



## From Staff Nurse to Preceptor: Keys for Success

Jill Guilfoile, MEd, BSN, RN-BC  
Pam Hutchinson, DNP, RN, CPN

June 14, 2017  
Nursing Grand Rounds  
Cincinnati Children's Hospital

---

---

---


---

---

---



---

---



"Preceptors are the essential link between what nurses are taught and what they do ... and between what nurses know, and what they need to know."

Beth T. Ulrich, EdD, RN, FACHE, FAAN

---

---

---


---

---

---

---


---



## Precepting Myths

Ulrich, B. (2012) Mastering Precepting, a Nurses Handbook for Success

- You are a good nurse, so you will be a good preceptor
- You need to be an expert clinician in order to precept
- Preceptors must work around whatever patient assignment is made and whatever is happening on the unit



---

---

---

---

---

---

---

---

## Learning Outcome

To enhance knowledge and confidence in carrying out the responsibilities of precepting new graduate and experienced RN's




---

---

---

---

---

---

---

---

## Background

Nursing employment will increase 16% by 2024, with an estimated need for 439,300 RN's in the work force  
(Bureau of Labor Statistics, 2015)

**Estimated 33% to 69% of new nurses change positions within a year of graduation due to**

- High patient acuity and complexity
- High workplace expectations without support to meet them
- New nurses feeling inadequate
- Unprepared, constantly rotating preceptors

### 2016 Nursing Solutions Data

- In 2015, the turnover rate for bedside RNs increased to 17.2%, up from 16.4% in 2014.
- RN Cost of turnover varies, but can be over \$88,000 (National Academy of Sciences)

---

---

---

---

---

---

---

---

## Why are Preceptors Critical?

- Preceptors are **vital to health care organizations**; they are charged with the pivotal **responsibility of ensuring newly licensed nurses' competency to deliver safe, autonomous care.**

- Preceptors have **tremendous power** to guide the professional practice development of nurses, doing so through guided learning and role modeling.

Effective Preceptorship: Tools for Practice <http://www.marquette.edu/nursing/transitiontopractice.shtml>  
Accessed 2.1.2017

- Preceptors are at the intersection of education and practice .....and of the present and the future.



- Well-prepared preceptors, with the support of their organization, department leadership and peers, can positively impact employee satisfaction and retention rates!

---

---

---

---

---

---

---

---

## Preceptors are....





**Preceptors make  
a difference**



---

---

---

---

---

---

---

---

## Multifaceted Role of the Preceptor

Evaluator

Socializer &  
Team Leader


Protector

Educator &  
Coach

Role Model

Vermont Organization of Nurse Leaders  
2003-2007

Alspach, 1988  
Vermont Organization of Nurse Leaders 2003-2007




---

---

---

---

---

---

---

---

## Socializer



Introduces to team; fosters integration into workplace culture; helps them become part of the healthcare team

Understands/supports social and individual cultural needs

Facilitates ongoing communication between manager and educator;  
Practices preceptor handoff

Teambuilding; Works to ensure colleague support for new hire for socialization and orientation




---

---

---


---

---

---


---

---



### Educator/Coach

- Supports and encourages while sharing knowledge/promoting skill development
- Assesses learning needs and learning styles; customizes clinical orientation plan based on learning styles and needs
- Collaboratively plans learning activities
- Critical thinking and reflective practice in preceptee



---

---

---


---

---

---

---



---



### Role Model

*"An Individual who exemplifies through his or her behavior how a specific role is to be carried out"*  
JG Alsopach

- Adheres to standards of practice; seeks resources in the face of uncertainty
- Models professional behavior- self development, attitudes
- Demonstrates effective communication; active listener
- Promotes a safe, healthy work environment

---

---

---


---

---

---

---

---




### Evaluator

- Ensures adherence to Policy and Procedures and Standards of Practice
- Validates expected behaviors of new hire using organization's competency validation tools and processes

**As the Evaluator – consider asking orientee:**

- How is your day going?
- What issues or challenges are you struggling with now?
- Is there something that happened today (this week) that you feel proud about accomplishing?
- What is going well for you?



---

---

---

---

---

---

---

---

## Protector

- Protects the safety of both patient and preceptee; protects patient from novice error
- Provides safe learning environment for the preceptee
- Acts as advocate for new hire and protects from adverse behaviors of others
- Ensures adherence to policy and procedure ( standards of care)
- Works within scope of practice; delegates care as appropriate



Five Rights of Delegation



---

---

---

---


---

---

---

---

## Critical Thinking




---

---

---

---

---

---


---

---

## Critical Thinking – Why and How??

- Critical thinking improves patient outcomes
- Improves efficiency of professional practice environment
- Adds to a positive work environment
- Increases nursing staff's retention, job satisfaction and work performance

(Chan, 2013)




---

---

---

---

---

---

---

---

## Components of Critical Thinking

- Gathering and Seeking information
- Questioning and investigating
- Analysis, evaluation, and inference
- Problem solving and application of theory

(Chan, 2013)




---

---

---

---

---

---

---

---

## What Is Critical Thinking?

- Active, organized and cognitive process
- The objective analysis and evaluation of an issue in order to form a judgment




---

---

---

---

---

---

---

---

## Critical Thinking

- Uses both intuition and logic
- Is contextual- requires a knowledge base
- Cognitive Skills and Strategies
  - General skills used in all situations
  - Basic level thinking skills
  - Gathering data
  - Providing nursing care
  - Evaluating data




---

---

---

---

---

---



---

---

## Critical Thinking

How do I promote Critical Thinking Skills...

- What if?
- What would you do??
- What additional info is needed?
- Who do you see first? Why?
- What are the alternatives?
- What should be done next?
- How would you plan to do this?
- What do you need to have prepared?
- What supplies would you need?
- How will you know the intervention worked?


---

---

---

---

---

---


---

---

## Critical Thinking

### Three Stages of Critical Thinking

1. Right from wrong
2. Alternatives
3. Complex




---

---

---

---

---

---


---

---

## Critical Thinking

### Right from Wrong

- Concrete Thinking – looking at right from wrong – very black and white
- Applies standards and rules to situations
- Use concrete examples when teaching
  - Here is the skill
  - This is why you need to know it
  - Here is an example
- Critical Thinking Skill – Judging how much ambiguity is acceptable




---

---

---

---

---

---


---

---

## Critical Thinking

**Alternatives**

- Transfer concrete knowledge to more complex situations to get desired results in simulated or real situations
- Patient focused assignments
- Critical Thinking Skill – Compare and contrast




---

---

---

---

---

---


---

---

## Critical Thinking

**Complex**

- Foster thinking about various options or "thinking "outside the box"
- Facilitate learning in the patient-care environment using a variety of tools
- Clinical situations that are not so well-defined, with lots of possible variables will enhance learning/thinking
- Critical Thinking Skill- Use Questioning




---

---

---

---

---


---

---

---

## Teaching Thinking Guide

- I saw....
  - Concrete objective data to clarify
- I think.....
  - Your impression of their thinking
- I wonder....
  - Describe what influenced your decision making, what you were thinking...



— National League for Nursing

---

---

---

---

---

---

---

---



## Evaluating Critical Thinking

### Performance Based Development System (PBDS)

- Problem Recognition
- Reports Essential Clinical Data
- Initiates Independent Nursing Intervention
- Differentiates Urgency
- Anticipates Relevant Medical Orders
- Provides Relevant Rationale

Experienced Nurses able to do this while New Graduate Nurse less likely to. Also, more education correlates with increased ability to succeed at these items

(Fero et al., 2008)




---

---

---

---

---

---

---

---

## Providing Effective Feedback




---

---

---

---

---

---

---

---

### EFFECTIVE

### FEEDBACK IS A GIFT...



“When we offer someone a glimpse into how their actions are being perceived & received, we offer them a chance to modify their behavior in order to be more effective.”

Chatsworth Consulting Group




---

---

---

---

---


---

---

---

## Benefits

- ❖ **It teaches...**
- ❖ **It motivates...**
- ❖ **It facilitates change**
  - Professional and personal growth for both clinical guide and orientee.




---

---

---

---

---


---

---

---

## Key elements of effective feedback

- Comes from a source who...
  - directly observed the behavior.
  - is trusted and respected
- Targets specific behaviors and skills that are...
  - limited in scope.
  - relevant to the learner's effectiveness in a given role.
  - within the learner's control.
- Feedback should be provided...
  - as soon as possible - BUT...both need to be in the "right" frame of mind.
  - verbally - BUT...written feedback can be effective too.
  - in a "safe" environment




---

---

---

---

---

---

---

---

## Effective feedback messages...

- It's best if your message contains
  - descriptive – act as a video camera → playback a report of observations vs. interpretations
  - a description of the impact or consequence of the desired behavior.
- It's best if your message avoids...
  - assumptions regarding the cause of the performance problem
  - judgments regarding the learner's traits or characteristics.




---

---

---

---

---


---

---

---

## I-Messages

- Avoids the blaming or criticizing tone of you-messages, such as,  
*"You really need to work on your charting,"*  
 or  
*"You always overlook that part of the assessment."*
- I-messages addressing these same problems might sound like:  
*"When I review your charting, I notice that the history lacks recent information."*  
 or  
*"When I review your assessment findings, I don't get enough information about functional capacity to make a sound diagnosis."*




---

---

---

---

---

---

---

---

## 10 Tips for Great Feedback!

1. Seek agreement to meet
2. Introduce the topic. Don't beat around the bush.
3. Provide specifics.
4. Ask for clarification.
5. Be credible.





---

---

---

---

---

---

---

---

## 10 Tips for Great Feedback!

6. State your concern.
7. List the potential consequences.
8. Use "loaded" words sparingly.
9. Reach agreement on what is expected in terms of performance.
10. Close the conversation.




(Beth Hawkes, MSN, RN, BC, Nurse Columnist)

---

---

---

---

---

---


---

---

### "B.E.E.R." Feedback

<b>Behavior</b>	What is the preceptee doing or not doing that is unacceptable or needs to be improved?
<b>Effect</b>	Why does the behavior need to change? How does it hurt productivity, safety, bother others, and so on? <i>Ask their input</i>
<b>Expectation</b>	What do you expect the preceptee to do/ not do to change?
<b>Result</b>	What will happen when the orientee changes (positive tone) or if this behavior continues (negative tone)? <i>Impact</i>

**Action:** What is the follow up plan?



---

---

---

---

---


---

---

---

### I-D.I.D. – Key steps for quick & specific feedback

- **I**NIITATE
- **D**ESCRIBE
- **I**NVITE
- **D**ISCUSS



---

---

---

---


---

---

---

---

- **I**NIITATE the conversation.
- **D**ESCRIBE what they did & the impact.  
*and*  
what they should've done & the impact.
- **I**NVITE a response.
- **D**ISCUSS improvement or close/follow up plan.



---

---

---

---

---

---

---

---

## Develop a Culture of Feedback!

- An understanding of how to give appropriate feedback may support feedback effectiveness
- Opportunities to provide feedback must not be missed




---

---

---

---

---

---

---

---

“Learners need endless feedback more than they need endless teaching”  
–Grant Wiggins




---

---

---

---

---

---

---

---

## Summary

- Preceptors have many roles!
- Preceptors are empowered!
- Teaching critical thinking is paramount!
- Feedback is crucial!




---

---

---

---

---

---

---

---



---

---

---

---

---

---

---

---