

# Preceptorship Guidelines

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One of the keys to successful integration of new employees is a solid preceptorship program involving unit-based staff. All staff, from the newest member to the most senior, benefit when a new nurse is effectively integrated into the work environment and able to contribute to the success of the unit. Below you will find the outline and recommended guidelines for a preceptorship program currently in use at the Shaikh Khalifa Medical Center.

## I. INTRODUCTION

*Objectives* of a Preceptorship Program include:

- foster development of individualized orientation.
- provide a role model for the preceptee
- assist the preceptee in the socialization process of adjusting to the unit.
- ensure competent nursing care
- promote understanding of the impact of institutional culture
- increase peer awareness regarding preceptor role
- enhance communication among staff, managers, and clinical resource nurses
- provide a tool to evaluate the orientation program

## II. DEFINITIONS

**Orientation** – means of introducing philosophy, goals, policies, procedures, role expectations, physical facilities, and services in the work setting.

**Preceptorship** – organized and planned educational program in which preceptors facilitate the integration of new staff nurses into their role responsibilities. An individualized approach to orientation done in conjunction with general nursing orientation. A process that helps new staff become familiar with roles, practices, policies and procedures, techniques, cultural aspects and professional responsibilities.

**Preceptor** – experienced and competent staff nurse who serves as a clinical role model and resource person to all staff nurses. Provides and directs the learning experiences of new staff nurses and also provides assessment and educational interven-

tions for all staff members. Should have 2 years appropriate nursing experience and a minimum of 6 months as a staff nurse at the precepting facility; exemplary evaluations; and successful completion of a preceptor training course.

**Preceptee/Learner** – new staff nurse who participates in a preceptorship program as a portion of orientation to an assigned unit or staff member who is experiencing some learning deficits.

**Manager** – leader of the ward/unit.

**Staff** – other members of the ward/unit health care team.

## III. ROLES AND RESPONSIBILITIES

**Preceptor Roles** include primary orientor; staff nurse role model; socializer into work group; educator; resource; consultant. **Responsibilities** include displaying excellence in the staff nurse role by demonstrating clinical proficiency and maintaining current certifications; providing and directing learning experiences; creating and maintaining learning atmosphere; demonstrating knowledge of objectives and material taught in the preceptor program; demonstrating knowledge of policies, procedures, rules, and regulations; assisting the preceptee in setting long and short term goals; planning assignments based on the learning needs of the preceptee; communicating learning plans, evaluations, and concerns; facilitating the preceptee's socialization and culturalization into the work environment.

**Preceptee/Learner Roles** include staff nurse and learner. **Responsibilities** include willingness to learn; knowledge of objectives, policies, procedures, rules and regulations of the preceptor program; accountability for actions; communicating learning needs, concerns, and feelings with both the preceptor and the unit manager.

**Manager Roles** include leader and advisor. **Responsibilities** include assessing and selecting staff members to become preceptors; enforcing policies, procedures, rules, and regulations; providing opportunities for preceptor training; communicating priorities, needs and concerns; providing time and autonomy for precepting to take place; resolving conflicts; assuming ultimate responsibility for the evaluation of the preceptor and the preceptee; maintaining a supportive environment for preceptorship at the ward level.

**Staff Roles** include team leader and resource clinician. **Responsibilities** include demonstrating an accepting attitude; providing a supportive environment; acting as a resource; taking an increased workload when necessary.

## **I. GUIDELINES AND EXPECTATIONS**

1. Assignment of preceptors will be determined by the unit manager.
  - a. Ideally, participation as a preceptor should be voluntary and the preceptor should demonstrate a willingness to undertake the role.
  - b. Preceptors will attend a preceptor training course.
  - c. First priority assignment for preceptors will be new staff and transferring staff.
2. Preceptorship will include ward orientation and competency based education.
  - a. Competencies may be completed during the standard orientation time or at a predetermined set time based upon individual unit guidelines.
  - b. **New staff are expected to have appropriate skills and experience based upon their recruitment criteria. Preceptors are not expected to teach basic nursing clinical skills to the preceptee.**
  - c. If at all possible, orientation to charge nurse duties will not be included in the basic preceptorship time.
3. A minimum time for preceptee to remain with the preceptor will be established by each ward or unit.
  - a. Preceptors and preceptee will work the same shifts on a prearranged schedule.
  - b. Whenever possible, a preceptee will have only one preceptor. When more than one preceptor is necessary, one preceptor will be responsible for continuity and priority setting for the overall preceptorship.
  - c. Preceptors will not float to other wards or units during a preceptorship.
4. Evaluation of the preceptor, preceptee, and the preceptorship will occur at regular intervals. The manager, preceptee, and preceptor will set a schedule of meetings for the purpose of follow-up and evaluation.

- a. Tools for evaluation will include anecdotal notes; final and self evaluation; skills checklists; and documentation of completion of competencies.

- b. Preceptees will have the opportunity to evaluate the preceptor and preceptorship at the completion of orientation.

- c. A record should be maintained by the preceptee of day to day assignments, clinical highlights, and plans and goals.

5. Preceptor preparation training programs will be coordinated through Nursing Education. There will be a basic training program and ongoing preceptor development opportunities.

- a. New staff will be oriented to the preceptor program guidelines and expectations during their orientation.

- b. New managers will be oriented to the preceptor program guidelines and expectations during their orientation.

6. Preceptors will be recognized for their service to the ward by letters of commendation; special recognition during the International Nurses Week; special name tags; and priority sign-up for inservices and workshops.

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