C. A. R. I. N. G. for new nurses: Preceptor Training

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Issue:

- 14% 4S RN turnover rate, highest of M-S units (8/14)
- PEC- RN “pull” survey- 29% of pulls to 4S (8/14)
- 4S preceptor interviews: No formal training
- Gap analysis: Hospital preceptor course last offered 4/13

Why does it matter?

- ↑RN turnover → ↑demand on/for preceptors, ↑burnout if preceptor does not feel prepared or confident in role
- Quality of preceptorship experience directly impacts satisfaction & retention of new RNs
- Patient care suffers-poor outcomes
• RN turnover=better outcomes & mortality (JC, 2001)
• Orientation$ = 100% RN salary; turnover = cost (JC, 2001))
• 1st yr new RN turnover = 35-65% (Figueroa, 2013)
• 65-76% of inexperienced RNs do not meet entry-level clinical judgment expectations. (delBueno, 2005)
• Preceptors impact job satisfaction & competency of new RN (Sandau et al., 2011)
• New RNs will change to less acute setting or leave nursing if don’t feel competent (NCSBN, 2008)
• Preceptors feel prep & understanding of role confidence (Panzavecchia & Pearce, 2014)
• “Live” class is best- shares info with discussions & learning (Horton et al., 2012)

Literature Review
• Class room availability: 4S class 3 hrs vs. 4hrs
• Overwhelming amount of resources
• 100 hrs planned for course development, well exceeded
• Time limit of project: Inability to time teaching & then pairing newly trained preceptor with new orientee to observe preceptorship

Project Barriers
• Very engaged staff: attendance & participation
• Beth Cancilla, Clinician 4S, assisted to recruit 4S staff to participate in class based on schedule
  • 100% of 4S preceptor attendance - 9 total
• Leadership support for recruitment of participants
  • MICU - 5 participants
  • ED - 2 participants
  • Nurse leader residents - 2 participants
• Support from education dept. to rewrite course
Objectives

Short term
- ↑ Preceptor competence & confidence

Long term
- ↑ Preceptors satisfaction with role (3 & 6 mos)
- ↑ Satisfaction of new RNs with newly trained preceptors
- ↑ Competence of new RNs at end of preceptorship
- ↑ Retention of new RNs

Tools: PowerPoint handouts, discussions, feedback handouts, recognition gifts

Classes:
- 4S: March 25th (2) & 27th (1)
- Hospital: April 2nd (2)

Total attendance: 9+12=21

Methods
Applying Hamot's Core Nursing Values to Precept New Nurses

- C-ompassion for the preceptee
- A-dvocacy to promote learning & communication
- R-espect & Dignity to increase satisfaction and retention
- I-nTEGRITY & Honesty when providing feedback
- N-eW technology & Innovation to promote safe practice
- G-uidance & Mentoring to enhance the team
...you are the ships that carry our new nurses through choppy waters to the end of the rainbow!

PRECEPTORS...
Course Outline

- **Compassion**
  - New RN reality shock
  - Preceptor roles and responsibilities
  - Adult learning
  - Preceptor reflective practice/beliefs

- **Advocacy**
  - Creating a good learning/work environment
  - Communication skills—Dialogue skills
  - Shift report/ISBAR
  - Handling stressors—Dealing with difficult situations

- **Respect & Dignity**
  - Developing objectives
  - Granting independence & autonomy
  - Inspiring peers
  - Dignity & respect to customers

- **Integrity & Honesty**
  - Just culture
  - Providing feedback
  - Changing behavior
  - Debriefing

- **New technology & Innovation**
  - Organization, prioritization, situational awareness
  - Clinical teaching techniques
  - Resources—human & electronic
  - Patient safety & Magnet

- **Guidance & Mentoring**
  - Developing critical thinking
  - Teamwork & Socialization
  - Competency & confidence
  - Self-care
RESULTS

Pre/post survey & Overall Course Evaluations
Preceptor Class Survey Results

Survey Question

Strongly Disagree

Strongly Agree

Pre-survey

Post-survey
Overall Course Evaluation

Question #

1. 4.44
2. 3.84
3. 4.22
4. 4.22
5. 4.44
6. 3.78
7. 4.83
8. 4.78
9. 4.67
10. 4.28
11. 4.47
12. 4.00

Strongly Disagree → Strongly Agree
### Structural Empowerment

- The organization provides educational activities to improve the nurse’s expertise as a preceptor.
- Describe the organizations preceptor educational program(s) and how each program is evaluated on an ongoing basis.

### Source of Evidence

1. Meeting minutes with 4S leadership for course planning
2. 2014 New RN survey-satisfaction with preceptorship, learning environment, preceptor
3. Course outline
4. Meeting agenda UD/Council & PP slides
5. Program evaluation

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Magnet matters: Structural Empowerment
CNL Role Functions in Micro-System Project

**Educator**
- Class developed with latest evidence to benefit preceptor-orientee relationship to enhance communication, feedback quality provided to the orientee, & the learning environment

**Outcomes Manager**
- Monitor outcomes to assure meeting of objectives & fulfilling needs of preceptors, new RNs, UD, organization, & patients

**Advocate**
- Give support to preceptors by providing them with resources, ways to learn more info, and format to ask questions /share experiences.
- Patients outcomes depend on well trained RNs.

**Team Manager**
- Work with preceptors, orientees, educators/dept, Magnet coordinator, and nurse leadership to ensure program meets strategic goals
• Update slides to incorporate staff input/ideas
• “Example pool” from specialties
• “Basics” class for RNs with no experience as 1° preceptor
  • Offer in April & October
  • Build in time for more skills practice—”Deeper dives”
• Advanced class/modules to further education after Basics
• Reevaluate preceptee feedback tool & update
• Increase recognition
Next classes:
May 5
June 11th
7-11 & 12-4

Who are your 2 recruits?
• Magnet document SOE
• Use newly trained preceptors with interns/new RNs
  • Survey all new RNs post preceptorship for satisfaction
  • Survey attendees at 3 & 6 months after-did practice change?
  • Fall 2015 -Survey UD-satisfaction with skills of preceptors?
• Complete development of “Preceptor Program”
  • Define selection criteria
  • “Preceptor Support” services via online tools
  • Enhance recognition of efforts-Develop criteria for Preceptor Sr. Pro. Contributions

Future of “Preceptor Program”
WHAT DO YOU FIND AT THE END OF C. A. R. I. N. G. PRECEPTORSHIPS?

A pot o’ competent, confident, new nurses!