



EFFECTIVE PRECEPTING OF NURSING AND MIDWIFERY STUDENTS IN THE CLINICAL SETTING: ROLE OF EDUCATORS AND CLINICIANS

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ABSTRACT: *This paper aims to discuss the roles of Educators and Clinicians in effective precepting of Nursing and Midwifery Students in the Clinical Setting. It aids both experienced and new preceptors to become more effective teachers in the delivery of their roles to students, interns and newly employed nurses while maintaining the standard of Nursing & Midwifery clinical area. The paper discussed vast literature surrounding the phenomena of preceptorship in nursing. The paper enlightens the concept of establishing an effective preceptorship, teaching strategies for effective preceptorships, challenges confronting precepting's, roles and responsibilities of educators and clinicians' receptors and benefits of effective precepting. Recommendations made in the paper are; Strengthening preceptorship in providing theoretical and practical knowledge to the nursing students, each student nurse should have a formally assigned preceptor that is responsible for the academic growth of that student, preceptor can use various teaching strategies for effective student's clinical practice, nursing leaders and administrators should put on more effort in improving precepting activities in hospitals and institutions, professional organisations should give more support to precepting in nursing for professional development.*

KEYWORDS: preceptorship, preceptors, preceptee, roles of Educator & clinicians, Students Nurses.



INTRODUCTION

Preceptorship is a way of teaching students in clinical settings while simultaneously concentrating on their clinical and ethical development. It is utilised by practitioners in the fields of nursing, medicine, pharmacy, dentistry, and other healthcare professions. It is an assigned, short-term, one-to-one relationship between a student and an experienced practitioner who is trained and available to students in a clinical setting. Preceptorship involves contact with an experienced and competent role model, it is means of building supportive one-to-one teaching and learning relationship (Lofmark, et al, 2012).

A preceptor is a skilled registered nurse who is eager and trained to supervise, instruct, advise, and evaluate undergraduate nursing and midwifery students in a practical setting. (Billay & Yonge, 2004). A nurse practitioner preceptor is a skilled and knowledgeable nurse who has been formally appointed to mentor a student, newly graduated nurse, or new employee as they transition into the workforce. Preceptors are the most crucial instructors in giving nursing students quality clinical education. Preceptors assist students in integrating didactic knowledge into the clinical setting, where they are free to establish their own norms and practises for independent clinical practice. They offer a setting for learning where students can hone their clinical competencies, broaden their knowledge, and practise effectively. The preceptor plays a crucial role in helping students develop their knowledge, skills, and practice while also serving as a role model. This boosts students' confidence and improves their practice, allowing them to develop into independent, decision-making practitioners through constructive engagement. Clinical staff and nurse educators must be aware of the planned learning outcomes for the student's clinical learning period in order to create a positive learning environment where theory and practice complement one another (Trede, Sutton & Bernoth, 2016). Students are prepared by preceptors using a range of abilities. The preceptor works with the student to establish goals and learning outcomes after evaluating the student's learning needs.

The clinical educator, supervisor, and evaluator are the main responsibilities of the preceptor. In order to graduate as a safe practitioner, the student needs to have the information and principles covered in the course material. The preceptor continues this education as the student watches and gradually assumes responsibility for the assessment, diagnosis, treatment, health care evaluation and monitoring, health promotion, and counselling that serve as the foundation of their practice. The procedure enables the preceptee to ask the preceptor for help and direction in a particular area where they are lacking. Good preceptors show students how to still be confident when speaking to themselves and their patients. The obligation to spread information and encourage excellence is increased. In an ideal situation, the preceptor-student connection is mutually beneficial; the preceptor gains by fostering another person while showcasing competence, and the students acquire knowledge and confidence in developing clinical abilities. The clinical setting continues to be crucial for the growth of students' skills, self-assurance, and ability to meet their learning objectives. By providing tools and ongoing assistance, preceptors and clinical instructors help students get ready to pursue their professional ambitions.

According to Patricia Benner's novice to expert learning theory, individuals start out as novices with little experience but with the necessary support, graduate to the stage of an advanced beginner, and then receive preceptorship. People become competent and gradually become adept in understanding what is important and setting priorities once they have mastered the needed skills. They might later develop into experts if they have a high level of expertise



(Benner, Tanner, & Chesla, 2009). With preceptorship, Nursing students are treated as novices in this process, in need of guidance from faculty, educators, clinicians, and preceptors to become competent. In order to grasp the subject, grow more proficient, and eventually become experts, they increase their capacity for clinical reasoning and judgement.

Qualities of a Good Preceptor

- Leadership
- Excellent listening and communication skills
- Effective conflict management
- Capacity to assess based on ethics and standards
- Aptitude to enable critical reasoning
- Ability to self-reflect.

Precepting is NOT

- Someone to do your work
- An opportunity to show off all that you know
- An opportunity to judge others
- About you
- Easy

Concept of Effective Preceptorship

A preceptorship is an educational opportunity that allows nursing professionals and students to obtain practical experience in a healthcare setting while being guided by a more seasoned nurse. Preceptors ensure that new nurses are knowledgeable and self-assured enough to provide high-quality care (Benner, CTanner, & Chesla, 2009). The first stages to becoming a successful preceptor are having a solid understanding of the preceptor's role, the learning process, and strategies for addressing learning variations. A good preceptorship programme may enhance the workplace by encouraging a lifelong learning culture. It offers the preceptor the chance to impart knowledge, shape practice, and increase their own understanding. It gives the student the chance to develop and put their clinical abilities into practice one-on-one with a clinical specialist, which boosts confidence. When sharing their personal histories and fostering a secure, adaptable learning environment, effective and self-assured preceptors serve as role models for students for lifetime learning and professional development. An effective precepting relationship requires both the establishment of a secure learning environment and a trustworthy relationship with the pupil (Bott, Mohide & Lawlor, 2011). Working with preceptors who are willing to share their clinical learning and growth experience helps students realise the value of lifelong learning and humility. For there to be a supportive learning environment, the preceptor must respect the student and what they bring to the learning process.



Steps to ensure a partnership benefit both the preceptor and preceptees.

- ❖ **Choose preferred approaches to instruction and learning.** It is beneficial for preceptors to specify their preferred teaching and learning strategies at the start of the preceptorship process. Preceptors participating in a facility's official preceptor training programme could receive assistance in determining their preferred teaching and learning approaches. The chosen strategy should be interactive encompassing students centred learning
- ❖ **Create a good relationship.** Preceptors can help to establish relationships with preceptees by emphasising the preceptor's role in providing support, answering questions, clarifying policies, and procedures, and helping the preceptee to eventually provide patient care independently.
- ❖ **By establishing a supportive environment:** The preceptor ensures that the preceptee is always comfortable asking questions and ensures that the clinical environment is helpful for learning.
- ❖ **Contemplate teaching strategies.** Such strategies include modelling, direct observation and questioning, think-aloud sessions, assigning directed readings, coaching and cheerleading. It's important to consider the level of experience of both the preceptor and the preceptee when selecting teaching methods.
- ❖ **'Walk the talk.'** Preceptors should remember that they serve as role models for preceptees and must "walk the talk." If the preceptor performs one thing while advising the preceptee to do another, the preceptee will remember what was done, not what was said. Professionalism entails treating nurses, unit staff, other members of the healthcare team, and patients with respect. The preceptor's interactions with these others will teach the preceptee how to behave professionally. For instance, if a preceptee tells her preceptor that she feels frightened by a doctor who reacted angrily to her questions about a patient order, the preceptor should advise her to frame her concerns to the doctor using the "CUS" communication approach: "I am concerned; I am uncomfortable; it is a Safety issue." This straightforward and user-friendly tool can assist the preceptee in communicating with doctors and other health care team members.
- ❖ **Offer timely feedback and evaluation.** A preceptor's primary duty is to perform appropriate feedback and assessment. Throughout the orientation process, it is important to routinely provide formative input. At the conclusion of each clinical day, feedback, evaluation, and a brief conversation should take place, if at all possible. This gives preceptees a chance to discuss the care they delivered and the objectives they met, as well as to set future objectives. If adult learners feel like they are making progress, learning will be more effective. The procedure need not take much time; it can be finished in 5 minutes. Effective criticism does not pass judgement and promotes both good work and areas for improvement. Such comments can encourage preceptees to evaluate and talk about their performance. Feedback can be given via a variety of methods. The preceptee is not allowed to actively participate in the feedback process when using the directive approach, which is used to discuss preceptors' observations regarding the preceptee's performance. For preceptors, giving helpful criticism can be challenging. In her analysis of several methods, Lazarus (2016) emphasised the



feedback sandwich technique, in which the preceptor offers encouraging comments, followed by helpful criticism, and then encouraging comments once more. The preceptor and preceptee should collaborate to come up with an improvement plan. The preceptor should be honest and constructive, providing feedback based on performance rather than personality. It's crucial to note that assessments shouldn't surprise the preceptee if the preceptor has been giving constructive criticism and resolving any issues as they came up throughout the preceptorship.

- ❖ **Identify workplace support.** Preceptors need to be aware of the workplace resources accessible to them while they are serving as preceptors. Preceptors can get assistance from the nurse leader, charge nurses, and unit nurse educators in order to deliver material that is appropriate for the objectives and educational requirements of preceptees. Preceptors should also take advantage of opportunities to participate in educational programmes to advance their knowledge, and they shouldn't be afraid to ask their nurse colleagues for assistance when necessary. The preceptorship's success depends on nursing leadership's commitment and support.

In addition, Frances and Chappelle (2010) stated six areas for effective precepting which involves;

- **Create a teaching environment:** A good preceptor-student fit is the first step to a successful teaching experience. Ensure that the educational programmes you deal with are aware of your personality and preferred working methods. The programmes should also be aware of your practice's characteristics, such as the patient demographic, and the educational opportunities you may provide for students, such as the many kinds of treatments.
- **Communicate with everyone involved:** For a teaching arrangement to be successful, communication is essential. The preceptor must clearly communicate expectations and objectives to the students, their educational programme, other physicians, and the staff. The programme should outline the student's skill level and what it expects the student to learn from the experience in your practice before the student even shows up.
- **Seamster teaching to the student's needs:** It's critical to modify your instruction to fit the requirements, objectives, and learning preferences of each individual student. By doing this, the student's education will be of a higher calibre, and it will also keep the preceptor productive. Early on, you should evaluate the student's strengths and limitations by seeing how they interact with patients. Then, in light of your discoveries, modify your strategy as necessary.
- **Share teaching responsibilities:** To advance their education, students don't have to work with preceptors nonstop. The teaching team can include students themselves, preceptors, partners, staff, and patients. For instance, from other nurses or medical professionals, students can learn various examination approaches. By developing their clinical expertise through independent study, they can also "teach themselves." Opportunities like this can improve the learning experience for the students while giving preceptors the flexibility they need to operate autonomously.



- **Keep observation and teaching encounters brief:** Precepting can be included in a busy schedule by breaking up the observation and teaching into brief, concentrated time slots. Preceptors can evaluate competence and progress while still providing patient care by watching student history-taking or exam skills in two- or three-minute chunks.
- **Broaden student responsibilities:** Increasing student duties enhances their educational experiences, and practice, it increases competencies the most of their patient care abilities.

Teaching Strategies for effective Preceptorship

In clinical education, numerous instructional techniques are employed, such as modelling, observation, case presentations, direct questioning, thinking aloud, and coaching (Burns et al, 2006). These many methods of clinical instruction can aid in illuminating the student's mental processes and clinical reasoning.

- ❖ **Observation:** The preceptor and preceptee observe one another for good teaching and learning processes. Direct observation is effective at the start of a preceptorship or when the preceptee is new to the place. Observation helps the preceptor to understand the competence of the preceptee and make adequate corrections where necessary.
- ❖ **Modelling:** By exhibiting nursing skills, the preceptor exhibits clinical abilities and reasoning. Although advantageous for experienced students as well, this is frequently employed with beginners.
- ❖ **Case presentations:** Presentations of cases show the student's aptitude for gathering crucial histories, relaying significant physical findings, coming up with logical differential diagnoses, and creating appropriate management and follow-up strategies. By discussing examples, the preceptor can ascertain if the student can apply prior knowledge and schema to novel clinical circumstances and gauge the student's level of proficiency in caring for a variety of patients. It aids in locating gaps in students' academic progress. Specify the case presentation format that the preceptor likes.
- ❖ **Direct questioning:** Direct interrogative develops critical thinking abilities and gives an understanding of the student's background knowledge and capacity for problem-solving in clinical settings. Avoid situations where the student would be embarrassed in front of patients or staff, feel stressed, or have trouble focusing.
- ❖ **Think aloud method:** Beginners who are required to respond to preceptor-posted questions and justify their choices can benefit from using this strategy. The think-aloud technique develops clinical reasoning, critical thinking, and reflective thinking (Myrick & Yonge, 2002). It encourages students to express their ideas and justifications for clinical judgments in words.
- ❖ **Coaching:** During the execution of a procedure, the preceptor gives verbal signals to the students. Coaching enables more chances for engagement and skill development. The preceptor provides verbal cues to students during the performance of a procedure. Facilitates increased opportunities involvement and skill building.
- ❖ **Others include;** Demonstration, self-evaluation, reflection & self-discovery



learning Point that preceptors should keep in mind when working with preceptees

- **Each individual has a favourite method of learning:** whether the learner prefers to read and listen or is a visual learner. It's crucial to keep in mind that the preceptee may learn differently from the receptor. The preceptor should identify the preferred methods of study by the preceptee and enhance their practicabilities.
- **Some people learn quicker than others:** Preceptors should be patient, reaffirm the notion, and, if required, come up with another approach to teach it if the preceptee is struggling to grasp it.
- **Participation is necessary for good learning:** It is crucial to promote the learner's active participation through repetition and reinforcement. The preceptee cannot assert knowing how to do a technique or care for a specific patient type until they have performed it or had experience with it. The preceptee needs practical training in patient care, and emergency.
- **Immediacy triumphs over "later."** It's important to remember that the sooner the preceptee can practice the skill, the better she or he will retain what was taught and apply it appropriately in the clinical setting.
- **Preceptors require a variety of learning:** To improve the preceptee's recollection of the material presented, the preceptor ought to employ a variety of teaching and learning techniques. The preceptee must be a motivated adult learner who takes initiative to accomplish the preceptorship's objectives.

What Must a Preceptor Deliver?

- Teach content material and clinical skills based on the expectations of the student's clinical course and student's learning needs
- Assessing a student's capacity to apply classroom knowledge to a clinical situation
- The student's clinical performance should be evaluated.
- Give students the chance to evaluate, determine the cause of, treat, and instruct patients.
- Preceptors should always be present in person during the clinical session or send a capable replacement

Challenges with being a Preceptor:

- It requires time
- If a student isn't performing up to par, it may be challenging.
- Faculty, Department, and School Members' Absence of Support:
- Students are not regularly supervised, are not involved in clinical teaching, are not evaluated, and are not assessed.



- The benefits don't usually come right away.
- Lack of Teamwork: Some of the qualified staff who have not been trained as preceptors may not participate in clinical teaching of the students may be because they feel like, the preceptors who went for the preceptorship training benefitted financially so they cannot teach on their behalf.
- Clinical instructors may experience problems with their relationships with students due to personality or value differences, or if the preceptee appears to have inadequate skills or interests (learner).

Roles and Responsibilities of Educators and Clinicians in Promoting Effective Precepting.

Preceptor Roles in Nursing

Preceptors add coaching or assisting the student in understanding when and how to employ a new ability, in addition to teaching. skill.

- ❖ **Educators:** Determine the learning styles and needs of new nurses, foster critical thinking among the preceptee and provide performance reviews to evaluate their proficiency in the level of practice.
- ❖ **Leader and Influencer:** Preceptors use their leadership abilities to promote critical thinking and sound clinical judgement (Happell,2009).
- ❖ The five principles listed by the American Association of Colleges of Nursing (AACN) that describe a caring professional nurse are demonstrated by preceptors who are RNs, making them leaders and influencers:
 - Care for other people's well-being (altruism)
 - The right to decide for oneself (autonomy)
 - Courtesy toward others (human dignity)
 - Utilise moral principles and norms when practising (integrity)
 - Treating everyone equally (social justice).
- ❖ **Facilitator:** Preceptors seek out tasks and establish connections that fulfil the needs of the learner in their capacity as facilitators. The learner gradually takes on the role of the facilitator as the relationship develops and continues.
- ❖ **Evaluator:** The evaluation provides a formal setting for the learner and preceptor to discuss expectations and offer criticism. The process of evaluation ought to be continuous in order to raise the standard of the learning environment.
- ❖ **Role Model:** The preceptor's responsibilities as a role model include safeguarding, instructing, assessing, and socialising novice nurses while utilising evidence-based techniques. Preceptors must have strong leadership and clinical expertise.



- ❖ **Socializer:** Preceptors facilitate integration into the workplace, recognise and support social needs, assist preceptees in adjusting to new responsibilities and environments, and, if necessary, mediate disagreements.
- ❖ **Protector:** The preceptors guard patients against novice or student error, offer a secure learning environment, facilitate skill development while guaranteeing safe treatment and practice, and enforce policy and procedure adherence.

ROLES OF THE PRECEPTOR AS CLINICIAN AND EDUCATOR

- Preceptors set overall aims and objectives for the practicum experience in accordance with the Nursing & Midwifery Council's given student outcome objectives.
- They help the student put theory into practice.
- Evaluates the type of specific patient interactions that will allow the student to fulfil his or her learning goals at this stage of the nurse practitioner curriculum.
- Aids in the development and performance improvement of the learner.
- Displays behaviours and traits that are in line with nursing leadership and ethics, such as independence and non-maleficence.
- They help the teachers, departments, and schools evaluate students' performance.

PRECEPTOR RESPONSIBILITIES

- Encourage a relaxed, cooperative, and courteous learning environment, acquainting students with agency policies and the clinical site.
- Talk to the student about the best way to get in touch with the clinic site or the clinical preceptor.
- Discuss the requirements for patient encounter documentation with your preceptor and the agency and point the student in the direction of sources and readings with supporting data.
- Examine the course's goals and the student's clinical goals to identify the kinds of learning opportunities that will improve the student's learning.
- Talk about the expectations for student interactions and performance evaluations.
- When the students present each patient they observe, pay attention and offer helpful criticism.
- Offer a range of educational opportunities to the client population, encourage attendance at meetings of the interdisciplinary team, if appropriate and help students become increasingly independent in their clinical knowledge and abilities.



- Inform the clinical faculty as soon as there are any concerns or issues or harmful practices (student behaviour, clinical skills, or student growth) pertaining to the student.
- Review and evaluation of the student's midterm and final clinical performance with clinical faculty and authenticate the student's clinical working hours.

Benefits of Precepting

As their students gain expertise in assessment and diagnosis, preceptors become more productive. Many preceptors have discovered that interacting with students forces them to broaden their areas of expertise and explore novel concepts. Students frequently bring information regarding recent research and a desire to find material that preceptors have not had time to look for due to their busy clinical practice. Preceptors also enhance their teaching and mentoring skills while witnessing their students mature into safe, successful practitioners, which gives them great satisfaction.

Benefits of Preceptorship to the Preceptors

- Enhancement of nursing practice and responsibilities.
- Increase job satisfaction.
- Promote self-improvement, self-fulfilment and self-establishment.
- Enhance preceptor's leadership, communication, and teaching skills.
- Improve clinical abilities by reflecting on and assessing your own performance.
- Provide the possibility of continuing education and career growth.
- Preceptors perform exceptionally well at their jobs because they have an extra incentive to assess their working practices and results.
- Personal development: Preceptors gain from the connections made with students as they develop into capable graduates.
- Preceptors believe they are having a beneficial impact on their field.
- Preceptors connect to the training programme since they stay up to date on the curriculum and participate in programme choices.

The benefit to the Preceptee

- Counselling and coaching from a healthcare specialist.
- The shorter transition period to independent practice.
- Obtain professional attitudes, behaviours, and abilities that are positive. Boost preceptee's confidence, assertiveness, problem-solving, communication, and psychomotor abilities.



- Reduce anxiety and tension by creating a conducive learning environment for the novice nurse.

CONCLUSION

The preceptorship has established itself as a very effective method for clinical instruction. It enables personalised instruction, connects classroom learning to actual patient management issues, and offers role modelling as the student develops standards and practice procedures. Using the appropriate teaching and learning approach, developing a preceptee-preceptor relationship, offering a supportive environment, and providing a feedback system are all steps in a good precepting process. The majority of practising nurses do admirably as preceptors when given the right expectations and a few basic teaching techniques with modifications for unique student and clinic needs. When learning in a clinical setting with qualified preceptors, students develop the necessary skills, competencies, and confidence. An encouraging and constructive clinical learning environment is promoted by the preceptorship programme. To adequately train the upcoming generation of clinicians and to offer the patient access necessary for clinical learning, preceptors are critically needed. Preceptors also feel good about fulfilling a duty as a member of the profession.

RECOMMENDATIONS

- Precepting should be highlighted as a strategy to assist students' nurses, interns and newly employed nurses in practising effectively in the clinical setting
- Preceptorship can employ different teaching strategies for effective clinical practice.
- Each student nurse should have a formally assigned preceptor that is responsible for the academic and clinical growth of the student
- Nursing leaders and administrators should put on more effort into improving precepting activities in hospitals and institutions
- Professional organisations should give more support to precepting nursing for professional development.

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