



## Review

## Supporting newly qualified nurses in the UK: A systematic literature review

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## SUMMARY

**Aim:** This is a systematic literature review of the existing published research related to the development of preceptorship to support newly qualified nurses in the United Kingdom (UK).

**Background:** It has been known for some time that newly qualified nurses experience a period of unsettling transition at the point of registration. In the UK, preceptorship has been the professional body's recommended solution to this for over 20 years.

**Data Sources:** Searches were made of the CINAHL Plus and MEDLINE databases.

**Review Methods:** A systematic review was carried out in August 2011. Twelve separate searches were conducted generating 167 articles, of which 24 were finally reviewed. Papers were critically reviewed and relevant data were extracted and synthesised using an approach based on Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA).

**Results and Discussion:** A results table is presented of the twenty-four sources generated by the systematic search. Three themes were identified from the empirical evidence base: 'Managerial Support Framework'; 'Recruitment and Retention'; and 'Reflection and Critical Thinking in Action'.

**Conclusion:** There is strong evidence that the newly qualified nurse benefits from a period of supported and structured preceptorship, which translates to improved recruitment and retention for the employing organisations.

**Recommendations for Further Research and Practice:** The existing literature provides an evidence base upon which to construct a preceptorship programme and a means by which to measure its efficacy and monitor its future development. Case study research projects should be considered for future preceptorship programmes in order to find the most effective methods of delivery.

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## Introduction

This systematic review will discuss the research undertaken on supporting newly qualified nurses (NQNs) through preceptorship. The context of this review is of increased interest in the need to support NQNs and other professionals, through their initial period of registration. Benner's (1982, 1984) research indicated that nurses should be seen as being on a professional route from "novice to expert". However, she was concerned that employers would encourage nurses to remain half way through this process at the competent stage. If the route to expert practitioner is to be encouraged, then roles such as preceptor are important for both the NQN, as preceptee, and the experienced nurse undertaking the preceptor role. This has been noted at international, national and local levels. This review will take

into account the international and inter-professional context but the focus is on the United Kingdom (UK).

In the UK, the concerns of the media and profession regarding competency and attrition were highlighted by the move from the apprenticeship model of nurse education to the university based system. The consensus was that these new university educated practitioners would be less prepared for the realities of nursing than their forebears. This resulted in the issuing of recommendations from the nursing regulator the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC) (1990) that a period of preceptorship should be undertaken by all NQNs. Consequently, although the concerns about NQNs are international, the requirement for preceptorship has a UK nursing professional meaning. In the context of nursing in the UK, preceptorship has a specific professional definition: "the process through which existing nurses and midwives provide support to newly qualified nurses and midwives" (Nursing and Midwifery Council (NMC), 2008:46). Furthermore, the regulator explains that preceptors should have at least one year's experience and have a teaching qualification (NMC, 2006). This specificity is in contrast to the variety of definitions for preceptorship in the overseas literature. This is also

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true for the period of initial support after qualifying. In countries outside of the UK the term 'preceptorship' is more usually used to describe a nurse who teaches students and other learners in the clinical area (Sharples and Elcock, 2011). This may be a full time occupation or an additional role similar to the NMC definition of 'mentor' (NMC, 2008). The international definitions of the period of post-registration support also vary. In addition, some nations have a compulsory transition programme, in which the NQN has a formal programme of support and education (Levett-Jones and FitzGerald, 2005).

Robinson and Griffiths (2009) ended their review of preceptorship with a recommendation to examine the "experience of post-qualification supported practice in other professions" with a view to "informing the shape of preceptorship in nursing" (Robinson and Griffiths, 2009:19). Therefore, other professions have been included in this review for this purpose.

## Method

The process follows a modified version of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) Statement (Moher et al., 2009). PRISMA has been adapted due to the combination of quantitative, qualitative and mixed methods research encountered when conducting a review of this type. The PRISMA checklist headings used for this section are: 'Eligibility Criteria', 'Information Sources', 'Search', and 'Study Selection'.

### Aim

This is a systematic literature review of the existing published research related to the development of preceptorship to support newly qualified nurses in the UK with a view to highlight areas for further work.

### Eligibility Criteria

The chronological parameters for this research were from 1990, as this was when the nursing regulator first issued guidance to suggest that a period of preceptorship would be recommended (UKCC 1990), and concluded in 2011. The geographical limitations of the search were international. However, the definition of preceptorship is different outside the UK as noted above. Therefore, overseas evidence had to be manually assessed to ensure its relevance before inclusion.

### Information Sources

The search for the literature used the CINAHL Plus and MEDLINE databases. The twelve separate searches were conducted during August 2011. In addition to the mechanical search, the reference lists of other sources were interrogated and seminal works in the field were identified.

### Search

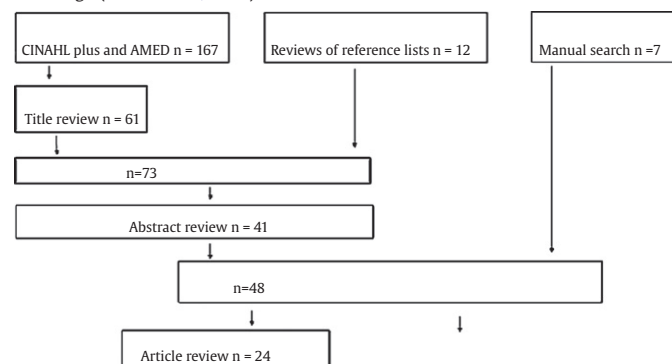
A full series of search terms was used to generate the selection. Examples included 'experiences' 'precept\*' 'nurs\*' (n = 51), and 'learning environments' 'practice' 'nurs\*' (n = 68).

### Study Selection

This mechanical search generated 167 articles. These were then subjected to three stages of manual review: title review, abstract review, and article review (see Table 1). The majority of the sources are double-blind peer reviewed original research or literature reviews. However, a UK Government commissioned review and three articles relating to the preceptorship of student nurses have also been included as they contain important evidence.

**Table 1**

Summary of the literature search and numbers of articles obtained and reviewed at each stage (Moher et al., 2009).



## Results

The main components of the 24 articles for review are shown below in Table 2. This enables the reader to gain a systematic overview of the sources found and the factors that will be discussed later. The table is organised into rows and columns with each row identifying the important factors of individual sources. The columns identify a set of factors selected to describe the contents of the articles selected for review. The first two columns list each article by author and year of publication. These can then be cross referenced to the reference list to identify each source. The country of origin is identified. This ensures that the national context of preceptorship and support of NQNs can be easily identified. The research aims are then identified. These allow the reader to identify the focus of each report. The methods used in each article are then listed. This is important as there are a variety of research methods used and their clear identification allows the reader to assess the appropriateness of the research design. The 'research design' column includes details of data sources and numbers of participants. This ensures that the reader can be clear what type of evidence the results are based upon. The findings column indicates the results of the research. The limitations column identifies any perceived cautions regarding the generalisability and reliability of the evidence.

The results table is presented below Table 2.

## Discussion

All of the papers agree that newly qualified staff require a period of support following qualification (Wangenstein et al., 2008). This is justified on a number of grounds: that NQNs are not fully fit for purpose at qualification; that even where they can be shown to be competent they do not have the self-confidence to be an autonomous professional (Kelly and Ahern, 2008; Maben and Macleod Clark, 1996); that preceptorship aids the recruitment of NQNs (Hardyman and Hickey, 2001) and reduces the high level of turnover otherwise experienced (Giallonardo et al., 2010; Hickey, 2010). Internationally, there are several models of support and these are debated in the literature (McCarthy and Murphy, 2010; Roxburgh et al., 2010; Wangenstein et al., 2008). The main three identified in this review are: formal programmes of induction without an allocated preceptor; one to one personal preceptorship for the first few months after qualification; or a combination of the two. The consensus is that the preceptorship relationship is most important and that this is enhanced if it is supported by formal structures of support including peer support and mandatory training (Adlam et al., 2009). In the UK the form of support for NQNs has been accepted as preceptorship since 1990 (UKCC, 1990). The NMC has recommended that this should be at least four months for nurses (2006) and the Great Britain, Department of Health (DH) advise a period of 12 months of post-qualification

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