

Qualities of Effective Preceptors

As a new graduate registered nurse (RN) enters professional practice, one of the most influential individuals in this transition is the preceptor. A preceptor guides and mentors the novice nurse so clinical judgment and skills are enhanced for the complexities of patient care (McCarthy & Murphy, 2010). In essence, the preceptor is assisting the novice nurse in bridging the gap between education and clinical practice. The preceptor's ability to mentor effectively has tremendous impact on the novice nurse's performance, retention, and career progression (Schaubhut & Gentry, 2010). Not everyone is meant to be a preceptor. Being a preceptor requires special qualities to guide and nurture a new graduate's transition. Thus an experienced nurse should be evaluated before placing him or her in this role.

To serve as a preceptor, an experienced nurse needs to (a) model the mission, vision, and values of the health care organization; (b) have a minimum of 2 years of clinical experience; and (c) be willing to serve as a preceptor (McCarthy & Murphy, 2010; Shinnors & Franqueiro, 2015). Being a preceptor is a desired function of the RN role, not an extra duty that is assigned arbitrarily. Once this basic criterion is met, additional qualities are needed to ensure an experienced nurse will be an effective preceptor.

Qualities

Four qualities of effective preceptors will be discussed here.

Teacher

As a teacher, a preceptor provides an environment in which nursing theory is integrated with clinical practice (Lofmark, Thorkildsen, Raholm, & Natvig, 2012). Hsu, Hsieh, Hsiu-Win, and Chen (2014) suggested a preceptor should have education and experience involving quality teaching with novice nurses. This knowledge often is gained through preceptor orientation courses offered by health care facilities. The environment should promote learning and encourage the novice to ask questions. The preceptor needs to apply principles of adult learning to teaching strategies while bridging the theory-practice gap. While identifying the learning needs of novices, the preceptor routinely evaluates performance standards. Areas of strength and weakness are communicated to the novice. To encourage improvement, the preceptor can try alternative learning strategies.

Role Model

As a novice nurse transitions into the professional role, he or she often mimics the attitudes and skills of the preceptor (Raines, 2012). An effective preceptor demonstrates appropriate verbal and nonverbal communication skills when interacting with health care staff, patients, and families. Using these professional skills shows the novice nurse the importance of creating a positive work environment through communication. In regard to clinical skills, the preceptor is knowledgeable about hospital policies and evidence-based guidelines. Using these policies and guidelines during practice enables the novice nurse to develop appropriate skills rather than embrace shortcuts that may compromise care. The preceptor is honest when he or she does not know the answer to clinical questions. However, the preceptor should share resources to help the novice answer any question (Shinnors & Franqueiro, 2015).

Supportive Learning Environment

In developing a supportive learning environment, the preceptor accepts and values being a preceptor. The role is viewed as an opportunity rather than an assignment or task. A balance must exist between providing patient care and precepting. The preceptor may request a reduced patient assignment to allow greater attention to the role (Broadbent, Moxham, Sander, Walker, & Dwyer, 2014). Also, the preceptor embraces and encourages questions from the novice nurse. When questions are encouraged, the novice becomes comfortable in addressing any issues that arise, no matter how complex. Creating a supportive environment prevents lateral violence between these two roles. As a result, there is a decreased incidence of bullying behavior (Schaubhut & Gentry, 2010) and the novice nurse comes to believe he or she is a valued member of the health care team.

Feedback

During orientation, the preceptor provides ongoing feedback in an approachable manner. Communication is clear and concise. The preceptor has skill in probing further when needed to assess the novice nurse's understanding of various situations. In addition, goals are established, reviewed, and revised as needed during orientation (Broadbent et al., 2014). Having periodic reviews of information provides clear communication regarding strengths and deficiencies. Should a novice nurse struggle in the clinical area, resources and remediation are obtained. Review also provides a method of documentation for nursing management and education (Schaubhut & Gentry, 2010).

Sonya Blevins, DNP, RN, CMSRN, CNE, is Associate Dean, Greenville Campus, Mary Black School of Nursing, University of South Carolina Upstate, Spartanburg, SC; and MEDSURG Nursing Editorial Board member.

Conclusion

As the demand for RNs grows, the need for preceptors in the clinical area will increase. It is the responsibility of health care leaders to identify and use nurses with effective precepting skills to train novice nurses. Creating a positive environment for the novice nurse enhances his or her confidence while reducing first-year turnover (Schaubhut & Gentry, 2010). Becoming a preceptor provides experienced nurses with the opportunity to train the next generation of nurses. **MSN**

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