



## **Introduction**

Welcome to the Preceptor Training Program!

The Preceptor Training Program is an educational program designed to help you make the transition from staff/team member to preceptor. Learning to be a preceptor requires that you acquire and integrate new knowledge, attitudes, and skills. This program should be used in conjunction with AST's Preceptor Module Series: <https://www.ast.org/ceonline/catalog.aspx> Search PS-1 for CE modules.

## **Preceptor Training Program Outline**

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## Definitions

**Preceptor:** A preceptor is an experienced and competent employee who has demonstrated proficiency in technical, process, intellectual, and interpersonal skills. He or she should have both an interest in teaching and a desire to work in a close one-to-one relationship with a new orientee/student. The preceptor is responsible to orient the orientee to the unit and introduce him/her to the formal and informal rules, customs, culture, and norms of their co-workers and workplace.

**Orientees:** An orientee is an employee/student who is new to the unit or department. The orientee may be newly hired to the institution or may be a transfer in to the unit from another department within the institution. He or she may be a novice to the profession and/or be unfamiliar to the institution or the unit. In some instances, the orientee is a student that is being oriented to the department. An orientee may also be referred to as a preceptee.

**Orientation:** An orientation is the process by which an orientee is introduced into the institution, department, or unit and its philosophy, goals, standards, role expectations, and processes.

## Responsibilities of the Preceptor

### A. Roles of the Preceptor

1. Educator: Through the use of the educational process the preceptor will assist the orientee/student to acquire the experiences and skills necessary to successfully fill his/her role as a member of the health care team. As a resource person and expert, the preceptor will continue to be available for the new employee/student to answer questions and support the orientee/student even after the orientation period.
2. Mentor: A mentor is a trusted colleague who supports the orientee/student through the orientation process and beyond. He or she anticipates the orientee's/student's needs and concerns and makes himself/herself available to respond to those needs. The preceptor's professional attitude, performance, and supportive manner separate a mentor from a co-worker.
3. Socializer: The preceptor socializes the orientee/student into the unit team. This is accomplished through introducing the orientee/student to co-workers, physicians, and other employees whom they may come in contact with. The orientee/student should be included in breaks, lunches, and staff meetings.

### B. Differences Between a Team Member and a Preceptor

The job requirements and responsibilities differ between a team member and a preceptor. All members of the team must be aware of the difference and be willing to accept them. Conflicts between co-workers may develop if the team is unable to accept the different value systems that need to be in place.

The exercise on the next page allows the preceptor to evaluate the differences between the role of team member and a preceptor.

## **DIFFERENCES IN VALUE SYSTEMS**

<b>Feature</b>	<b>Team Member Values</b>	<b>Preceptor Values</b>
<b>Primary Role</b>		
<b>Responsibility</b>		
<b>Workload</b>		
<b>Priorities</b>		

## **TRAITS OF AN EFFECTIVE PRECEPTOR**

The attitude that you display as you are orienting an orientee/student is critical in helping him/her to adjust to the unit and his/her new role. The best learning environment is one that will allow the orientee/student to grow without feeling intimidated or frightened. To insure you are providing this type of environment, your interaction should include the following qualities:

**POSITIVE ATTITUDE**  
**FLEXIBILITY**  
**SENSE OF HUMOR**  
**CARING**

**CALM MANNER**  
**PATIENCE**  
**RESPECT**  
**HONESTY**

## **PRECEPTOR CRITERIA**

- Provides patient care according to established practice standards
- Fulfills duties according to established hospital and unit policies and procedures
- Demonstrates safe operation of equipment
- Maintains mature and effective working relationships with members of the health care team
- Uses resources effectively and appropriately
- Demonstrates effective verbal and written communication skills

## **BENEFITS OF THE PRECEPTORSHIP TO THE ORGANIZATION**

1. Well prepared, competent employees, orientees and students.
2. Employees, orientees and students who demonstrate skills, behaviors, and the core values of the institution.
3. Increased productivity within the unit or department.
4. Ease of assimilation of the orientee/student into the team.
5. Employee, orientee and student retention.
6. Ability to attract high level new employees, orientees and students.

## **BENEFITS OF PRECEPTORSHIP TO THE PRECEPTOR**

1. Personal satisfaction for a job well done.
2. Personal growth through increasing of one's own knowledge base.
3. Sense of pride in shaping and directing a peer's professional development.
4. Recognition of excellence by team members and managers.
5. Progression through career ladder.
6. Provides diversity within the daily work routine.

## **PHASES OF ORIENTEE/STUDENT DEVELOPMENT**

Adapted from "Metamorphosis of a Critical Care Nurse: The First Year" by Deborah Tuggle, RN, MD. Critical Care Nurse (8), 2, 14-15.

The process of becoming an independent, productive orientee/student can be a long and difficult process for both the orientee/student and his or her co-workers. The orientee/student will progress through a series of predictable stages. Remembering your own first year of employment/clinical practice and understanding what the orientee/student is going through can help you to become a more effective preceptor.

### **Months One and Two**

**HYSTERIA!** The new orientee/student may feel overwhelmed especially if this is his or her first job. They are inundated with information. They are often expected to be familiar with new terms, skills, and routines. They may feel that they are expected to understand all functions of the job and perform like everyone else around them. They start to question the wisdom of their decision to work/orient here. They may ask themselves, "What have I gotten myself into?" "Will I ever be as competent as all my co-workers (they're so smart?)" "Will I ever feel secure in my role and in this place? (Gee, I wonder if my liability insurance is current!)."

## **Months Two and Three**

**DISBELIEF!** They feel like they're beginning to catch on. Instead of rushing around in a panic, they're getting organized and developing a routine. They are starting to internalize their job. They no longer need to use lists and notes to get through their tasks. They begin to feel comfortable with their responsibilities and they look to their preceptors and co-worker and recognize how supportive they have been. They feel as if they are making progress.

## **Months Three to Six**

**SELF-ASSURANCE!** They are beginning to see past the tasks. The job is becoming easier. They begin to feel a sense of belonging and connection with their co-workers. They realize that they can do this job. They find that they are rarely relying on their preceptor or co-workers for answers. In fact they start to answer questions of other orientees/students (what a good feeling).

## **Months Six to Nine**

**MANIA!** They say, "Hey, I'm really coming along here. In fact I'm actually much smarter than most of the people around here." They may start correcting and pointing out mistakes of their co-workers. They start to wonder how the department was able to manage before they joined the team. They think, "Wow, I'm really on top of things, but I wonder why no one asks me to go along on break any more."

## **Months Nine to Twelve**

**GRATIFICATION!** They realize that their knowledge level is only the tip of the iceberg and there is still soooo much to learn. They also have come to appreciate their co-workers. Instead of competing against their team members, they have become part of them. They recognize that they are doing quality work and have a sense of accomplishment when they go home at the end of their shift. They realize that the first year was difficult, but they feel proud of themselves and what they have accomplished.

Assisting the orientee/student through their first year of employment/clinical skills takes time, effort, and patience. But you should feel proud that you assisted in the growth and professional development of this valuable team member.

## **EDUCATIONAL PROCESS**

**Understanding that adults learn differently than children will help the preceptor tailor the educational process so that the orientee/student can most effectively benefit from the orientation.**

### **A. Principles of Adult Learning**

1. **Learning is a normal adult activity.** Adults learn not by a teacher initiating and motivating the learning process but rather, by the teacher/preceptor removing obstacles to learning. These obstacles may be things such as time restraints, anxiety about being successful and excessive responsibilities. An orientee/student will be most successful if he/she may learn at his own pace in a non-threatening environment.

2. **Adults with a positive self-concept and high self-esteem are more responsive to learning.** Adults want to be treated with respect. They avoid situations that they can not control. They do not want to be talked down to or judged. Adults learn best in an environment that does not threaten their self-esteem. When precepting a orientee/student, simulation of tasks prior to actually performing them will provide a non-threatening environment where the orientee/student can learn from his mistakes without the risk of harming his self-esteem or harming someone else.
3. **Adults learn best when they value the role of the adult learner and possess skills for managing their own learning.** Children are passive learners. They learn what they are told to learn. Adults prefer to be involved in the process of determining what needs to be learned. They should share in the responsibility for planning, implementing, and evaluating their learning. This collaborative approach helps both the preceptor and the orientee/student become interdependent learners. Preceptors can be excellent models for adult learners because most are willing to learn as they teach.
4. **Immediate, descriptive feedback is essential if adult learners are to modify their behavior.** As the new employee practices new skills, the preceptor must give immediate feedback. This allows the orientee/student to evaluate his/her progress toward completion of the objectives. The feedback needs to be objective and nonjudgmental. Suggestions for improvement are valuable if changes need to occur. If the skill is done well, this too requires feedback. Successes reinforce self-esteem and lead to motivating of the new employee to try new skills.
5. **Adults tend to be anxious in new learning situations and further stress can interfere with learning.** During orientation/clinical practice, initial activities should be planned so that they reduce stress. Give the orientee/student an opportunity to feel comfortable with the preceptor and develop a sense of trust prior to being put in a stressful situation. Anxiety can be reduced by creating an environment of acceptance and support for learning and by providing time and opportunities to practice new behaviors.

### **Additional Thoughts on Adult Learning**

- Adults learn only what they are ready to learn.
- Adults learn best what they actually perform.
- Adults learn from their mistakes.
- Adults learn easiest what is familiar to them.
- Adults favor different methods of learning.
- Adults can not learn what they do not understand.
- Adults learn through practice.
- Adults learn when they see their own progress.

### **B. Assessment of Educational Needs**

Prior to assessing the orientee's/student's educational needs, the expected outcomes for orientation/clinical practice need to be determined. These outcomes should include the knowledge, skills and attitudes that are expected of the orientee/student at the end of the orientation/clinical practice period. The outcomes should include:

- The same outcomes for all orientees/students assigned to the same position.
- The outcomes should be written down.
- The outcomes should be stated in clear, concise behavioral terms.
- The outcomes should be known by all that participate in the orientation/clinical practice of the new orientee/student (preceptor, orientee/student, manager and unit educator).

Identify three expected outcomes for the orientee/student in your unit or department.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

The learning needs of an orientee/student can be described as the difference between what the orientee/student already knows and what he/she is expected to know.

**Methods, which can be used to determine learning needs, may include:**

- Ask the orientee/student about previous experience
- Direct observation
- Listening to questions that the orientee/student asks
- Asking the orientee/student questions
- Initiating skills checklists

When assessing learning needs, be aware of potential external factors that may effect work performance such as stress, health problems and family concerns. Though these problems may not be our responsibility, we must account for the effect they have on the outcomes of the educational process. Other factors to consider may be things such as difficulty adjusting to a new shift, attitude problems and lack of motivation.

## C. Planning

Developing the Educational Plan

Utilizing the expected outcomes previously identified, determine the specific skills and procedures that are needed by the orientee/student in order to meet one expected outcome. List the skills and or procedures below:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## Methods Available to Meet Educational Needs

Determine available methods for proceeding with the educational plan. Potential methods include:

- Have the orientee/student “shadow” the preceptor.
- Demonstration of the procedures with a return demonstration.
- Use of reference manuals such as Structure Standards.
- Discuss case scenarios.
- View videotapes.
- Involvement with educators in the department.
- Interdisciplinary collaboration.
- Computer based training.
- Using resources in the library.

Which methods do you consider to be the most effective?

What factors may effect the approach you will use?

Preceptor’s learning style?

Time?

What determines the method that should be used?

## **D. Implementation of the Education Plan and Evaluation of the Orientee/Student Development**

1. Individualize the education plan. Prioritize which skills or procedures must be accomplished first. Include the orientee/student in the decision making process. Keep him/her informed of all plans regarding his/her orientation/clinical practice. Use of a unit specific orientation/clinical practice plan and unit specific skills checklist will be a valuable tool in the implementation of the plan.
2. Utilize time management strategies. Determine approximately how much time will be required to accomplish each skill. Let the orientee/student know the anticipated time frame. Provide him/her with a schedule that identifies what will be covered and when it will be covered during the educational process.
3. Have a plan in place if the orientee/student is unable to complete the requirements within the designated time frame. Utilize appropriate resources to supplement the education.
4. Provide both positive and constructive feedback to the orientee/student as the orientation/clinical practice progresses. Collaborate with the unit manager to keep her informed of the progress that is being made. Document progress on the skills checklist or other evaluation tool.
5. Schedule a time and place where collaboration between the preceptor and new employee will occur. Utilize appropriate communication skills when interacting with the orientee/student. Some of these skills include:



- Be sure feedback is accurate and timely.
- Use “I” statements, not “You” statements. Don’t criticize or label when giving feedback.
- Be conscious of where feedback occurs. Avoid discussing the individual’s progress around others.
- Keep the progress of the orientee/student confidential. Share this information with only those persons who need to know it.

### **TEN TIPS TO BECOMING A SUCCESSFUL MENTOR**

1. Maintain a positive attitude.
2. Practice what you preach. Anything less destroys your credibility.
3. Think out loud. This gives the orientee/student an opportunity to understand why you do what you do.
4. Provide positive feedback for a job well done.
5. Assist the orientee/student to learn from his mistakes.
6. Never abandon the orientee/student. As the orientee/student gains confidence and skills, he/she will begin to work independently. Until that time arrives, he/she will need and want supervision.
7. Always give clear and complete instructions.
8. Inform the orientee/student of the resources that are available to meet his/her needs.
9. Provide simulation experiences to allow the orientee/student an opportunity to practice new experiences.
10. Stay approachable, flexible and honest.

### **SOCIALIZATION OF THE ORIENTEE/STUDENT**

Socialization of the orientee/student into the team is an essential responsibility of the preceptor. Most orientees/students worry about whether they will fit into the team and whether they will be liked and respected. They may wonder if the team members get along well with each other and they may be curious about who are the “leaders” of the team.

The preceptor needs to make the orientee/student feel welcome. The following tips may be useful in helping the preceptor accomplish this task:

- Be prepared for the orientee/student to arrive on the unit.
- Introduce the orientee/student to co-workers and other contacts.
- Show the orientee/student the physical layout of the unit.
- Implement the use of unit specific checklists to assist the preceptors in covering all essential skills and procedures.
- Identify resources that the orientee/student may use to aid in the learning process.
- Include the orientee/student in all breaks and staff meetings.

Think back to your first day on the job/clinical practice. What made it a positive or negative experience?

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Socialization should also include informing the orientee/student about department ground rules. These are the written or unwritten rules for the unit or department. In the space below, list two ground rules for your department which you will share with an orientee/student.

1. 

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2. 

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### **ORGANIZATIONAL SUPPORT OF THE PRECEPTOR**

Organizational support of the preceptor will include:

- Adequate education and preparation in the form of a preceptor course.
- A clear definition of the roles and responsibilities of the preceptor.
- Support from the unit manager. The preceptor should meet regularly with the manager to discuss the progress of the orientee/student.
- Sufficient time to orient the orientee/student. Ideally, the preceptor should have a reduced workload during the period when the orientee/student is dependent on the preceptor to function in his/her assigned role.