

## Preceptorship: Combining Experience With Research

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### **Abstract:**

Preceptors can help new graduate nurses face the challenges of the first year of practice in critical care. The authors have used research and personal experience to develop an approach to help the preceptor and new nurse make the most of the preceptor experience. Our hope is that the preceptor will find the experience rewarding, and the new nurse will come to love critical care nursing.

**Keywords:** New graduate nurses | New nurse retention | Preceptor | Preceptorship

### **Article:**

Precepting can be one of the most challenging, yet rewarding parts of nursing. It is important to give new graduates the answers to their questions, but still make them think critically. Seeing the recognition on a new nurse's face after putting together the puzzle, such as why their patient has a pH of 7.13, is incredibly gratifying. Experiencing new graduates positive attitudes toward acquiring new knowledge is always a positive experience for a preceptor. It also helps experienced nurses find new meaning in their work. This is why Ashley, one of the authors, precepts.

### **CHALLENGES OF PRECEPTING**

As a preceptor for 6 years in a medical step-down unit, Ashley has precepted new graduate nurses from varied educational backgrounds. The problem Ashley sees most is a lack of skill in prioritizing. For example, when a new graduate's patient is rapidly deteriorating, and the nurse is found giving morning medications to another patient. Often, patient needs compete with the time and organizational skills of the new nurse. Similarly, when a patient's blood pressure is very low, the new graduate is challenged to interpret the pathology behind low blood pressure and the

impending complications while also making sure the blood pressure is accurate and notifying the physician immediately. For these reasons, the Institute of Medicine's Report on the Future of Nursing<sup>1</sup> recommends supporting new graduates' transition to practice through nurse residencies and through partnering new graduates with proficient and talented nurse mentors. The report highlights that effective residency programs with competent preceptors result in nurses mastering leadership and technical skills, who can better organize work, establish priorities, and communicate with physicians and other members of the health care team, as well as patients and families. Morrow<sup>2</sup> describes effective preceptors as having strategic vision, creativity, inspiration, self-knowledge and self-confidence, effective communication skills, patience, ability to assess learning, and an interest in teaching.

New graduate nurses face many challenges during their first year of practice. Starting their career in a critical care setting is even more daunting. Some nurses feel adequately equipped with the knowledge needed to tackle these challenges right out of school. However, many feel unprepared for the reality of their first job.<sup>2</sup> Also, their perceptions of readiness to practice sometimes differ from those of preceptors.<sup>3</sup> This article explores perceptions of preparedness of new graduates and preceptors and combines research with the experiences of the authors, to suggest ways to ease the transition into practice for the new graduate, and reduce frustration for both the new graduate and preceptor.

#### THE NEW GRADUATE'S PERSPECTIVE

The first year as a registered nurse is one of intense learning and responsibility. Fear and anxiety are an overarching theme in many new graduates' perspectives on their first year of licensure.<sup>2</sup> They fear making a deadly mistake and have a fear of failure. For example, they may be afraid of not knowing the meaning of assessment data and therefore not acting appropriately.<sup>4</sup> Furthermore, these fears may turn into reality in their first clinical practice. Ashley shares the following from new nurses she has worked with. A new graduate's patient had a blood pressure of 65/34 mm Hg. The new nurse was unsure of when to notify the physician, because the patient had a "do not resuscitate" order. Ashley encouraged the nurse to contact the physician, and found the patient and family did want "pressors" but not intubation. The patient was transferred to the intensive care unit. Another nurse did not take a patient's blood pressure before giving an antihypertensive. As a result, the patient's systolic blood pressure, which had been low, dipped down into the 70 mm Hg's.

Cooper and colleagues<sup>5</sup> found that simulation training in the final semester of nursing school showed that senior nursing students were not able to adequately care for an acutely deteriorating patient. New graduates also lack confidence in decision making and lack the organizational skills needed to adequately do their jobs.<sup>6</sup> At the same time, Ashley has found that some new graduates have self-confidence that is dangerous because it does not match their skill level. Simulations in

a new graduate residency program help nurses understand how quickly patient conditions change and how quickly they must intervene. It is also important for new graduates to be placed with a preceptor who is clinically experienced and can help them recognize subtle patient trends and use critical-thinking skills.<sup>7</sup> Ashley has found that completing thorough assessments with new nurses at the beginning of the shift and then repeating the thorough assessment when a patient starts to deteriorate help them to see the difference between a patient's baseline and recognize subtle changes earlier with future patients.

Some new graduate nurses feel intimidated interacting with physicians and are conflicted because their real-world experience differs greatly from the ideals they were taught in nursing school.<sup>6</sup> One way to promote collaboration with other disciplines is for the preceptor to facilitate opportunities to engage with the interdisciplinary team so new graduates can increase knowledge and become more self-confident in communication.<sup>8</sup> Ashley requires every new graduate to attend rounds with the team on every patient; this not only serves as a learning tool, but also makes graduates feel more comfortable interacting with multiple disciplines. Ashley has found some new graduates to be focused on 1 task when their morning medications are already 2 hours late. Students often have the consistent support of educators and classmates. However, when transitioning to their new jobs, new nurses feel as though the structure is inconsistent, and the culture of their new workplace is sometimes overwhelming.<sup>2</sup> This reality shock can cause great anxiety in new graduates trying to find their place in the nursing world. However, Kelly and Courts<sup>9</sup> found that many nurses felt as though their capstone course gave them the best preparation for their first job. Working 12-hour days, 3 days a week, prepared them for the realities of a nursing role. This same study found that most nurses felt their clinical experience prepared them most for practice and reported that an increase in clinical experiences would be beneficial. They also suggested that clinical groups be smaller so each student could receive more personal attention from the instructor.

## THE PRECEPTORS' PERSPECTIVE

Preceptors have the very important task of making sure new graduate nurses can safely and effectively practice independent of other nurses. Positive experiences for new graduates depend greatly on this relationship. Some new graduates that Ashley has precepted expect their preceptors to tell them the answers, instead of using available resources to find the answers themselves. Hallin and Danielson<sup>3</sup> found that preceptors do not believe new graduate nurses are adequately trained for their first job, and they make a conscious effort to seek out multiple learning scenarios while precepting. Some preceptors suggest the final semester of nursing school should include a practical examination that involves the student, preceptor, and educator. Lofmark et al<sup>10</sup> found that inexperienced nurses serving as preceptors estimated the new graduate's competence much higher than experienced preceptors did. In addition, preceptors who were genuinely interested in precepting tended to rate nursing students as more prepared to graduate and practice. Those authors also found that preceptors expected nursing students to be knowledgeable in areas that would be considered specialty areas of practice, such as the

emergency department and pediatrics. Many preceptors felt as though they had no incentive to precept and precepting did not provide any type of benefit or reward. Thus, selection of experienced preceptors who have realistic expectations of what new graduates can and cannot do and who genuinely like to teach is very important to new graduate success. Hallin and Danielson<sup>3</sup> recommend all preceptors complete a preceptor preparation course to help prepare them to assist new graduates in their transition to practice.

## EASING THE TRANSITIONS FOR EVERYONE

These 2 perspectives on readiness to practice indicate that more can be done to better prepare new graduates for their first job. Ulrich and colleagues<sup>11</sup> found that new graduates who participated in nurse residency programs showed improved leadership and communication skills, as well as improved clinical competence and greater self-confidence than did a control group who were not involved in a structured residency program. Another study found that the transition to a new graduate's first job was made easier by empowerment in the workplace.<sup>12</sup> This could be achieved by encouraging new nurses to join shared governance councils in the hospital so their voice can be heard. One study suggested that preceptors and mentors should model evidence-based practice for new graduate nurses to help them achieve optimal outcomes.<sup>13</sup> The study also concluded that nurse educators need to focus on teaching evidence-based practice so new graduates will have a clear understanding of how to implement this in their own practice. Furthermore, they need to provide students with an opportunity to put what they are learning into practice in the clinical area.<sup>14</sup>

## CONCLUSION

Precepting new graduate nurses is one of the best things about Ashley's job. She loves to see the light bulb come on in the new graduates' heads when they have made a connection between the theory learned in school and current practice. Many things can be done to ensure the new graduates have a positive experience and are prepared for their first job. The responsibility for preparedness does not fall on educators alone. We need preceptors who are interested in helping new graduates learn. We also need new graduates to recognize that their first job may not live up to the ideals learned in nursing school. The new graduate, preceptor, mentor, and manager can all take actions to promote success during the stressful transition period. Ashley says, "My hope is that the new graduates I precept will come to love the art and science of nursing as much as I do."

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