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# Developing a Preceptor Training Program for Registered Nurses in a Teaching Hospital

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# Walden University

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This is to certify that the doctoral study by

Persephone Munnings

has been found to be complete and satisfactory in all respects,  
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2019

Abstract

Developing a Preceptor Training Program for Registered Nurses in a Teaching Hospital

by

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MS, Walden University, 2010

BS, College of The Bahamas, 1999

Project Submitted in Partial Fulfillment  
of the Requirements for the Degree of  
Doctor of Nursing Practice

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May 2019

## Abstract

In a report on the nursing shortage, the American Association of Colleges of Nursing cited insufficient preceptors as one of the factors influencing the decreased intake of nursing students to registered nurse (RN) programs, thus compounding the shortage issue. The site selected for this project was a teaching hospital that annually facilitates hundreds of nursing students for clinical practice. Graduate nurses rotating through the hospital are assigned to work with RNs within their assigned units. The purpose of this doctoral project was to develop a preceptor training program for RNs in a teaching hospital. The practice-focused question examined whether RNs would identify perceived competence and understanding in the preceptor role as a result of preceptor training. Knowles's adult learning theory and Benner's theory of skills acquisition framed the project. Participants (N = 7) completed a 2-week didactic and clinical training in preceptorship. As a result of the educational intervention, the preceptor trainees reported an increase in knowledge, skills, and confidence in the preceptor role. Seven participants (100%) expressed that the training was interesting, relevant, beneficial to their work, and stimulated sharing. The implications of this project for positive change include the potential benefits to new and experienced graduate nurse preceptors by reducing feelings of inadequacy, stress, and burnout and enhancing job satisfaction. Additionally, graduate nurses who work with competent, confident preceptors experience less anxiety, improved job satisfaction and a smoother transition to the role of professional nurses prepared to deliver quality health care to patients. Improving preceptor-graduate nurse experiences may result in reduced turnover among nurses and improved customer experiences.

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## Dedication

I dedicate this project to my children Kevette, Kevin and Katiana, and my grandson Jaylen. I love you more than I can say. I also honor the memories of my late parents Alfred and Laurie McKinney who always told me that I could be anything I dreamed of being.

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Finally, all honor, glory, and praise are due to my God, the creator and sustainer of my life, for granting me grace to endure the rigor of doctoral scholarship. Thank you, Father. I am eternally grateful.

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## Section 1: Nature of the Project

### **Introduction**

It is projected that by the year 2020, there will be approximately 1 million job openings for nurses, due to a growing population of aging adults with an increased need for healthcare, an aging nursing workforce, and nurses leaving the profession for various reasons (American Association of Colleges of Nursing [AACN]), 2012; Zinn, Davis, & Moses, 2012). A recent report of the AACN (2019) identified insufficient preceptors for new graduate nurses as one of the factors influencing decreased acceptance of qualified nursing school applicants and consequently compounding the nursing shortage. A variety of mentoring and residency programs have been known to improve retention and job satisfaction among new graduate nurses (Bratt & Felzer, 2012; Horton, et. al., 2012).

The successful management of any transition program requires well-trained clinical preceptors who serve in various roles, including educator, mentor, socializer, and evaluator (Bratt 2009, as cited in Condrey, 2015). Preceptorship is a formal relationship in which new graduate nurses are guided by a skilled nurse who serves as a role model for a specified period. The preceptor facilitates a smooth transition from the classroom to the clinical setting for the graduate nurse. This relationship aids graduates in their professional growth and development of clinical skills (Owens, 2013).

Preceptors are expected to possess the skills needed to create an effective learning environment and facilitate clinical learning experiences for nursing students and new employees (Bengtsson & Carlson, 2015). According to Washington (2013), preceptors need

to be mentally, physically, and emotionally prepared to create a nurturing environment for new graduate nurses.

### **Problem Statement**

Graduate nurses experience difficulty making the transition from student to professional nurse due to patient acuity, increased workload, and sometimes inimical practice environments (Condrey, 2015). A national survey by the Department of Health and Human Services (HHS, 2010), revealed that almost 40% of new graduates plan to leave their current position within 3 years. Reasons cited by the nurses who left their positions were centered mostly on workplace issues, with stressful work environments being the most common, followed by lack of good management and inadequate staffing (Bratt & Felzer, 2012).

RNs are often required to serve as preceptors in the clinical environment without preceptor experience, training, or even willingness (L'Ecuyer, Hyde, & Shatto, 2018). This practice leaves the preceptor feeling overwhelmed and unsupported (Panzavecchia & Pearce, 2014; Tracey & McGowan, 2015).

The Institute of Medicine (IOM, 2010) highlights the importance of nurse residency programs with supportive preceptors to help manage the transition of the graduate nurse to RN. Residency programs help new nurses to develop skills necessary to deliver safe, quality care (Fehr, 2011).

The site selected for this project was a teaching hospital that facilitates hundreds of nursing students for clinical practice annually. Nursing students rotating through the hospital are assigned to work with RNs within their assigned units. At the time of this project, there was no formal preparation for preceptors of the nursing students.

### **Purpose Statement**

The purpose of this project was to develop a staff education program that would prepare RNs for the role of preceptor for new graduate nurses. The hospital serves as the main clinical practice site for graduate nurses who have completed their academic degrees and are awaiting results of their nursing licensure examinations. In the organization's current program for graduate nurses, each graduate nurse is allocated to a medical/surgical unit for a period of approximately 3 months and assigned to a RN who serves as his or her preceptor. There was no formal preceptor training program for preceptors at the project site. The project question was as follows: Upon completion of a structured nurse preceptor training program, will registered nurses perceive an increased competence and understanding in the preceptor role?

### **Nature of the Doctoral Project**

The staff education program was developed using current evidence and following the guidelines in the DNP Manual for Staff Education Project (2017). A review of literature was conducted to determine the latest research evidence related to graduate nurse transition and preceptor training programs. The need for the program was supported by nursing administration. Nurse leaders within the hospital and clinical preceptors served as content experts for the program.

The preceptor is the key educator of the graduate nurse during the transition period and their relationship has a significant impact on the success of the transition experience; therefore, they must be carefully selected and prepared for their roles. Years of experience

and a desire to serve as a preceptor are not sufficient criteria for selection (Cotter & Dienemann, 2016). from various nursing units. Criteria for selection included:

- RNs
- Possession of at least a bachelor's degree in nursing
- At least 2 years of clinical experience
- A positive performance appraisal (most recent)
- Displaying characteristics of good preceptors
- Recommendation to serve as preceptor by their department managers
- Willingness to serve as a preceptor (Jansson & Ene, 2016)

### **Significance of the Project**

There is a global shortage of nurses. According to the AACN (2012), there will be approximately 1 million job openings for nurses by the year 2020. The Institute of Medicine (2010) highlights the importance of nurse residency programs to help manage the transition of the graduate nurse to RN. Residency programs help new nurses to develop skills necessary to deliver safe, quality care (Fehr, 2011). The successful management of residency programs requires well-trained clinical preceptors who serve in various roles including educator, mentor, socializer and evaluator, to assist the transitioning graduating nurses.

This clinical preceptor program was significant to nursing practice because it was a structured program that equips preceptors with the knowledge and skills required to facilitate the new graduate nurses (Condrey, 2015). Participants identified their perceived competence and knowledge of the preceptor role at the beginning and end of the program. Preceptor training programs help increase new graduate nurse retention, reduce graduate nurses' reality

shock, and provide the preceptor with the skills they need to support the new nurses (Kang, Chiu, Lin, & Chang, 2015).

### **Social Change**

This project was an education program providing RNs with the knowledge and skills required to facilitate new graduate nurses during their clinical learning experience (Condrey, 2015). Social change involves the act of making a positive change at an individual level, in an organization and within society (Laureate Education, 2014). A successful preceptor training program produces experts with the knowledge and skills to support the new graduate nurses. Having a positive experience with an experienced nurse and preceptor has been shown to decrease stress, burnout, and attrition in new graduates (Schaubhut & Gentry, 2010; Bratt & Felzer, 2012; Marks-Maran et. al., 2013). The project was expected to have a positive impact on the graduate nurses, preceptors, patients, the institution, and .

### **Summary**

Evidence exists that support the position that transition from graduate nurse to practicing professional is stressful for the new graduate and often results in high turnover rates which is costly for hospitals (American Association of Colleges of Nursing, 2012; Zinn, Davis, & Moses, 2012). The job satisfaction and retention of new graduate nurses is linked to participation in a supportive relationship with a preceptor who is trained in principles of clinical preceptorship (Bratt 2009, as cited in Condrey, 2015). This evidence-based project was an educational program to prepare RNs for the role of preceptor to facilitate the transition to professional practice and improve the retention and job satisfaction of new graduate nurses in the clinical setting. The project question was: Upon completion of a

structured nurse preceptor training program, will RNs perceive an increased competence and understanding in the preceptor role?

Section 1 described the gap in practice, the project question, and the significance of the project to nursing practice and social change. Section 2 identifies the model that will support the project. The evidence relevant to the project will be discussed. My role in developing, implementing, and evaluating the project will be explored.

## Section 2: Background and Context

### Introduction

The preceptor–graduate nurse relationship is critical to successful transition of the newly graduated nurse to professional RN. The project question was: Upon completion of a structured nurse preceptor training program, will RNs perceive an increased competence and understanding in the preceptor role? Section 1 explored the importance of a preceptor program to graduate nurse retention and social change. Section 2 describes the model and theory supporting the project, the evidence relevant to the project, and my role in developing and implementing the education program.

### Conceptual Models and Theories

#### Adult Learning Theory

Knowles' adult learning theory provided the basis for the development of this preceptor education program. Knowles, who introduced the term *andragogy* (adult learning), theorized that adult learners have distinct and unique characteristics that impact their learning (O'Shea, 2002). He articulated six assumptions that guide adult learning (Vandevveer & Norton, 2009):

- Adults need to know why it is important for them to learn.
- The adults experience provides the basis for their learning.
- Adults prefer a problem centered approach to learning.
- Adults are interested in learning subjects that have immediate impact on their professional or personal lives.
- Adults are self-directed learners.

- Adults are motivated to learn by intrinsic and extrinsic factors

Adults will be interested in learning only if they feel that the knowledge is of importance to them. Preceptors often feel unprepared to take on the new role, therefore they would view the education program as valuable to their preceptor role. Adult learners also prefer self-directed learning with a problem-solving approach. Adults prefer to draw on their past experiences and apply new knowledge gained from prior experience. Sharing their experiences with each other will give preceptors the opportunity to learn from prior experiences. All of the new preceptor trainees were already experienced nurses; therefore, the instructor served as a facilitator promoting collaborative learning among the learners (Billings & Halstead, 2009).

### **Benner's Novice to Expert Nursing Theory**

Benner's novice to expert nursing theory consists of five levels of experience: novice, advanced beginner, competent, proficient, and expert. The level experience of the learner guides the preceptor's teaching strategies (Gentile, 2012). Additionally, applying Benner's model to the education of the preceptors affords them support in a safe learning environment resulting in enhanced knowledge, skills and confidence in their roles.

#### Novice

Learners at the novice stage, are guided by rules and policies. They do *not possess* the experience and critically thinking skills to make judgement in context with various clinical situations; therefore, they rely heavily on rules or direction provided by the preceptor/teacher (Thomas & Kellgren, 2017). The novice also has difficulty deciding what was priority. It is important for preceptors to realize that the novice nurse must be provided with instructions

about what to do, which tasks to perform and in which order. As the preceptees gains more experience and confidence they will progress to the advanced beginner stage (Thomas & Kellgren, 2017).

#### Advanced Beginner

The advanced beginner according to Smith (2013), includes new nurses from 6-12 months post training with some clinical experience and possess marginal performance. These nurses are focused on completing tasks rather than patient-specific management (Smith, 2013). The advanced beginner uses experience, intuition based on previous experiences, and checklists to apply previously learnt rules to guide their actions (Smith, 2013; Thomas & Kellgren, 2017).

#### Competent

The competent nurse with 2–5 years clinical experience, is more abstract conscious and analytical in thinking when making decisions, rather than relying on rules or checklists (Thomas & Kellgren, 2017). At competent level, the nurse can plan more efficiently, prioritize, and can distinguish between relevant and irrelevant information based on past experiences (Smith, 2013; Davis & Maisano, 2016).

#### Proficient

Nurses at the proficient stage (4–5 years) can look at situations as a whole rather than in terms of aspects. The proficient nurse takes a holistic approach to patient care and spends less time planning as he/she recognizes changing relevance in situations and knows which actions are necessary (Thomas & Kellgren, 2017).

#### Expert

The expert nurse has 5–7 years of practice experience (Smith, 2013). With extensive background in nursing, they rely less on analytical thinking or conscious deliberation, but expect the unexpected and are capable of intuitively grasping the situation and making holistic decisions (Smith, 2013; Thomas & Kellgren, 2017). Expert nurses use critical thinking and judgement to apply appropriate care to each patient's unique condition ((Thomas & Kellgren, 2017). The expert nurse is capable of serving as a resource person to less experienced nurses.

The significance of Benner's model of skill acquisition is that because it is based on levels of knowledge and experience, it can be used in planning learning activities for nurses at varying stages of practice experience. (Smith, 2013). The participants, as new graduate nurses were at the novice stage while preceptors were competent, proficient, or expert depending on their years of practice experience. Understanding Knowles model of adult learning and Benner's theory helped preceptor trainees understand how the graduate nurses learn, as well as their level of decision making as new graduates.

### **Definition of Terms**

*Preceptor:* An RN is a full-time employee of the facility and is selected to provide supervision and support for the graduate nurses. Preceptor is defined by The National Council of State Boards of Nursing (NCSBN) as “an individual at or above the level of licensure that an assigned student is seeking who may serve as a teacher, mentor, role model, or supervisor in a clinical setting” (NCSBN, 2012 p. 4).

*Preceptorship* A program that involves an experienced RN providing guidance, clinical instruction and support to a graduate nurse to improve the professional development

of the graduate. Preceptorship: The teaching-learning relationship between the skilled professional and the student nurse to improve the professional development of the student nurse (Happel 2009).

*Graduate nurse* A graduate of a 4-year BSN program, who has sat the national licensure examination (Nursing Council of The Bahamas,2015).

*Staff nurse* A nurse who is registered to provide nursing care in the country.

### **Relevance to Nursing Practice**

Several sources of evidence were utilized to address the practice-focused question. An in-depth literature search was conducted. Electronic databases searched included CINAHL Plus with Full Text, CINAHL & Medline, Cochrane Database of Systematic Reviews, EBSCO, PubMed, and ProQuest. The following keywords and phrases were used in the searches: preceptor, preceptorship, nurse preceptorship, nurse residency, graduate nurse preceptor, graduate nurse residency, graduate nurse attrition, nurse retention, graduate nurse job satisfaction, preceptor training, preceptor program, graduate nurse transition,

Professional websites searched included The Association of Nursing Professional Development, The American Nurses' Association, National League of Nursing, and National Council of State Boards of Nursing.

### **New Graduate Job Satisfaction**

The significant cost of RN turnover is critical to healthcare organizations. Organizational commitment has been linked to decreased turnover and increased job satisfaction for graduate nurses. New graduate nurses' organizational commitment is linked to the job environment and job stress (Bratt & Felzer, 2012).

Retaining newly graduate nurses is of great importance to hospitals and other healthcare organizations because of the high turnover rates. Newly graduate nurses who work in environments that offer support from preceptors, opportunities to learn, and build clinical competence experience lower levels of stress which has been linked to increased job satisfaction (Bratt, & Felzer, 2012). Nurse residency programs create the environment that fosters an increase in the graduate nurses' feeling of empowerment and builds resilience to stress. This leads to higher levels of job satisfaction and reduced turnover (Larabee et al., 2010).

Olson-Sitki, Wendler & Forbes (2012) conducted a study to determine the effect of a nurse residency program on the new graduate experience, retention rate, and employee satisfaction. Results indicated that nurses who completed the residency program had high levels of job satisfaction and compared to the period for 2 consecutive years before the program, turnover rates after the program decreased from 15% and 12% to 7% and 11% respectively.

Yu & Kang (2016) studied job/work environment satisfaction and turnover intention of graduate nurses. The factors affecting job satisfaction and turnover intention varied according to the transition period. At 0-6 months, factors included the desired hospital, duration of orientation, becoming part of a team, professional development, and practical support. At 7-12 months, the factors were work schedule and desired hospital; and at 13-18 months, the factor was professional development ( Yu & Kang, 2016).

A literature review was conducted by Dwyer & Hunter Revell (2016) to identify intrapersonal, interpersonal, and organizational factors that affect graduate nurses' transition

to RNs job satisfaction and retention. The authors referred to transition programs as effective strategies to enhance the graduate nurse's transition and preceptors as strategically placed to influence the learning environment thus help preceptees to achieve job satisfaction. The evidence revealed that preceptorship and a positive work environment increased graduate nurses' satisfaction and intent to remain on the job.

When surveyed about predictors of job satisfaction and intent to remain on the job among new RNs, study participants claimed that a good orientation program, and job satisfaction, impacted their decision to remain on the job with a strong correlation between job satisfaction and retention. (Unruh & Zhang, 2014). Planners of transition programs may use this information in the development of an effective evidence-based preceptor training program.

### **Preceptor Roles and Responsibilities**

Preceptorship involves one-to-one pairing of an experienced RN with a graduate nurse or a less experienced nurse to provide support, supervision, teaching, and coaching to achieve a successful transition to the role of RN (Watkins, Hart, & Mareno, 2016). The nurse preceptor has been described by Blevins (2015), as one of the most influential persons on the new graduate nurse; therefore, not every nurse is a suitable candidate for being a preceptor. The preceptor must be an experienced nurse who models the organization's mission, vision and core values (Blevins, 2015). The novice graduate nurse relies heavily on the preceptor for instructions and teaching. The preceptor's ability to effectively teach, support, and mentor the graduate nurse has a great impact on the graduate's performance, satisfaction, organizational commitment, and retention (Bratt & Felzer, 2012; Blevins, 2015).

Preceptors play a vital role in the transition of new graduate nurses to the practice setting. Research literature shows that the role of preceptor though rewarding, (Chen et al., 2011; Muir et al., 2013), has been perceived as challenging and stressful by preceptors (Muir, et. al, 2013; Valizadeh, Borimnejad, Rahmani, Gholizadeh, & Shahbazi, 2016). The stress felt by preceptors can be reduced by the implementation of well-designed, structured preceptor training programs.

Preceptor program developers guided by their organization's mission and best practices, must clearly define and make known the role of preceptors (Omer, Suliman, & Moola, 2015). In a study to determine the roles and responsibilities of nurse preceptors as perceived by preceptors and preceptees; both groups identified protection of patient from healthcare errors as the highest priority, and evaluation received the lowest rating. Both groups identified the roles of educator, facilitator, and evaluator as roles of the preceptor (Omer, Suliman, & Moola, 2015).

### **Preceptor Programs**

The Institute of Medicine (2010) recommended the implementation of graduate nurse residency programs to help manage the new graduate nurse's transition to practice and prepare them to deliver quality patient care. Agencies such as the Commission on Collegiate Nursing Education (2018) and the National Council of State Boards of Nursing (James, 2017) have joined the IOM (2010) in advocating for, and provides accreditation for these graduate nurse residency programs.

The importance of a well-designed training for preceptors cannot be ignored, as their ability to positively impact the graduate nurse depends on them first having the knowledge

and confidence to serve in the role. Preceptors have perceived that they were appointed as preceptors without receiving adequate preparation for the role (Valizadeh et al., 2016). Nurses who serve as preceptors without formal training may be ill-prepared to facilitate an optimal learning experience for the preceptee. Formal preparation of preceptors to function effectively is one of the most important elements of a successful preceptorship program (Horton, DePaoli, Hertach, & Bowen, 2012). Sanford and Tipton (2016), postulate that an untrained preceptor lacks confidence to in the role. This lack of confidence can negatively impact the transition of the preceptee to RN, leading to frustration and staff turnover. According to Palumbo, Rambur, & Boyer (2012), the careful selection of appropriate nurses to serve as preceptors and providing them with training are key component of a successful residency which leads to graduate nurse retention. According to Bodine (2019) a supportive preceptor who educates, encourages reflection, and is a positive role model helps the new graduate nurse to have a more positive outlook on the rest of her career as a professional nurse. The design of preceptor training programs is critical to the success of the program. Learning to practice in one's chosen career field is important to preparation for professional practice in that field (Brazell & Taylor, 2014).

The success of a preceptor training program is dependent on the collaboration of all stakeholders and full commitment of the organization. The benefits of a successful program include the maintenance of a safe, learning environment for the development of nurses, smooth transition and reduction of burnout of nurses, role clarity and expectations of preceptors, subsequently the retention of new nurses, and improved quality and safety of patient care (Duteau, 2012; Nash & Flowers, 2017).

The format and duration of preceptor training programs may vary based on geographical location, learner population, and type of facility. According to research evidence, preceptorship training programs range from 1 day to 3 days to 2 weeks (Condrey, 2013; Cloete & Jeggels, 2014; Horton et al., 2012) depending on the organization, and program format whether traditional, online, or blended. Jeggels, Traut, & Africa (2013) developed a 2-week program that was a combination of interactive lectures, small group activities and preceptor-student encounters in simulated and real clinical settings. Some of the activities were videotaped and later shown to learners to generate reflective discussions. Epstein and Carlin (2012) supported the use of varied teaching strategies including role play, videos, to support classroom teaching for preceptor. This promotes reflective learning.

Topics to be covered in a preceptorship program may vary based on the organization, the learner, and role expectations of the preceptor. There are however, some topics that are common to any preceptorship program. According to research evidence, some common topics include principles of adult learning, teaching strategies, interpersonal relationships, effective communication, conflict management, assessment of learning and giving feedback (Duteau, 2012; Cordrey, 2013;). Bengtsson and Carlson (2015) conducted a survey to determine the preceptors' identified needs for a training program. Topics identified by the preceptors included learning styles. Critiquing learners' performance, self-assessment and communication. The National Council of State Boards of Nursing (Hansen, 2015), recommends that an evidence-based nurse residency programs has the following subjects in its curriculum: patient-centered care, communication and teamwork, evidence-based practice, quality improvement, Informatics, patient safety, and clinical reasoning.

### **Local Background and Context**

The setting for this evidence-based educational program was a 400-bed acute care teaching hospital in a metropolitan area. The hospital is part of a network of public health facilities and serves a population of approximately 350,000. The hospital is a major site for clinical practice for new graduate nurses who have completed the Bachelor of Science in Nursing (BSN) degree program and are awaiting results of their licensure examinations. The graduate nurses work under the supervision of RNs until they are licensed to practice as staff nurses.

The project site was experiencing extreme nursing shortage; therefore, there were insufficient RNs to be paired one-to-one with graduate nurses. Even when the graduate nurses were assigned a preceptor, they were not always assigned the identical schedule of their preceptors. This educational intervention provided an opportunity for the hospital to increase its pool of nurse preceptors, ensuring that each graduate nurse is assigned to a preceptor and that they would be able to work an identical schedule.

### **Role of the DNP Student**

The role of the DNP student in this project was to develop, implement and evaluate an evidence-based educational program for nurse preceptors. The staff education program was developed following the guidelines in the Walden University's *Manual for Staff Education Project* (2017). As project manager, the DNP student, led all aspects of the project and convened a project team to assist with finalizing the educational content of the program. The DNP student was responsible for stakeholder engagement throughout the project. Stakeholder input is important from the beginning of a project (Dalum, Brandt, Skov-

Etterup, Tolstrup & Kok, 2016). Early engagement of stakeholders helps to garner their support of the program and participation (Kettner, Moroney, & Martin, 2017).

### **Summary**

Section 2 explore the model and theory that supported the project. Knowles' theory of adult learning guided the program. Additionally, Benner's novice to expert theory was introduced to the preceptors to guide their interactions with the graduate nurses. The evidence relevant to the project is Presented/Graduate nurses who participate in well-structured transition or residency programs experience less burnout resulting in lower rates of attrition. Preceptor training programs vary in duration and format. Traditional, online, or blended programs have been developed to range from 1 day to 2 weeks. Regardless of the duration of the program, common topics include though not limited to principles of adult learning, teaching strategies, interpersonal relationships, effective communication, conflict management, assessment of learning and giving feedback. The next section will discuss the collection and analysis of evidence.

## Section 3: Collection and Analysis of Evidence

### **Introduction**

Graduate nurses experience difficulty making the transition from student to professional nurse due to patient acuity, increased workload, and sometimes inimical practice environments (Condrey, 2015). At the practicum site, there was no formal preceptor training, and RNs were required to provide preceptorship without having been trained for the role. The goal of the project was to develop and implement a preceptor training program for RNs working in a 400-bed acute care teaching hospital in a metropolitan area.

Section 3 describes the planning, implementation, and evaluation of the education program. The project question was: Upon completion of a structured nurse preceptor training program, will RNs perceive an increased competence and understanding in the preceptor role? The project followed the guidelines in the Walden University *Manual for Staff Education Project* (2017), addressing planning, implementation and evaluation.

### **Planning**

The planning phase involved the following steps:

1. Establishing the need for a preceptor program
2. Obtaining a commitment from nursing leadership
3. Developing content for preceptor program, including resources, objectives, content, delivery strategy, instructional methods, and evaluation
4. Reviewing program with project committee and make changes as recommended
5. Finalizing program with project committee

### **Project Committee**

The project committee comprised a multidisciplinary team of professionals such as nursing administrators, clinical managers, staff educators, and clinical preceptors. The DNP student formally invited persons to serve on the project committee by means of a letter of invitation. Early stakeholder involvement, frequent and clear communication, and continued involvement throughout the program helped to ensure program success (Hodges & Videto, 2011). The chief nurse provided administrative support for the project and offered guidance regarding administrative protocol and confirmed a commitment of support by the Executive Management Committee of the institution. The deputy chief nurse, with responsibility for clinical services, gave insight into the practice of nurses and the challenges facing both preceptors and preceptees within the organization. The clinical preceptor who previously underwent training in clinical education served the team as a content expert and shared his/her experiences as a preceptor. The staff educator provided support as content experts. The DNP student's role was to develop, implement, and evaluate this pilot educational program.

I reviewed the literature for evidence on the transition of novice nurses, preceptor programs, and published educational curricula. The preceptor program was organized into training modules with lesson plans constructed for each topic (Appendix A). Content delivery included a variety of teaching methods to appeal to an audience with different learning styles. Topics that made up the training included the following:

1. Mission, vision, values of the organization
2. Roles/responsibilities of the preceptor/preceptee
3. Principles of adult learning
4. Benner's novice to expert model of skills acquisition

5. Effective communication
6. Time management
7. Critical thinking and reflection
8. Clinical decision-making
9. Legal/ethical issues in precepting
10. Evidence-based practice
11. Quality improvement
12. Patient-centered care
13. Effective delegation
14. Conflict management
15. Cultural diversity generational differences
16. Clinical instruction strategies assessment and evaluation
17. Giving feedback

### **Implementation**

Upon approval of the project by Walden University IRB, implementation of a 2-week pilot preceptor training program was conducted. Participants in the pilot included a small convenience sample of RNs ( $n = 7$ ) with a desire to serve as preceptors and who were recommended by their nurse managers to participate in the 2-week program. The DNP student provided information citing characteristics of an effective preceptor, to guide the nursing managers in selecting staff nurses to participate in the pilot. The call for participants was shared with nurse managers during one of the weekly nursing leadership meetings, and via e-mail to nurses who currently serve as preceptors. The program was implemented over 2

weeks with face-to-face, didactic and clinical experiences employing a variety of delivery methods including lecture/discussion, role play, case study, and reflection. Participants took part in both formative and summative evaluation of the pilot project.

### **Evaluation**

The evaluation design included both formative and summative evaluation. Formative evaluation was conducted during the program. This method of evaluation was valuable because it allowed the program planner to determine whether the objectives were being met and if not, what changes were necessary to make improvements to the program (Hodges & Videto, 2011). The program participants completed an evaluation of each lesson and suggested measures for improvement. According to Hodges & Videto, (2011), program participants may help in identifying facilitators and barriers to the program and offer meaningful suggestions to eliminate the barriers identified. Summative evaluation occurred at the end of the program (Appendix C).

### **Summary**

Preceptorship of graduate nurses during their role transition to RN improves job satisfaction and retention of the graduate nurse. Preceptors find their role rewarding yet stressful especially if they feel ill-prepared to serve in their roles. Formal preparation of preceptors to function effectively is one of the most important elements of a successful preceptorship program (Horton, DePaoli, Hertach, & Bowen, 2012). A well-designed training program for preceptors is key to developing qualified preceptors with the knowledge and confidence to assist graduate nurses in the transition to RNs. The purpose of the preceptor

training project was to develop a preceptor training program for RNs working in a 400 - bed acute care teaching hospital in a metropolitan area.

Section 3 outlined the steps to develop the project under these general headings: planning, implementing and evaluation. Upcoming will be findings and implications based on the analysis and synthesis of the evidence.

## Section 4: Findings and Recommendations

### **Introduction**

Graduate nurses have difficulty making the transition from student to professional nurse due to patient acuity, increased workload, and practice environments (Condrey, 2015). Approximately 40% of new graduates plan to leave their current positions within 3 years (HHS, 2010). Nurse residency programs or transition to practice programs with supportive preceptors help new nurses develop skills necessary to deliver safe, quality care (IOM, 2010; Fehr, 2011). The success of any transition program requires well-trained clinical preceptors who serve in various roles, including educator, mentor, socializer, and evaluator (Bratt 2009, as cited in Condrey, 2015). The site of this project was a teaching hospital that serves as a major clinical practice site for graduate nurses. There was no structured training for RNs who serve as preceptors for the graduate nurses.

### **Practice-Focused Question**

The purpose of this evidence-based preceptor training program was to develop and implement a staff education program that would educate RNs for the role of preceptor for new graduate nurses. The practice-focused question was as follows: Upon completion of a structured nurse preceptor training program, will RNs perceive an increased competence and understanding in the preceptor role?

### **Sources of Evidence**

The design of the 2—week, evidence-based preceptor training program for RNs was influenced by a variety of evidence-based resources to include articles, programs, and professional organizations such as The Preceptor Academy, Preceptor Education Program for

Health Professionals and Students (2018), The National Council of State Boards of Nursing (Hansen, 2015), and the Association for Nursing Professional Development (ANPD).

Early stakeholder involvement is crucial to the success of any program (Hodges & Videto, 2011). I shared the curriculum with the content experts. The program implementation phase of the project coincided with a period of threatened industrial action by nurses and physicians within the organization. Due to this organizational threat, the administration suggested that topics such as effective delegation, and organizational mission and vision be excluded as session topics but could be discussed in future preceptor forums. This would allow for maximum attention to be placed on the most essential topics in the program. It was further agreed that the participants gain at least 16 hours of supervised preceptorship experience with the graduate nurses who were currently rotating through the hospital. According to Epstein and Carlin (2012), preceptorship is an active experience and some elements cannot be adequately taught in a classroom. The DNP student conversed with the manager, coordinator, mentors, preceptors and graduate nurses of the current graduate nurse-to-RN transition program to apprise them of the program purpose and objective. A presentation was also made to the organization's nursing leadership team to secure their buy-in and support. Required approvals and documents, as stipulated by the Walden University *DNP Manual for Staff Education Project* (2017), were obtained. The research project was approved by the organization, the local IRB, and the Walden University IRB (approval number 03-15-19-0110719).

Education modules were designed guided by Knowles' adult learning theory and Benner's novice to expert theory of skills acquisition. Didactic sessions were held in a

training room within the organization. Table 1 displays the training modules and topics included in each module.

Table 1

*Topics for Preceptor Training*

Module	Topics
1	Overview of Preceptorship Roles and Responsibilities of Preceptor and Preceptee Overview of Graduate Nurse to Registered Nurse Transition Program Principles of Adult Learning Theory of Skills Acquisition: Novice to Expert Time Management and Prioritization
2	Effective Communication Cultural and Generational Diversity Clinical Instruction Strategies Critical Thinking and Reflection
3	Assessment and Evaluation Giving Feedback Conflict Management Legal/Ethical Issues in Preceptorship Evidence-based Practice
4	Open questions Presentation of Critical Reflection Evaluations

The preceptor training program was open to RN with minimum of a bachelor's degree in nursing, at least two years of clinical practice, an up-to-date positive performance appraisal, a willingness to participate as a preceptor and possess the qualities of a good preceptor. Seven of ten nurses who expressed interest in the program, met the criteria. Before project implementation, the project was explained to the participants and all questions were answered. Participants gave consent after reading the details of a consent form which

addressed anonymity, voluntary participation, and any risks (there were no risks) involved.

Table 2 displays the demographic characteristics of the training participants

Table 2

*Demographic characteristics of preceptors (N = 7)*

Variable	Freq	%
Gender		
Females	7	100%
Males	0	
Other		
Age		
<25yrs.	0	
25-35yrs.	3	42.86%
36-46 yrs.	2	28.58%
47-57 yrs.	2	28.58%
>57 yrs.	0	
Highest level of education		
Bachelor's degree	7	100%
Master's degree	0	
Years of experience as a nurse		
2-5 yrs.	4	57.16%
6-10 yrs.	2	28.58%
11-15 yrs.	0	
16-20 yrs.	0	
21-30 yrs.	1	14.29%
Experience as preceptor		
Yes	0	
No	7	100%
Prior preceptor training		
Yes		
No	7	100%

The preceptor trainees were introduced to forms and tools that they could use with their preceptees. A variety of teaching styles were utilized to appeal to diverse learning styles of the preceptor trainees. They included lecture/discussion, role play, demonstration,

journaling, and reflection. These methods help to promote reflective learning (Halabi et al., 2012). Each subsequent morning of lesson began with reflection on the previous day's learning experience. Each day ended with summary of the day's events and reflection. In addition to the classroom sessions, preceptor trainees served as preceptors to graduate nurses under the supervision of the DNP student and hospital preceptors. They maintained brief journals of their learning activities and interactions with graduate nurses. Clinical practice assignments included a brief clinical teaching and demonstration of briefing, and debriefing. A take home assignment was to apply an evidence-based model to critical reflection of an event that occurred during preceptor-preceptee interactions.

Program evaluation is important to any program. The preceptor training program was evaluated formatively throughout the program as participants actively participated in discussions and role play and expressed their understanding of concepts taught. Each day of training began with reflection on the previous day discussions. During practical sessions with the graduate nurses, participants maintained journals and wrote a critical reflection of an incident during the preceptorship experience. I provided direct observation and conducted debriefing with the preceptors to determine whether they found the learning activities meaningful. Summative evaluation was conducted upon completion of the educational intervention. Participants anonymously completed a Likert-type evaluation form (Appendix B). Table 3 displays the outcomes of the preceptor trainee evaluations.

Table 3

<i>Participants (N = 7) Evaluations</i>					
Evaluation Question	Strongly Disagree (1 [%])	Disagree (2 [%])	Neutra (3 [%])	Agree (4[%])	Strongly Agree (5
				)	

Program content			7 (100)
The content was interesting to me			7 (100)
The content extended my knowledge of the topic			7 (100)
The content was consistent with the objectives			7 (100)
The content was related to my job			7 (100)
Objectives were consistent with goals of activity	1 (14)	6 (86)	
Training Environment			
The room was conducive to learning	1 (14)	6 (86)	
The learning environment stimulated idea exchange	1 (14)	6 (86)	
The facility was appropriate for the activity	1 (14)	6 (86)	
Effectiveness of Facilitator (Persephone Munnings)			
The presentations were clear and to the point			7 (100)
The presenter demonstrated mastery of the topics			7 (100)
The material held my attention	1 (14)	6 (86)	
The presenter was responsive to participant concerns			7 (100)
Instructional Methods			
The instructional materials were well organized			7 (100)
The instructional methods illustrated the concepts well	1 (14)	6 (85)	
The handout materials given will be used as reference			7(100)
The teaching strategies were appropriate for the activity			7 (100)
Program Duration			
The duration of the training was adequate for the content	1 (14)	3 (43)	3 (43)

Participants shared additional comments about the training. Table 4 displays themes that emerged from the feedback:

Table 4

*Comments from Formative Program Evaluation*

Category	Themes
Program content	<p>“I would like refresher sessions to keep up-to-date on current trends.”</p> <p>“The course was very informative.”</p> <p>“The training content was beneficial to nursing practice.”</p>

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Program value and facilitator effectiveness	<p>“It was a pleasure to be a part of this training.”</p> <p>“The training prepares staff nurses to be effective preceptors to graduate nurses.”</p> <p>“The training is much needed in our institution.”</p> <p>“This training will benefit graduate and student nurses.”</p> <p>“The program helped me to be more comfortable and confident as a preceptor.”</p> <p>“The facilitator was amazing at teaching the material.”</p> <p>“The course was very enjoyable.”</p> <p>The training was excellent!”</p>
Program duration	<p>“The program should be longer.”</p> <p>“There should be more time to practice all the concepts.”</p>

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## Findings and Implications

### Findings

The evidence-based educational intervention was designed to prepare RNs for their role as preceptors for graduate nurses. A small group of nurses ( $N = 7$ ) enrolled in the 2-week preceptor training pilot. At the end of the training preceptors reflected on the training and shared that they appreciated the course and felt that it provided them with knowledge and skills to function as preceptors for graduate nurses. The preceptors completed a course evaluation which revealed the following: that seven preceptor trainees (100%) reported that the content, training environment, effectiveness of the facilitator and instructional methods were either helpful or very helpful. Of the seven respondents, one (14%) reported that the duration of the program was neither adequate nor inadequate. Three participants (43%) stated in the additional comments that the educational intervention should be longer. All seven participants (100%) reported that they enjoyed the training, and that the program would be beneficial to all nurses serving as preceptors and to the hospital.

## **Implications**

**Implications for practice.** This evidence-based educational program provided training for preceptors for graduate nurses. Since there was no previous formal training, this project addressed that gap. The ostensible success of the program in providing knowledge and skills in precepting to the participants should prepare them to serve as effective preceptors. The participants expressed that they now feel knowledgeable and confident about serving in the role of preceptor.

The organization stands to benefit from the project, as the new preceptors are added to the pool of preceptors, increasing the number of available nurses with evidence-based techniques for assisting the graduates. The hospital is one institution in a network of hospitals and clinics, this educational intervention could be made the standard training for all nurse preceptors across the network.

### **Implications for Social Change**

The preceptor training program provided preceptors with the knowledge and skills to positively impact the future generation of nurses. Research evidence proved that successful programs have led to increased job satisfaction and retention for graduate nurses and more satisfied preceptors who also feel valued and satisfied with their jobs. Competent preceptors and satisfied graduate nurses positively impact client satisfaction.

### **Implications for Future Research in Nursing**

Being the first preceptor training at the organization, this project has implications for nursing research. Research on the knowledge skills and confidence of nurse preceptors. An organizational practice standards and competencies and policies for preceptors should be

developed and tested. The perceived benefits of preceptorship among graduated nurses is another future research that may arise out of this project. As project developer, I have suggested a six month and one year survey of the preceptors to examine their perceived levels of confidence and satisfaction in the preceptor role.

### **Recommendations**

The project supported the importance of preceptor training to nurses who will serve as preceptors to graduate nurses. Quality preceptor training has been proven to prepare preceptors for their roles and prevent them feeling inadequate, unsupported, overwhelmed (L'Ecuyer, Hyde, & Shatto, 2018). Preceptor training should be mandatory for all nurses offering to serve as preceptors in the clinical environment. Considering the tremendous staff shortage at the organization, making the didactic part of the training available on-line would increase the number of participants in each training group.

Fifty percent of the preceptor trainees commented that the duration of the program should be lengthened. There were no suggestions given for the duration; however, increasing the duration of the training is a valuable consideration for future programs. This would allow participants more time to become more familiar with the new knowledge and skills. While the preceptor trainees were at different levels of experience and proficiency in nursing, they were all at the novice stage on Benner's novice-expert continuum; therefore, I would further recommend that all new preceptors receive mentorship for a period of at least six months. Additionally, managerial support of preceptors, recognition of the preceptor role, and protected time for preceptor and preceptee are important for creating an environment for effective preceptorship (Whitehead et al. 2016).

### **Contributions of the Doctoral Project Team**

The doctoral project team consisted of the deputy chief nursing officer with responsibility for clinical services, a staff educator, the DNP student and her practicum mentor. This team reviewed the program content and methodologies and made recommendation to add a clinical component. Following completion of the project, the DNP student met with the team to apprise them of the outcomes of the project.

### **Strengths and Limitations of the Project**

#### **Strengths**

A significant strength of this project was providing evidence-based preceptor training for RNs. Nurses who serve as preceptors feel valued and connected to the organization (Squillaci, 2015). Participants gained knowledge and skills that equipped them to provide clinical teaching and support to graduate nurses in the clinical environment. These participants can augment the cadre of RNs currently serving as preceptors within the organization. The preceptor training project was timely as the organization is a major practicum site for graduate nurses but had no formal preceptor training. The participants' expression of enhanced knowledge and confidence, and appreciation for the program is an attestation of the program's value.

#### **Limitations**

The preceptor training program was implemented at a time when the organization was experiencing an acute attrition of RNs. Participants attended classroom sessions during their work time but were required to complete the practicum during their personal time. Although the group was made up of only seven participants, six of the seven agreed or strongly agreed

that the duration of the training was adequate for the content; however, in the comments section of the evaluation three participants stated that the duration should be longer. It is important that the program duration is adequate to allow participants sufficient time to gain the knowledge and skills necessary to practice in their new roles.

### **Summary**

Transition-to-practice or evidence-based transition to practice programs have been proven to increase the job satisfaction and retention of nurses. In order for effective and efficient running of the programs in the complex world of nursing, preceptors for the graduate nurses must be trained and prepared for their roles. Findings of this project support that preceptor training can benefit the graduate nurse, the preceptor, the patient and the organization ultimately positively impact health care outcomes.

Section 5 discusses the plans for dissemination of the project findings. A variety of dissemination methods will be utilized to communicate the project results to various levels of stakeholders. The section also includes analysis of the DNP student as a practitioner, a scholar, and as project manager.

## Section 5: Dissemination Plan

### **Introduction**

Preceptor training programs are crucial to the development of preceptors with the knowledge and skills to facilitate clinical learning experiences for graduate nurses. The development and implementation of an evidence-based preceptor training program was a great accomplishment; however, completing a study and not disseminating the findings does not benefit practitioners or the profession (Oerman & Hays, 2016). Dissemination and integration of new knowledge are among the key activities of Doctor of Nursing Practice graduates (American Association of Colleges of Nursing, 2006). Nurses can contribute to the advancement of the profession by employing various methods of communicating health improvement initiatives and innovations in practice (Hanrahan, Marlow, Aldrich, & Hiatt, 2012; Oerman & Hays, 2016).

Dissemination is an essential part of translating evidence to practice and is necessary for practice change to occur (White, Dudley-Brown, & Terhaar, 2016). White et al. (2016) further posited that the first presentation should be made internally at the site of the change project; therefore, the initial presentations will be made to the nursing leadership team, executive management committee, and other key stakeholders at the practicum site. The organization's upcoming inaugural nurses' research day creates an ideal forum for dissemination through a podium presentation. Abstracts for podium and an evidence-based poster presentation will be submitted to local, regional, and international nursing conferences. Poster presentations are effective for dissemination of evidence-based practice

and offer a degree of flexibility because they may be presented in hard copy or electronically (Forsyth et al., 2010).

### **Analysis of Self**

#### **Practitioner**

As a nurse educator currently practicing in nursing professional development, I consistently aim to employ the latest evidence in the execution of my duties. The experience of the DNP program has provided me with a greater appreciation for the leadership roles of the nurse in education and practice. Completing a staff development project has enhanced my skills in stakeholder engagement, collaboration, knowledge integration, and translation of evidence to practice. As a nurse educator with a DNP, I recognize the importance of my role in improving nursing clinical practice and health outcomes.

#### **Scholar**

The American Association of Colleges of Nursing (2006) acknowledges the value of scholarship beyond discovery to include knowledge integration and application. As a scholar, completing this evidence-based project has enhanced my ability to evaluate current practice and identify a need for change, apprise and synthesize current evidence, and translate this evidence into clinical practice to improve health outcomes (Brown, 2013). Preparation for dissemination of the project findings creates another opportunity for my scholarly development. Dissemination plans include presentations to the nursing leadership team, and nurses at various levels in academia and clinical practice. My scholarly growth and development are evident in my improved ability to utilize library resources, critically analyze research evidence and synthesize the information into a scholarly paper. Until this point in

my scholarly journey, I never viewed myself as a researcher or writer, but the completion of this scholarly project has been the impetus for me to begin considering the next evidence-based project in my workplace.

### **Project Manager**

Nurse leaders must be skilled in managing change to assist their teams in navigating the change process and maintain positive patient outcomes (White, et al., 2016). One way to achieve this outcome is through early stakeholder involvement and continuous, clear communication with all stakeholders (Kettner, Moroney, & Martin, 2017). The process of identifying a need for improvement in clinical practice, communicating the need to stakeholders and securing buy-in for the evidence-based project has contributed to my development as a leader with advanced analytical communication and negotiation skills. I marvel at my newly acquired skills in networking and securing stakeholder buy-in. The planning, design, implementation, monitoring and evaluation of the project has enhanced my confidence in leading practice change initiatives. The outcomes of the project have sparked my interest to continue programs for professional development of nursing preceptors.

### **Conclusion**

The results of the preceptor training project demonstrated that the participants obtained the knowledge and skills to provide evidence-based preceptorship to graduate nurses in the clinical environment. The availability of trained preceptors to support the graduate nurses' transition from students to RNs would improve the graduate nurses experience and reduce the frustration of preceptors who feel ill-prepared for the role. The successful development of nurse residency also known as transition-to-practice programs are

critical to the future of nursing as postulated by the institute of Medicine's (IOM, 2010) recommendation for the implementation of nurse residency programs. Developing competent, confident preceptors is a key component of any successful graduate nurse transition program. Well-designed, well-executed preceptorship programs improve nurses' efficiency, effectiveness, job satisfaction and retention, and ultimately results in improved patient outcomes.

## References

- American Association of Colleges of Nursing. (2006). The Essentials of doctoral education for advanced nursing practice. Retrieved from <http://www.aacnnursing.org/Portals/42/Publications/DNPEssentials.pdf>
- American Association of Colleges of Nursing. (2014). Nursing shortage fact sheet. Retrieved from <https://www.lwtech.edu/about/foundation/raisebsnup/docs/nursing-shortage-fact-sheet.pdf>
- American Association of Colleges of Nursing (2018). CCNE-Accredited Nurse Residency Programs. Retrieved from <https://www.aacnnursing.org/CCNE>
- American Association of Colleges of Nursing (2019). Nursing Shortage. Retrieved from <https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage>
- Bengtsson, M., & Carlson, E. (2015). Knowledge and skills needed to improve as preceptor: Development of a continuous professional course – a qualitative study part I. *BMC Nursing, 14*(51), 1-8. doi: 10.1186/s12912-015-0103-9
- Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park, State: Addison-Wesley
- Bodine, J. (2019). Best practices for the future of preceptorship. *Journal for Nurses in Professional Development 35*(2), 112-114. doi: 10.1097/NND.0000000000000517
- Bratt, M. M., & Felzer, H.M. (2012). Predictors of new graduate nurses' organizational commitment during a nurse residency program. *Journal for Nurses in Staff Development, 28*(3), 108-119. doi: 10.1097/NND.obo13e31825515c4.
- Brown, M.A., & Crabtree, K. (2013). The development of practice scholarship in DNP

- programs: A paradigm shift. *Journal of Professional Nursing*, 29(6), 330-337.  
doi:10.1016/j.profnurs.2013.08.003
- Blevins, S. (2016). Qualities of effective preceptors. *MedSurg Nursing*, 25(1), 60-61.  
Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/27044133>
- Brazell, T. P. & Taylor, L. (2014). A road map to preceptor training: From the American Board of Audiology. *Audiology Today*, 36-42. Retrieved from  
<https://www.audiology.org/sites/default/files/Aroadmap2Preceptor.pdf>
- Chen, Y-H., Duh, Y.-J., Feng, Y-F., Huang, Y.-P., (2011). Preceptors' experiences training new graduate nurses: A hermeneutic phenomenological approach. *Journal of Nursing Research*, 19(2), 132-140. doi: 10.1097/JNR.0b013e31821aa155
- Cloete, I. & Jeggels, J. (2014). Exploring nurse preceptors' perceptions of benefits and support of and commitment to the preceptor role in the Western Cape Province. *Curations*, 37(1), 1-7. doi:vhttp://dxdoi.org/10.4102/curations.v3i1.128/
- Condrey, T. (2015). Implementation of a Preceptor Training program. *The Journal of Continuing Education in Nursing*, 46(10), 462-469. doi: 10.3928/00220124-20150918-04
- Cotter, E. & Dienemann, J. (2016). Professional development of preceptors improves nurse outcomes. *Journal for Nurses in Professional Development*, 32(4), 192-197. doi: 10.1097/NND.0000000000000266
- Davis A. & Maisano, P. (2016) Patricia Benner: Novice to expert – A concept whose time has come (again) *Oklahoma Nurse* 61(3), 13-15. Retrieved from

<https://www.coursehero.com/file/p7rp8fdt/Davis-A-Maisano-P-2016-Patricia-Benner-Novice-to-expert-A-concept-whose-time/>

- Dalum, P., Brandt, C. L., Skov-Ettrup, L., Tolstrup, J., & Kok, G. (2016). The systemic development of an internet-based smoking cessation intervention for adults. *Tobacco Cessation, 17*(4), 490-500. doi: 10.1177/1524839916631536
- Duteau, J. (2012). Making a difference: The value of preceptorship programs in nursing education. *The Journal of Continuing Education in Nursing, 43*(1), 37-43. doi:10.3928/00220124-20110615-01
- Dwyer, P.A., & Hunter Revell, S.M. (2016). Multilevel influences on new graduate nurse transition. *Journal for Nurses in Professional Development, 32*(3), 112-121. doi: 10.1097/NND.0000000000000265
- Epstein, I. Carlin, K. (2012). Ethical concerns in the student/preceptor relationship: A need for change. *Nurse Educator Today, 33*(9), 897-902. <http://dx.doi.org/10.1016/j.netd.2012.03.009>
- Fehr, L. (2011). The future of Nursing: Leading change, advancing health. *Colorado Nurse, 111*(1), 1-4. Retrieved from [https://d3ms3kxrsap50t.cloudfront.net/uploads/publication/pdf/273/CO2\\_11.pdf](https://d3ms3kxrsap50t.cloudfront.net/uploads/publication/pdf/273/CO2_11.pdf)
- Forsyth, D. M., Wright, T. L., Scherb, C. A., & Gaspar, P. M. (2010). Disseminating evidence-based practice projects: Poster design and evaluation. *Clinical Scholars Review, 3*(1), 14-21. doi:10.1891/1939-2095.3.1.14
- Gentile, D. L.(2012). Applying the Novice to Expert Model to infusion nursing. *The Art and Science of Infusion Nursing, 35*(2), 101-107. doi: 10. 1097/NAN.0b03e3182424336

- Halabi, J. O., Abdalrahim, M. S., Persson, G. L., Hedemalm, A., & Lepp, M. (2012). The development of a preceptor training program on clinical nursing education in Jordan in collaboration with Sweden. *Journal of Continuing Education in Nursing*, 43(3), 135-144. <http://dx.doi.org/10.3928/00220124-20111115-04>
- Hanrahan, K., Marlow, K. L., Aldrich, C., Hiatt, A. M. (2012). *Dissemination of nursing knowledge: Tips and resources*. University of Iowa College of Nursing.
- Hansen, J. (2015). Nurse residency programs: Results from the National Council of State Boards of Nursing's transition-to-practice study, part 2. *Journal for Nurses in Professional Development*, 31(4), 240-241. doi: 10.1097/NND.0000000000000189
- Happel, L. (2009). A model of preceptorship in nursing: reflecting the complex functions of the role. *Nurse Education Perspective*, 30(6), 372-37. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/19999939>
- Hodges, B. C. & Videto, D. M. (2011). *Assessment and planning in health programs Ontario Canada*: Jones & Bartlett.
- Horton, C.D., DePaoli, S., Hertach, M., & Bower, M. (2012). Enhancing the effectiveness of nurse preceptors. *Journal of Nurses in Staff Development*, 28(4), E1-E7. doi: 10.1097/NND.0b013e31825dfb90
- Institute of Medicine (2010). *The future of nursing: Leading change, advancing health*. Retrieved from <http://www.nationalacademies.org/hmd/~media/Files/Report%20Files/2010/The-Future-of-Nursing/Future%20of%20Nursing%202010%20Report%20Brief.pdf>

James, S. L., & Richmond, S. H. (2018). *Transition to Practice: Course for preceptors*.

Retrieved from <https://learningext.com/new-nurses/p/preceptor>

Jansson, I., & Ene, K.W. (2016). Nursing students' evaluation of quality indicators during learning in clinical practice. *Nurse Education in Practice*, 20, 17-22.

doi:10.1016/j.nepr.2016.06.002

Jeggels, J. D., Traut, A, & Africia, F. (2013). A report on the development and implementation of a preceptorship training programme for registered nurses.

*Curationis* 36(1), 1-6. doi.org/10.4102/ curationis.v36i1.106. doi:

<http://dx.doi.org/10.4102/curations.v36i1.106>

Kang, C., Chiu, H., Lin, Y., & Chang, W. (2015). Development of a situational initiation training program for preceptors to retain new graduate nurses: Process and initial outcomes. *Nurse Education Today*, 37, 75-82. doi:

<http://dx.doi.org.ezp.waldenulibrary.org/10.1016/j.nedt.2015.11.022>

Kettner, P. M. Moroney, R. M. & Martin, L. M. (2017). *Designing and managing programs: An effectiveness-based approach* (5<sup>th</sup> ed.). Thousand Oakes, Ca: Sage

Kinsella, E. A., Bossers, A., Ferguson, K., Jenkins, K., Bezzina, M. B., MacPhail, A.,... & Hobson, S. *Preceptor education program for healthcare professionals and students* (2nd ed.). Retrieved from <https://preceptor.ca/PEP-modulespage.html>

Larabee, J. H., Wu, Y., Persily, C. A., Simoni, P. S., Johnstone, P.A., Marcischak, T. L., & Gladden, S. D. (2010). Influence of stress resiliency on RN job satisfaction and intent to stay. *Western Journal of Nursing Research*, 32(1), 81-102. <https://doi-org.ezp.waldenulibrary.org/10.1177/0193945909343293>

- Laureate Education, Inc. (2014). Social change. Retrieved from <https://www.waldenu.edu/about/social-change>
- L'Ecuyer, K. M., Hyde, M. J., & Shatto, B. J. (2018). Preceptors' perception of role competency. *Journal of Continuing Education in Nursing* 49(5), 233-240. doi: 10.3928/00220124-20180417-09
- Muir, J., Ooms, A., Tapping, J., Marks-Maran, D., Phillips, S., Burke, L., (2013). Preceptors' perceptions of a preceptorship program for newly qualified nurses. *Nurse Education Today* 33(6), 633-638. doi <http://dx.doi.org.ezp.waldenulibrary.org/10.1016/j.nedt.2013.02.001>
- Mark-Maran, D., Ooms, Tapping, J. Muir, J., Phillips, S., & Burke, L. M. (2013). A preceptorship programme for newly qualified nurses: A study of preceptees' perceptions. *Nurse Education Today*, 33(3), 428-434. doi:10.1016/j.nedt.2012.11.013
- Nash D. D., & Flowers, M. (2017). Key elements to developing a preceptor program. *The Journal of Continuing Education in Nursing*, 48(11), 508-511. doi: 10.3928/00220124-20171017;-08.
- National Council of State Boards of Nursing. (2012). NCSBN Model Rules. Retrieved from [https://www.ncsbn.org/14\\_Model\\_Rules\\_0914.pdf](https://www.ncsbn.org/14_Model_Rules_0914.pdf)
- Oerman, M. H., & Hays, J. C. (2016). *Writing for publication in nursing* (3<sup>rd</sup> ed.). New York: NY Springer Publishing Company
- Olson-Sitki, K, Wendler, M. C. & Forbes, G. (2012). Evaluating the impact of a nurse residency program for newly graduated registered nurses. *Journal for Nurses in Staff Development*, 28(4), 156–162. doi: 10.1097/NND.0b013e31825dfb4c

- Omer, T. A., Suliman, W.A., & Moola, S. (2015). Roles and responsibilities of nurse preceptors: Perception of preceptors and preceptees. *Nurse Education in Practice*, 16, 54-59. doi: <http://dx.doi.org/10.1016/j.nepr2015.07.005>
- O'Shea, K. (2002). *Staff development nursing secrets*. Philadelphia, PA: Hanley & Belfus
- Owens, N. G. (2013). New graduate nurse preceptor program: A collaborative approach with academia. *Journal of Nursing Education and Practice*, 3(12), 1-9.  
doi:10.5430/jnep.v3n12p1
- Palumbo, M. V., Rambur, B. A., & Boyer, S.A. (2012). Education and employment characteristics of nurse preceptors. *The Journal of Continuing Education in Nursing*, 43(10), 472-480.
- Panzavecchia, L., & Pearce, R. (2014). Are preceptors adequately prepared for their role in supporting newly qualified staff? *Nurse Education Today*, 34(7), 1119-1124.  
doi:10.1016/j.nedt.2014.03.001
- Robert Wood Johnson Foundation, (2013). Mentoring in nursing: A boon to nurses and patients. Retrieved from <https://www.rwjf.org/en/library/articles-and-news/2013/01/mentoring--a-boon-to-nurses--the-nursing-profession--and-patient.html>
- Sanford, P. G., & Tipton, P. H. (2016). Is nurse preceptor behavior changed by attending a preceptor class? *Baylor University Medical Proceedings*, 29(3), 277-279.  
doi:10.1080/08998280.2016.11929434
- Schaubhut, R.M., & Gentry, J.A. (2010). Nursing preceptor workshops: Partnership and collaboration between academia and practice. *The Journal of Continuing Education in Nursing*, 41(4), 155-160. doi: 10.3928/00220124-20100326-01

- Smith, Leslie R., (2013). All aboard! Helping new grads navigate nursing. *Nursing Management: 44*(3), 8–9. doi: 10.1097/01.NUMA.0000427189.51716.70
- Squillaci, L. (2015). Preceptor Training and Nurse Retention (Doctoral dissertation)  
Available from ProQuest Dissertations and Theses database. (UMI No. 3684731)
- Tracey, J.M., & McGowan, I.W. (2015). Preceptors' views on their role in supporting newly qualified nurses. *British Journal of Nursing*, 24, 998-1001.  
doi:10.12968/bjon.2015.24.20.998
- Thomas, C. M., & Kellgren, M. (2017). Benner's novice to expert model: An application for simulation facilitators. *Nursing Science Quarterly*. 30(3), 227-234. doi:  
10.1177/0894318417708410journals.sagepub.com/hime/nsq
- Unruh, L. Y., & Zhang, N. J. (2014). Newly licensed registered nurse job turnover and turnover intent. *Journal for Nurses in Professional Development*, 30(5), 220Y230.  
doi: 10.1097/ NND.0000000000000079
- Valizadeh, S. Borimnejad, L., Rahmani, A., Gholizadeh, L., & Shahbazi, S. (2016).  
Challenges of the preceptors working with new nurses: A phenomenological research study. *Nurse Education Today*, 44, 92-97. doi:  
<https://doi.org/10.1016/j.nedt.2016.05.021>
- Vandever, M., & Norton, B. (2009). From teaching to learning: Theoretical Foundations. In D. M. Billings & J. A. Halstead (Eds.), *Teaching in nursing: A guide for faculty* (pp. 231-281). St. Louis, MO: Elsevier Saunders.
- Walden University (2017). Manual for staff education project: Doctor of nursing practice scholarly project. Baltimore, MA: Author. Retrieved from:

[https://academicguides.waldenu.edu/ld.php?content\\_id=32804379](https://academicguides.waldenu.edu/ld.php?content_id=32804379)

Washington, G. T. (2013). The theory of interpersonal relations applied to the preceptor-new graduate relationship. *Journal of Nurses in Professional Development*, 29(1), 24-29.

doi: 10.1097/NND.0b013e31827d0a8a

Watkins, C., Hart, P. L., & Mareno, N. (2016). The effect of preceptor role effectiveness on newly licensed registered nurses' perceived psychological empowerment and professional autonomy. *Nurse Education in Practice*, 17, 36-42. doi:

<http://dx.doi.org/10.1016/j.nepr.2016.02.003>

Whitehead, B., Owen, P., Henshaw, L., Beddingham, E., & Simmons Supporting newly qualified nurse transition: A case study in a UK hospital (2016)., *M Nurse Education Today*, (36), 58-63. doi.org/10.1016/j.nedt.2015.07.008 0260-6917

White, K. M., Dudley-Brown, S., & Tehraar, M. F. (2016). Translation of evidence into nursing and health care (2<sup>nd</sup> ed.). New York, NY: Springer.

Yu, M. & Kang, K. J., (2016). Factors affecting turnover intention for new graduate nurses in three transition periods for job and work environment satisfaction. *Journal of Continuing Education in Nursing*, 47(3), 120-131. doi:10.3928/00220124-20160218-08

Zinn, J. L, Guglielmi, C. L., Davis, P. P. & Moses, C. (2012). Addressing the nursing shortage: The need for nurse residency programs. *AORN Journal*, 96(6), 652-657.

<http://dx.doi.Org/10.1016/j.aom.2012.09.011>

## Appendix A: Outline of Lessons for Preceptor Training

	Topic	Objectives	Content Outline	Teaching Strategies
1	Mission, Vision & Values of the Organization Orientation	Discuss the mission, vision and values of the organization Orientate the preceptor to graduate nurse transition program	Organizations Mission, vision and value statements Overview of the transition program Key organizational policies Preparation for the preceptee Review student and preceptor resources.	Face to face discussion
2	Roles/Responsibilities of the Preceptor/Preceptee	Discuss the roles of the preceptor Discuss responsibilities of the preceptee	Preceptor Roles educator role model socializer Orientation of the preceptee to the clinical unit Setting SMART goals Preceptee responsibilities	
3	Principles of Adult Learning Theories Benner's Novice to Expert Theory Adult Learning Theory	Explore principles of adult learning Review concepts of Adult Learning Theory Discuss the application of Benner's Novice to Expert Theory to preceptorship	Importance of using theories to guide practice Adult Learning Theory Benner's Novice to Expert Theory	Lecture/Discussion
4	Effective Communication	Explore personal communication styles Discuss strategies for effective communication Identify barriers to effective communication	Communication styles Tips for communicating effectively Barriers to effective communication	Discussion
5	Time Management and Prioritizing	Discuss the importance of time management Organizing the teaching/learning experience	Organizing the teaching/learning experience The importance of time management Prioritizing patient care	Discussion Case study
6	Effective	Discuss steps in the	The delegation process	PowerPoint

	Delegation	delegation process State principles of effective delegation	principles of effective delegation To delegate or not to delegate Barriers to effective delegation	and Case Study
7	Critical Thinking and Reflection	Define critical thinking Discuss strategies to promote critical thinking Explore models of reflection	Definition of critical thinking Strategies to promote critical thinking Reflective models	
8	Clinical Decision-Making	Define clinical decision-making Identify steps in the clinical reasoning process Discuss strategies to promote critical thinking	Definition of clinical decision-making The clinical reasoning process	Face -to-face discussion
9	Legal/Ethical Issues in Precepting	Discuss legal and ethical issues in precepting Discuss nursing's code of ethics	Ethical principles Legal and ethical issues precepting Nursing Council's Code of Ethics Legal issues in precepting	Case study
10	Evidence-based Practice	Define evidence-based practice Discuss techniques to promote evidence-based practice in nursing	Definition of evidence-based practice Promoting evidence-based practice Using evidence to improve practice	Lecture /Discussion
11	Conflict Management	Identify common sources of conflict in the workplace Explore conflict management strategies	Sources of conflict Strategies to manage conflict	Lecture /Discussion Roleplay
12	Cultural and Generational Diversity	State a definition of diversity Discuss the advantages of diversity in the workplace Explore general differences in the workplace Identify practices to promote inclusion of various generations	Definition of diversity Cultural competence Advantages of diversity in the workplace Understanding and managing generational difference	Group work Student presentation
13	Clinical Instruction Strategies	Explore clinical instruction strategies Teaching and learning styles Discuss special strategies for teaching the student with learning challenges	Strategies for clinical instruction Teaching and learning styles Helping the student with learning challenges	Discussion
14	Assessment	Differentiate between	Definition of assessment	Discussion

	and Evaluation	assessment and evaluation Identify different methods of assessing learning Discuss evaluation techniques	Methods of learner assessment Definition of evaluation Evaluation methods Evaluation forms to be used in program	
15	Giving Feedback	State the importance of giving feedback Discuss methods of feedback Create and deliver effective feedback	What is feedback? The importance of feedback Strategies for giving effective feedback Barriers to effective feedback	Discussion

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Appendix B: Invitation to Participate in the Preceptor Training Program

You are invited to participate in a

**PRECEPTOR TRAINING PROGRAM**



**Topics Include:**

- Role of the Preceptor & Preceptee
- Principles of Adult Learning
- Evaluation & Feedback
- Generational & Cultural Diversity
- Conflict Resolution
- Clinical Teaching Strategies
- .....And more

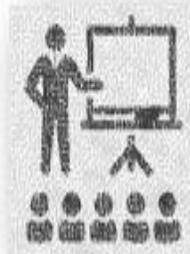
**IF YOU CAN ANSWER "YES" TO THE QUESTIONS BELOW:**

Contact Persephone Munnings, Student Researcher for more information or to register [persephone.Munnings@waldenu.edu](mailto:persephone.Munnings@waldenu.edu)

- ✓ Are you a Registered Nurse with a BSN degree and at least 2 years clinical experience?
- ✓ Do you desire to serve as a preceptor for Graduate Nurses?
- ✓ Are you already a preceptor and would like to increase your knowledge and confidence in the preceptor role?

**Project Site**

Princess Margaret Hospital  
Shirley Street  
Nassau, Bahamas  
Tel: (242) 322-2861



Public Hospitals Authority IRB approved

## Appendix C: Evaluation of Educational Program

## EVALUATION FORM: Preceptor Training Education Program

**Instructions:** As a learner, please assist in the evaluation of this educational program. Please circle the number to the right of each statement that best reflects the extent of your agreement with 1 being strongly disagree and 5 strongly agree. **Please do not write your name on this form**, your responses will be anonymous. Thank you.

Strongly Disagree → Strongly Agree

**Program Content**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. The content was interesting to me                 | 1 | 2 | 3 | 4 | 5 |
| 2. The content extended my knowledge of the topic    | 1 | 2 | 3 | 4 | 5 |
| 3. The content was consistent with the objectives    | 1 | 2 | 3 | 4 | 5 |
| 4. The content was related to my job                 | 1 | 2 | 3 | 4 | 5 |
| 5. Objectives were consistent with goals of activity | 1 | 2 | 3 | 4 | 5 |

**Training Environment**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. The room was conducive to learning.               | 1 | 2 | 3 | 4 | 5 |
| 2. The learning environment stimulated idea exchange | 1 | 2 | 3 | 4 | 5 |
| 3. The facility was appropriate for the activity     | 1 | 2 | 3 | 4 | 5 |

**Effectiveness of Facilitator (Persephone Munnings):**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1. The presentations were clear and to the point        | 1 | 2 | 3 | 4 | 5 |
| 2. The presenter demonstrated mastery of the topics     | 1 | 2 | 3 | 4 | 5 |
| 3. The material held my attention                       | 1 | 2 | 3 | 4 | 5 |
| 4. The presenter was responsive to participant concerns | 1 | 2 | 3 | 4 | 5 |

**Instructional Methods**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. The instructional materials were well organized           | 1 | 2 | 3 | 4 | 5 |
| 2. The instructional methods illustrated the concepts well   | 1 | 2 | 3 | 4 | 5 |
| 3. The handout materials given will be used as reference     | 1 | 2 | 3 | 4 | 5 |
| 4. The teaching strategies were appropriate for the activity | 1 | 2 | 3 | 4 | 5 |

**Program Duration**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. The duration of the training was adequate for the content | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|

**Comments**

Please write any additional comments you wish to make regarding the training.

Thank you for your input!