# Original Research Paper



## PRECEPTORSHIP IN NURSING: A BRIEF CONCEPT ANALYSIS

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ABSTRACT

The definition of preceptorship in nursing education has essentially remained unchanged for the last 45 years. Preceptorship was implemented during a time when nursing roles were less defined, and scope of practice was more limited. The concept of preceptorship was taken for analysis due to its broad and significant use in the professional and social development of the graduate nurses. The meaning, appropriateness and consistency of preceptorship were explored using the Walker and Avant method of concept analysis. They described this process as isolating the concept. Therefore, the aim of this concept analysis is to clarify the meaning of preceptorship and to develop a current operational definition applicable for all scopes of nursing practice using Walker and Avant's eight-step process.

## KEYWORDS: Mentoring, precepting, Nursing, Concept analysis, clinical supervision

#### INTRODUCTION

The recruitment of competent highly qualified nurses is recommended by all health care organisation (Leigh et al 2005). Therefore, given the current, universal nursing shortage, it is accepted that teaching and educating newly hired nurses within the clinical setting is important in order to produce competent practitioners and enhance retention rates. Continuous education enables nurses to build their knowledge, skills and attitudes by helping them integrate theory with practice (Guhde 2005).

There is consensus within the literature that using a preceptorship programme for nurses in any healthcare organization is an important feature, helping to reduce the theory-practice gap (Kaviani & Stillwell 2000). For example, preceptorship helps to facilitate nurses' transition into new clinical settings or socialize them into a new role (Guhde 2005), foster professional development and enhance their confidence in practice (Bourbonnais & Kerr 2007). Preceptorship also improves the quality of nursing education and practice, thereby helping to reduce nursing shortages, by promoting recruitment and staff retention (Harbottle 2006). Thus, preceptorship has been shown to increase job satisfaction and decrease staff turnover (Charleston & Happell 2004, Lambert & Glacken 2004).

It is not surprising to find that the majority of first post graduate nurses (preceptees) want a post where a structured programme of support is provided (Robinson, 2009). In both the Collins and Oxford English Dictionaries preceptorship is defined as "the position of being a practicing physician giving practical training to a medical student; the position of a tutor or instructor; specialized tutor: a specialist in a profession, especially medicine, who gives practical training to a student." The Oxford Dictionary reports the origins of Preceptorship as late Middle English: from 'Latin preceptor, from praecept- 'warned,

instructed', from the verb praecipere' (Oxford 2014).

The concept of preceptorship was chosen for analysis due to its broad and significant use in the professional and social development of the graduate nurses. Paley agrees that talk about concepts should be constructed as talk about the meaning of words (Paley, 1996), and with preceptorship such a common word in today's nursing practice and literature it was appropriate to explore the concept.

#### Literature Review

The databases searched were The Allied and Complementary Medicine Database (AMED), Embase, The Health Management Information Consortium (HMIC), Medical Literature Analysis and Retrieval System Online (Medline), PsycINFO, The British Nursing Index (BNI), Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Health Business Elite. Google books, The Department of Health, NMC and Royal Collage of Nursing (RCN) publications were also searched.

Key words used for the search were concept analysis, preceptorship; the support and development of preceptors to newly qualified staff and preceptorship of newly qualified graduates/registrants for nursing and the allied health professionals. Following elimination of duplicates a total of 118 papers remained. All reference lists were then reviewed, and documents retrieved if the title was relevant to the search criteria producing 52 articles. Of the 52 articles all abstracts were reviewed to determine significance to preceptorship and concept analysis, significant to nursing. All other articles that referred to allied health professionals and preceptorship were discounted. The remaining 22 preceptorship (nursing) articles and 12 concept analysis articles were chosen to support and validate the defining attributes of preceptorship within the nursing profession and the approach taken with the concept analysis.

Table 1: Broad Differences Between Mentoring, Precepting And Clinical Supervision

	Mentoring	Preceptoring	Clinical Supervision
Duration	Long term commitment (Wroten & Waite, 2009; McCloughen, 2009)	Short term commitment (Loewen et al,2005)	Variable and dependent on supervisee. Tends to be ongoing.
Choice of supporter	Mentee chooses mentor. A voluntary relationship between registered professionals where the inexperienced or novice practitioner chooses the experienced practitioner as an appropriate guide through a process of attaining confidence.	Preceptor appointed not chosen. Preceptorship differs conceptually from mentoring particularly in regard to the preceptor being allocated to, rather than chosen.	Chosen in independent supervision: a relationship which has no formal assessment or managerial oversight. (Other types of 'supervision' differ.

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Purpose	Enable or develop professional confidence. A mentoring relationship is one of supporting professional transition through new environments and/or experiences. This relationship may not be established or maintained by an employer.	Fitness to practice; clinical development. The preceptor role is described differently to mentoring focusing on the content to be covered rather than on the new graduate's experience of practice.	Process of reflective self- assessment may include both high support and high challenge (Johns & Freshwater, 1998)
Beginning	Negotiated between the parties	Ascribed	Negotiated
Ending	By mutual and negotiated consent.	When term of preceptorship finishes, may be one or two weeks up to a couple of months	Ends when supervisee decides.

#### Uses of the Concept

Throughout the literature the term preceptorship is used to define a relationship between two people, with a goal of furthering the mentee's career and professional development. The concept of preceptorship is used to describe a form of employee development in which a trusted person uses his/her experience to offer guidance, encouragement, career advice, and support to another person.

## Preceptorship In Nursing.

Models of preceptorship have been used among law, teaching, engineering, pharmacy, paramedic, medical, nursing, and dental disciplines (Billay & Myrick, 2007; Billay & Yonge, 2004). Healthcare-associated preceptorship models consist of practice-based learning in a supervised environment and integrate practical and theoretical knowledge (Loewen et al., 2016; Madhavanpraphakaran & Balachandran, 2013). Definitions of preceptorship can be found in various nursing literatureand have been defined as an intense clinical rotation for a student utilizing a hands-on approach to socialize a student to his or her new role (Lockwood-Rayermann, 2003).

#### Cases

Walker and Avant, 2005 suggest that the use of cases (model, borderline, contrary, and related) assist in further illustrating the concept.

#### I) Model Case

In this model case, a state registered nurse named Jamilah shows up for her first day in the obstetric clinic with her newly assigned preceptor, Wong. Jamilah arrives at Wong's office willing to learn new skills over the next three months. Not only is Jamilah willing to learn, but she also agrees to take direction when prompted. Wong is a willing and experienced senior state registered nurse who serves as a role model for Jamilah. The two of them engage in an interpersonal relationship as Wong orients Jamilah to the obstetric clinic. Jamilah feels comfortable asking Wong for guidance recognizing Wong is an expert in her field. As time goes on, Jamilah realizes that she is beginning to adopt some of the skills and attitudes demonstrated by Wong. Goals are set when both Jamilah and Wong discuss Jamilah's learning objectives during the time they spend together. Jamilah completes her preceptorship with Wong and there is resolution and closure. The story of Jamilah and Wong's time spent together in the obstetric clinic exemplifies a model case of preceptorship.

## ii) Borderline Case

Kelvin, a clinical resource nurse, is interested in leadership and wants to pursue a career in nursing administration. Kelvin's current manager, Mary has extensive experience in nursing leadership and is well respected amongst her peers. Aware of Kelvin's career goals, Mary tries to encourage and support Kelvin's growth and development by sharing her leadership knowledge. She demonstrates a leadership style that might facilitate an open caring relationship with Kelvin. Kelvin, however, he isn't comfortable seeking advice from Mary. He is registered in graduate education and believes that he can gain knowledge concerning nursing leadership

through his studies. This case lacks Kelvin's willingness to participate in a preceptorship relationship. Although the other critical attributes that define preceptorship are present, without participation by both the preceptor and preceptee, the relationship cannot be defined as a preceptorship.

## iii) Related Case

Bema is a new staff nurse on a surgical ward. She has been allotted to a preceptor, Mella. Mella is a nurse with ten years of expertise and can work closely with Bema to help in her orientation to her new position. Bema will work each shift with Mella, with current formal evaluation in twelve weeks. This case illustrates the connected construct of precepting. However, precepting is a time-limited, orientation method with assigned individuals. Precepting differs from mentoring within which participants select each other; there's no time limit and no formal evaluations.

### iv) Contrary Case

Sarah is a new nurse, she feels powerless and "scared" in her new role and of her new responsibilities. She approaches Fitri, a senior nurse and asks for facilitate. His response is "I can't do anything if you have that feeling, you will better soon" and walks away. This case is solely not preceptorship. The actions of the skilled nurse is a clear contrast to preceptorship which incorporates a respectful relationship in which knowledge is shared to additional the goal of the preceptee's development.

#### **Antecedents**

The four antecedents of preceptorship are two living beings, dependency, an educational sponsor, and the existence of a learning environment. Antecedents are events or incidents that happen prior to the occurrence of the concept (Walker, 2005 p73). The most obvious antecedent of preceptorship is that a preceptor and preceptee are required. A preceptorship relationship does not exist without a preceptor and preceptee (Rippy & Baker, 2014).

## Consequences Of Preceptorship

The author has identified four consequences of preceptorship as skill acquisition, goal attainment, professional satisfaction, and professional development. Both the learner and preceptor develop skills and each being leaves preceptorship with a sense of closure and resolution. All four of these consequences ultimately lead to role transition.

#### CONCLUSION

Concept analysis improves practice by offering nurses a clearer understanding of what certain terms mean (Paley,1996). Therefore, by understanding the impact of the concept of preceptorship and the value of the preceptor role, the benefits of preceptorship emerged from the analysis. These benefits included an increase in graduate competence and confidence; standardization of approach; time saved; and emphasis placed on continuing professional development.

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