



The development and validation of the Clinical Teaching Behavior Inventory (CTBI-23): Nurse preceptors' and new graduate nurses' perceptions of precepting



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SUMMARY

Background: Few studies have examined the perceptions of clinical teaching behaviors among both nurse preceptors and preceptees.

Purposes: To develop a Clinical Teaching Behavior Inventory (CTBI) for nurse preceptors' self-evaluation, and for new graduate nurse preceptee evaluation of preceptor clinical teaching behaviors and to test the validity and reliability of the CTBI.

Methods: This study used mixed research techniques in five phases. Phase I: based on a literature review, the researchers developed an instrument to measure clinical teaching behaviors. Phase II: 17 focus group interviews were conducted with 63 preceptors and 24 new graduate nurses from five hospitals across Taiwan. Clinical teaching behavior themes were extracted from the focus group data and integrated into the domains and items of the CTBI. Phase III: two rounds of an expert Delphi study were conducted to determine the content validity of the instrument. Phase IV: a total of 290 nurse preceptors and 260 new graduate nurses were recruited voluntarily in the same five hospitals in Taiwan. Of these, 521 completed questionnaires to test the construct validity of CTBI by using confirmatory factor analysis. Phase V: the internal consistency and reliability of the instrument were tested.

Results: CTBI consists of 23 items in six domains: (1) 'Committing to Teaching'; (2) 'Building a Learning Atmosphere'; (3) 'Using Appropriate Teaching Strategies'; (4) 'Guiding Inter-professional Communication'; (5) 'Providing Feedback and Evaluation'; and (6) 'Showing Concern and Support'. The confirmatory factor analysis yielded a good fit and reliable scores for the CTBI-23 model.

Conclusions: The CTBI-23 is a valid and reliable instrument for identifying the clinical teaching behaviors of a preceptor as perceived by preceptors and new graduate preceptees. The CTBI-23 depicts clinical teaching behaviors of nurse preceptors in Taiwan.

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Introduction

Few studies have examined the perceptions of clinical teaching behaviors among both nurse preceptors and preceptees. This research team is not aware of any study in a Taiwanese clinical education context, especially in relation to the connection between preceptor teaching behaviors and the new graduate nurse (NG). The preceptored clinical experience provides a work integrated learning opportunity by

facilitating the NG being socialized into the health care work setting. At the same time precepting also assists with the role transition from student to registered nurse because the NG is supported in a complex and dynamic nursing work environment (French and Greenspan, 2013). Preceptors with effective teaching behaviors have been found to help the NG with developing their unit-specific competence (e.g. surgical ward), as well as to increase adjustment, confidence, job satisfaction, and retention rate (Haggerty et al., 2013; Tsai et al., 2014).

The nurse turnover rate is a global problem with approximately 17.5% of new nurses leaving their first job within the first twelve months (Kovner et al., 2014). Taiwan suffers from a severe shortage of nurses, with 6.3% of positions unfilled. A major cause of the shortage is a nursing attrition rate of 11.2% (Taiwan Ministry of Health and Welfare,

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2014). Moreover, the turnover rate among NGs in the first three months has been between 20 and 29% (Lu, 2013). One of the most stressful and frustrating encounters for newly hired nurses has been identified as the interaction with the preceptor (Chang, 2013). Additionally, nurse turnover rates have been found to be associated with ineffective preceptor teaching behaviors (Feng et al., 2011; Tsai et al., 2014). The consequence of the high turnover rate and loss of NGs is a need to recruit more nurses and train additional preceptors to cope with the demand in clinical practice education and training, but also to build a support structure for NGs in an educationally valid and reliable framework. The notion of Taiwan preceptors supporting NGs has enormous potential to improve retention and recruitment.

Preceptors must constantly update their clinical teaching expertise and competence to facilitate the successful transition of the NG into constantly changing patient care environments (Baltimore, 2004). Thus, since 2013, the Taiwan Joint Commission on Hospital Accreditation (TJCHA) has mandated that teaching hospitals must offer training courses yearly in order to enhance the nurse preceptor's clinical teaching competence (Taiwan Joint Commission on Hospital Accreditation, 2014). In striving to maintain a high quality preceptored experience, knowledge of the clinical teaching behaviors of the preceptor as perceived by preceptors and NGs is useful in identifying the strengths and weaknesses of the preceptor's clinical teaching. For better learning effect, an NG nurse who is being precepted needs both adult learning principles and the incorporation of interactive teaching strategies into his/her learning process. Expectations should be based on experience level, and consistent competency evaluation, with regular and consistent constructive feedback provided. Based on the learner-centered approach, as educators of adult learners, the nurse preceptors need to consider the NG's experience when planning appropriate and effective learning activities (Knowles et al., 2005).

Although validated clinical teaching behaviors/competencies evaluation instruments have been published over the years, it is important that new instruments be developed for the context in which they will be applied. Tools for evaluating teaching behaviors may not be used indiscriminately without relevant re-validation and updating of items for new contexts (Arah et al., 2011). Most existing tools designed around the preceptor/preceptee interaction have been used to measure the nursing preceptor's perceptions (Chiu et al., 2013; Hsu et al., 2014; Krichbaum, 1994; O'Brien and Bremmer, 2008; O'Brien et al., 2014) or the nursing faculty's/nursing instructor's perceptions (Fong and McCauley, 1993; Lee, 1992; Mogan and Knox, 1987; Tang et al., 2005; Zimmerman and Westfall, 1988).

Such instruments specifically focus on teaching the nursing students, not on the precepting of NGs. Thus far, only one instrument for preceptor's self-evaluation, entitled "Teaching Effectiveness questionnaire" (Lin et al., 2012) has focused on precepting the NG. However, this instrument has not been updated to include items related to inter-professional practice (IPP) education (National League for Nursing, n.d; Taiwan Joint Commission on Hospital Accreditation, 2014) or providing concern and support to help the NG to handle the stress of the role transition from student to RN (Haggerty et al., 2013). Furthermore, the instrument developed in this research collects feedback from NGs (learners). For faculty and staff members evaluating a student's practice, learner feedback is a critical method for gathering feedback about teaching quality (Beckman et al., 2004).

Few instruments explore the perceptions of both preceptors and preceptees in the measurement of preceptor clinical teaching behaviors. Thus, this study develops a Clinical Teaching Behaviors Inventory (CTBI) for preceptors' self-evaluation and for preceptees (NG) to evaluate the clinical teaching behaviors related directly to their preceptored clinical experience, and to test the validity and reliability of this CTBI. The wording of each version of the instrument is slightly different. For the preceptor self-evaluation the subject of the CTBI is "I", while for the preceptee evaluation of the preceptor, it is "the preceptor".

Background

Concepts of Clinical Teaching Behaviors

Clinical teaching behaviors are the verbal and non-verbal interactions and actions of clinical instructors and preceptors which facilitate learning achievement in clinical settings (Ali, 2012). Clinical teaching behavior is demonstrated by a preceptor and perceived by the NG as contributing to a positive preceptored clinical experience. While preceptor expertise and knowledge contribute to a successful teaching and learning experience for the preceptee, other important clinical teaching behaviors, such as respect, support, and compassion for the preceptee, are also reported as crucial (Jokelainen et al., 2011). For example, Tsai et al. (2014) conducted focus group interviews with 63 preceptors and 24 preceptees from five hospitals in Taiwan, and found that caring, passion, and support were crucial needs of NGs and that they were instrumental in building a caring preceptor-preceptee relationship that helped precepted nurses become caring practitioners. Preceptors themselves also need educational and professional support in order to remain reflexive. This can be done via clinical supervision, or in the keeping of reflexive diaries used in clinical supervision sessions (Alspach, 2008; Levett-Jones, 2007). Furthermore, Hilli et al. (2014) interviewed 31 preceptors in Finland and Sweden, and discovered that teaching in a safe and supportive learning environment and building a caring student-preceptor relationship was a foundation for student learning. Raines (2012) interviewed and analyzed 26 experienced nurse preceptors' beliefs and values and concluded that preceptors who are willing and committed to teaching students and want to be actively involved in their clinical education are important characteristics in the learning outcomes of students. Nehring (1990) replicated the 1987 study of Mogan and Knox where both nursing faculty and students agreed that being a good role model, encouraging mutual respect and providing support and encouragement were the three most critical characteristics differentiating the 'best and 'worst' clinical teacher.

In the majority of reviewed literature, the categories of clinical teaching behaviors have been described as encompassing the traits of nursing competence (Kim, 2007; Mogan and Knox, 1987), creating a positive learning environment (Tsai et al., 2014), interpersonal relationships (Tsai et al., 2014; Hilli et al., 2014; Mogan and Knox, 1987), teaching ability (Tsai et al., 2014; Mogan and Knox, 1987; Warholak, 2009), personal characteristics (Boyer, 2008), communication skills (Tsai et al., 2014), feedback and evaluation (Tsai et al., 2014; Warholak, 2009) and enthusiasm for teaching (Raines, 2012; Tsai et al., 2014). The characteristic of being a good role model is repeatedly evident in the majority of studies reviewed.

Being a good role model encompasses positive and effective integration of all behavioral characteristics. NGs learn from the behaviors, knowledge, experience and skills of their preceptors and evaluation of preceptors' behavior in the clinical setting plays an important role in understanding the benefits of clinical teaching. The majority of previous studies have explored a generalized scope of a preceptor's teaching behaviors in teaching students but they seldom address the indicators of clinical teaching behaviors toward newly hired NGs. It is necessary therefore to investigate what kinds of clinical teaching behaviors are required for precepting NGs in diverse, complex and dynamic clinical contexts.

Overview of Clinical Teaching related research instruments

The researchers used the Cochrane Library, MEDLINE, CINAHL, PubMed, ProQuest, EBSCO host databases, bibliographies, and article references in English and Chinese to search for existing Clinical Teaching Behavior (CTB)-related instruments published in January, 1980 ~ December, 2014 in nursing education. Twelve instruments were found. These included Brown's (1981) Clinical Teacher Characteristics Instrument (CTCI), Chiu et al.'s (2013) Chinese version of

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