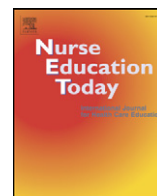




Contents lists available at ScienceDirect

Nurse Education Today

journal homepage: www.elsevier.com/nedt

Are preceptors adequately prepared for their role in supporting newly qualified staff?

Lisa Panzavecchia*, Ruth Pearce

University of Worcester, United Kingdom

ARTICLE INFO

Article history:
Accepted 6 March 2014
Available online xxx

Keywords:
Role of preceptor
Preceptorship
Education

SUMMARY

Objective: The purpose of this UK based study is to ascertain the support provided to preceptors and the qualities they require to carry out their role supporting newly qualified professionals.

Design: A qualitative descriptive approach was adopted to elicit the experiences and perceptions of the preceptors in practice.

Sample and Methods: A cross-section of 30 preceptors were randomised across 3 hospital sites within one acute Trust. Questionnaires were distributed with a response rate of 37% (n = 11). Five preceptors participated in a semi-structured interview (n = 5).

Findings and Discussion: The themes that emerged from the analysis were lack of preparation for their role, expectations of the preceptors and how they perceive the role and the limitations and difficulties associated with being a preceptor.

Conclusions: Preceptor attributes and programme approaches have been discussed in the existing literature although guidance concerning preparation and training for the role in the UK is less well documented. The findings of this small scale study may be useful in planning and developing preceptorship programmes in the future to provide sustainable support to develop the preceptor as well as the preceptee.

© 2014 Elsevier Ltd. All rights reserved.

Introduction

In the UK in recent years, the Department of Health (DH) has placed value on preceptorship programmes in documents such as 'Modernising Nursing Careers' (DH, 2006), 'High Quality Care for All: NHS Next Stage Review' (DH, 2008), and the Preceptorship Framework for Newly Registered Nurses, Midwives and Allied Health Professionals (DH, 2010). The framework made preceptorship mandatory and set out principles for good practice, highlighting the steps necessary for its effective implementation.

The DH defines a preceptor as a registered practitioner who has been given a formal responsibility to support a newly registered practitioner through preceptorship (DH, 2010 pg. 6). The preceptor plays a pivotal role in the transition of staff from novice to expert by guiding and role modelling their knowledge, skills and practice to increase confidence and enhance newly qualified professionals' practice. This is a unique opportunity to mould the new registrant through positive engagement into an autonomous, decision making practitioner.

Preceptors require the ability to demonstrate their own qualities in areas such as role modelling and clinical skills and the ability to problem solve as well as have insight into the role of the newly qualified

professional, yet the requirements to act as a preceptor are minimal. The criterion to be a preceptor for nursing and midwifery is to have been on the NMC Register for Nurses, Midwives and Health Visitors for a minimum of 1 year.

Support for Preceptors in Their Role

In the UK, the Nursing and Midwifery Council (Nursing and Midwifery Council, 2008a,b) states that teaching is part of the role of the registered nurse, midwife and health visitor and this can be interpreted as patient health promotion; teaching activities with peers and colleagues; preceptorship, mentorship and assessing student nurses during their practice placements.

Henderson et al. (2006) acknowledge that there is a universal acceptance of the importance of the role of preceptors however; it cannot be assumed that all registered nurses can function as preceptors. They suggest that it may not be the most experienced staff that make the best preceptors, as personal attributes can influence how they perform in this role with less experienced clinicians demonstrating effective teaching and communication with novices (Bain, 1996).

It has been documented that preceptors in the UK receive little or no preparation for their role (NHS North West, 2009; Currie and Watts, 2012). NHS North West (2009) identifies the main barriers to effective preceptorship as inadequate preparation and support for preceptors. DeWolfe et al. (2009) state that providing appropriate support to the

* Corresponding author.
E-mail address: l.panzavecchia@worc.ac.uk (L. Panzavecchia).

preceptor can enhance success as if they feel unsupported they can become demotivated and dissatisfied thus less effective in their role (Yonge et al., 2008). This supports anecdotal evidence where being a preceptor is expected of staff who feel unprepared for the role resulting in feelings of inadequacy. This can lead to a tick box attitude to preceptorship due to lack of recognition and support.

Competing clinical demands impact on supporting junior staff and can effect role modelling. Studies highlight the need for protected time in order for preceptorship to be effective (Henderson et al., 2006; Maben et al., 2006; NHS North West, 2009; Higgins et al., 2010; Upton et al., 2012). Henderson et al. (2006) found that preceptors complained of lack of time to carry out their role effectively, with patient care taking priority in demanding clinical setting (DeWolfe et al., 2009).

Preceptor Preparation

Prior to preceptorship becoming mandatory in 2010 there was a web based programme that a variety of Trusts throughout the UK accessed called Flying Start (Flying Start Scotland, 2006). The programme aimed to support newly qualified staff through a structured programme of online work packages. An evaluation of the programme found different levels of engagement and achievement between professions and difficulties in completing the programme due to competing pressures within work time (Upton et al., 2012). Flying Start was used to inform the development and implementation of the Preceptorship Framework (2010) however, it was a resource focused on preceptees rather than preceptors. This lack of resource, despite financial investment, for preceptors perhaps reflects the lack of commitment and appreciation for the role of the preceptor: the assumption being as a professional; additional support for mentoring, teaching or nurturing is not required.

Currently, in the UK there is no requirement for preceptors to have a teaching or assessing qualification, as opposed to mentors who formally assess student nurses (Nursing and Midwifery Council, 2008a). This lack of recognition of the role does not acknowledge the context of the nurse student experience prior to qualification where many practice in a variety of clinical placements within different institutions. To enable effective transition, they need to acquire knowledge based on their first staffing experiences to enable informed decision making (Andrews et al., 2006), thus retention. With a move to an all graduate profession, this new education paradigm requires experienced preceptors to play a vital role in shaping professional attitude. Bain (1996) warns that without the support and interest from managers and professional bodies the effort and enthusiasm of practitioners may be destroyed.

NHS North West (2009) suggests that whilst there are no formal requirements for preceptors to have teaching or assessing qualifications, they would expect preceptors to have sufficient knowledge to be able to identify the practitioners' learning needs as supported by DeWolfe et al. (2010) who state that preceptors need knowledge of how students or preceptees learn in order to facilitate their development. The DH (2010) states in the Preceptorship Framework that preceptors need to be prepared for the role however, little detail is provided as to what this preparation should include.

Henderson et al. (2006) highlight that educational support and preparation is required for preceptors to carry out their role effectively, however preparation programmes are not universal or mandatory (Goode and Williams, 2004). The DH Preceptorship Framework (2010) suggests that there are a number of benefits provided by preceptorship for the preceptor including engendering a feeling of value to the organisation.

Attributes of a Preceptor

The Preceptorship Framework (DH, 2010) has a clear vision of what attributes a preceptor should possess including having the ability to act

as an exemplary role model and to be a conduit to formalise and demonstrate continued professional development.

DeWolfe et al. (2010) suggest that attributes are the ability to: interact effectively, critically evaluate, provide feedback, work in a team and apply the principles of adult learning. NHS North West (2009) highlights that often the experience of the preceptee is directly related to the ability and experience of the preceptor, therefore support mechanisms need to be put into place to ensure that relationships can be fostered and developed.

Evidence draws comparisons between mentoring and precepting although consensus indicates that the preceptor role draws upon the skills of coaching or guiding. Parsloe and Wray (2000) suggest that coaching is a process that enables learning and development to improve performance. They suggest that a successful coach requires knowledge and understanding of the process as well as the ability to use a variety of styles, skills and techniques appropriate to the context in which the coaching takes place such as patience, perseverance and insight (Clutterbuck, 2007). What is less widely acknowledged is the pressure under which preceptors carry out their role and the added commitment which increases workload pressures.

Overall

Few UK studies on preceptorship look at the preparation of the preceptor and how they are supported in this role. What emerges is an inequitable delivery of preceptorship nationally and preceptor support is not always provided.

The evidence demonstrates how preceptorship should be delivered and good practice guidelines are offered but little or no practical direction for staff on what is expected of them and how to deliver on preceptorship. The complexity of the nursing role and the demands they have to meet in practice add to the difficulties in supporting newly qualified staff.

Preceptorship is widely acknowledged as a positive process but it must be delivered effectively and within a framework for both preceptors and preceptees to work within in order for it to have any real benefit. There is a need for recognition of this by NHS organisations to support preceptors in their role.

The review of the literature led to the questions: how do preceptors perceive their role and how are they supported in delivering preceptorship to newly qualified staff nurses?

Research Design

Qualitative descriptive designs can be considered a reasonable and well-considered combination of sampling, data collection and analysis which are amenable to obtaining answers to questions of special relevance to practitioners and policy makers (Sandelowski, 2000). This study utilised a qualitative descriptive approach to address the research questions arising from the literature.

A questionnaire was distributed to gather demographic data and responses to closed questions with an opportunity to include qualitative comments. Semi-structured interviews were utilised to gain insight into how preceptors felt about their role and to elicit personal descriptions of the preceptorship experience. The questionnaire was not formally piloted, however an expert researcher acted as a 'critical friend' or 'critical colleague' (Stenhouse, 1975) to strengthen its validity and reliability.

A cross section of 30 preceptors were selected across three hospital sites within one acute Trust. The two larger hospital sites utilised random sampling selected from a list of current preceptors. At the smaller hospital site, purposive sampling was used due to lack of available preceptors. It was considered important to access preceptors from all three sites to enable a representative view.

Questionnaires were distributed and preceptors were invited to participate in a semi-structured interview. The response rate was 37%

Download English Version:

<https://daneshyari.com/en/article/10316456>

Download Persian Version:

<https://daneshyari.com/article/10316456>

[Daneshyari.com](https://daneshyari.com)