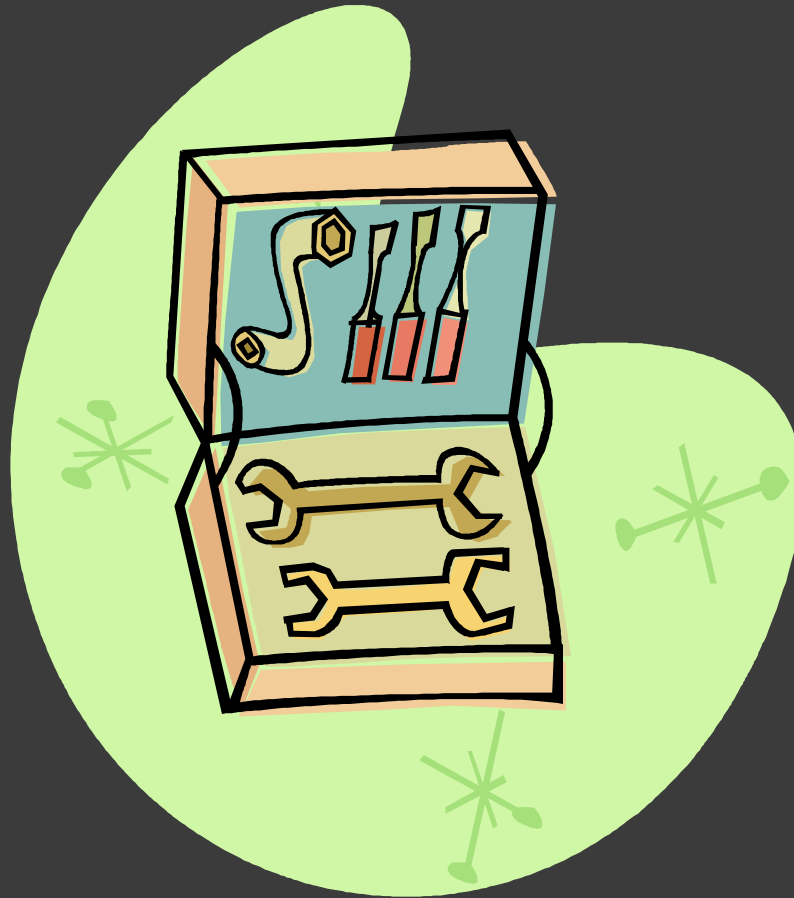PhD, DMin, MSN, CS, RN-BC

The influence of each human being on others in this life is a kind of Immortality.

- John Quincy Adams

Objectives

* Discuss the role and responsibility of the preceptor in transition to practice for newly licensed nurses.

* Explore best/promising practices for preceptor preparation and role development to facilitate the transition to practice for newly licensed nurses.

* Identify preceptor strategies to assess and promote the development of confidence and competence in newly licensed nurses.

* Identify measures of preceptor competence.

How do we change these images?
What is in the program 'toolkit' to provide added value to your time here today and the action planning you will do later?

Topics for Discussion

Preceptors for transition-to-practice for newly licensed nurses:

- Preceptor roles & responsibilities
- Preceptor preparation & role development
- Assessment strategies preceptors use to promote confidence & competence
- Measuring preceptor competence

Themes for Transition

- Do the right thing for the right reasons
- Context of the workplace: Frenetic!
- National, standardized transition program
- Preceptors: acknowledged and educated
- Articulate evidence to practice arenas (*e.g.*, impact on patients)
- Collaborate extensively for buy-in
- Revisit H. R. 5576

HR 5576 IH 107th Congress 2d Session (October 8, 2002): Department of Veterans Affairs Nurse Preceptor Pilot Program Act (Introduced in House).

Premises of Transition Models

- Failure to transition new nurses is a public and professional safety issue
- Active engagement of the new nurse and the preceptor facilitates transition
- Transition programs improve practice, increase competencies, and decrease errors
- A standardized, national transition program:
    - supports development of professional nurses
    - increases nurse satisfaction/confidence
    - increases retention for succession planning

Conceptual Framework

- Structure/processes/outcomes, including type, duration, setting, preceptor involvement
- Content, including theoretical, clinical experiences, and learning lab/simulation
- Characteristics/qualifications of preceptors
- Expectations for competencies
- Development of new nurse/preceptor partnership
- Institutional support of new nurse/preceptor

From: Spector, N., & Suling, L. (2006). Designing Evidence-Based Models for Transitioning New Nurses to Practice. NCSBN Conference Presentation.

Literature Review

- Poor or lack of organizational commitment predictive of nurses leaving current positions but who do not leave nursing

- Most common reasons for leaving:

  - stress associated w/ acuity of patients

  - unacceptable nurse-patient ratios

  - feeling patient care was unsafe

Bowles, C., & Candela, L. (2005). First job experiences of recent RN graduates. *JONA, 35*(3), 130-137.

Literature Review (cont'd)

- About 53% of new nurses change jobs during first year of work
- Much higher turnover for new nurses than overall nursing staff
- Shortage expected to deepen
- Innovative preceptorships needed

Lynn, M. R., & Redman, R. (2005). Faces of the nursing shortage: Influences on staff nurses' intention to leave their positions or nursing. *Journal of Nursing Administration, 35*(5), 264-270.

UHC/AACN. (2003). *Post-baccalaureate nurse residency program: Executive summary*. [Online] http://www.aacn.niche.edu/Education/pdf/ NurseResidencyProgramExecSumm.pdf

Why precept?

The capacity to watch over and guard the well-being of others is an important gift, and one that is learned with great difficulty. For it is one thing to see the situation others are in, but it is quite another to care enough about them to want to help, and yet another to know what to do.

–Judie Bopp

The roles and responsibilities of preceptors in transition-to- practice for newly licensed nurses

Preceptors

Experienced, competent employees who may have received formal training to precept, who serve as role models and resource people, merging knowledge, skills, abilities, and roles of BOTH coaches and mentors in varying degrees to help transition new nurses into strong, confident, and successful professional nurses. They teach, advise, supervise, evaluate, and protect preceptees within the context of trusting relationships.

Preceptors ...

- **Introduce** new nurses to their new team members, and everyone's roles and responsibilities

- **Coach** new nurses on 'the basics'
  - where to park
  - when and where to report
  - where to find supplies/resources
  - how to find and use unit-specific equipment
  - how to address emergency/safety issues
  - what are unit-specific rules/guidelines
  - how to find appropriate policies/procedures
  - how to complete initial competencies

Preceptors, cont'd

- **Support and shape** CT skills
- **Protect and mentor** new nurses during enculturation to new roles/ways of being
- **Evaluate** performance thru' peer review
- **Give feedback** for performance improvement and personal/professional development
- **Introduce** new nurses to wider networks
- **Recommend** new nurses for challenging projects, committees, advancements, and honors w/in communities of practice

SUCCESSFUL PRECEPTORS

- First begin with **self**—emotions and personal health
- Next, shift focus to helping **team members and preceptees/new nurses**—maintain healthy interpersonal relationships
- THEN—and ONLY then—focus on providing **patient** care

Relationships

Relationship-based practice, combined with servant (transformational) leadership facilitate care in which staff/new nurses are central and able to focus all their knowledge, skills, and abilities on patients and families:

- Staff-centered
- Patient-focused
- Relationship-based care/practice
- Grounded in relational preceptorships

EXPLORE BEST/MOST PROMISING PRACTICES for preceptor preparation and role development to facilitate the transition to practice for newly licensed nurses

- Pre-planning internships/residencies
  - develop administration support
  - develop business plan
- Matching preceptors & new nurses
- Preceptor workshops/clinicals
- Consistent communication

Explore promising practices (cont'd)

- Transition to competent professional nurse
- Effective decision-making skills r/t clinical judgment/performance
- Clinical leadership at point of care
- Strengthened commitment to nursing as a professional career choice
- Research-based evidence incorporated into practice
- Individual career development plans/portfolios
- *Ideas from the audience …*

PRECEPTOR STRATEGIES to assess and promote the development of confidence and competence in newly licensed nurses

- ⦿ Develop a structured preceptor training program to include:
  - identifying learning styles/multiple
     intelligences of preceptors & new nurses
  - discuss adult learning principles
  - how to perform observations/evaluations
  - how to provide effective feedback

Preceptor strategies (cont'd)

- Develop methods to identify learning needs and facilitate learning:

  - identify preferred learning styles/multiple intelligences (preceptor & new nurse)
  - set time to become familiar with organization and unit P&Ps
  - develop consistent competencies/skills
  - develop unit-specific competencies
  - develop learning portfolio (articles/resources)

Preceptor strategies (cont'd)

- Develop methods to identify learning needs and facilitate learning (cont'd):
  - give time to review documentation methods and develop documentation skills
  - engage other disciplines

- Ensure administrative commitment /support
  - provide adequate staffing
  - provide support for preceptorships
  - schedule weekly meetings to review progress, provide feedback, set goals

Preceptor strategies (cont'd)

- Promote socialization of new nurses:
  - nurture new nurses to help ease the transition to their professional roles , opportunities, responsibilities, and accountabilities
  - engage them: patience, kindness, support

From: Research on transitioning newly hired graduate nurses by Hardy & Smith (2001), Lavoie-Tremblay et al (2002), Marcum & West (2004) cited in: Hickey, M. T. (Jan/Feb 2009). Preceptor perceptions of new graduate nurse readiness for practice. *Journal for Nurses in Staff Development*, 35-41.

Preceptor strategies (cont'd)

- Build confidence thru' reflective practice
  Ask questions that demand implementation of critical thinking to reflect increasing knowledge, skills, and abilities in clinical judgment

From: Monaghan, H. (2007). Framework for reflection [reflective practice]. Visioning HealthCare Inc. Available online at http://www.visioninghealthcare.com

NEW NURSES. REAL CONVERSATIONS

http://www.realityrn.com/

EXAMPLES of Recent Comments posted:

- Nursing Job Openings and the Economy
- Unable to Find New Grad RN Program in IL

- A Male Nurse Shares Why He Chose Nursing
- Florida RN Salary
- Funniest Nursing Stories
- Managing Your Career Are Hospitals Really Desperate for New Grads?
- Rookie Wit & Wisdom
- Seasoned with Sage

Cartoon Archives
Classics
Videos
Job Postings

MEASURES of preceptor competence

- Psychomotor skills
- Assessment skills
- Critical thinking skills
- Time management
- Communication
- Leadership
- Teamwork
- Partnerships

Hickey, M. T. (Jan/Feb 2009). Preceptor perceptions of new graduate nurse readiness for practice. *Journal for Nurses in Staff Development*, 35-41.

OUTCOMES , *e.g.,* measured by retention/ recruitment surveys

SURVEY	2009	2010	2011
Number new grads RNs hired			
Number new grad RNs leaving nursing service w/in 1 year of employment			
% retained more than 1 year			
Number new grad RNs leaving nursing service w/in 2 years of employment (included is the less-than-1 year grads)			
% retained more than 2 years			
Number passed NLN (or NCLEX) on first attempt			

References

- Butler, K. M., & Haydin-Pierce, M. (2005). Leadership strategies to enhance the transition from nursing student role to professional nurse. *Nursing Leadership Forum, 9*(3), 110-117.

- Yonge, O., Billay, D., Myrick, F., & Luhanga, F. (2007). Preceptorship and mentorship: Not merely a matter of semantics. The Berkeley Electronic Press. Retrieved online February 21, 2009 at http://www.bepress.com/ijnes/vol4/iss1/art19.

- Expanded bibliography provided in program handbook

Come to the edge, he said.
They said, *We are afraid*.
Come to the edge, he said.
They came. He pushed them
… and they flew.

– Guillaume Apollinaire