Title:

Leading Transformational Change: An Innovative Preceptor Education Program

Sheila Hauck, DNP, MSN St. Mary's Medical Center, Evansville, IN, USA Susan Seibert, DNP, MSN

College of Nursing and Health Professions, University of Southern Indiana, Evansville, IN, USA

Session Title:

Clinical Leadership for Transformational Change

Slot:

Keywords:

Critical Thinking, Preceptor Preparation and RN Retention

References:

Brewer, C. S., Kovner, C. T., Greene, W., Tukov-Shuser, M., & Djukic, M. (2012). Predictors of actual turnover in a national sample of newly licensed registered nurses employed in hospitals. Journal of Advanced Nursing, 68(3), 521-538. doi:10.1111/j.1365-2648.2011.05753.x Chen, Y., Duh, Y., Feng, Y., & Huang, Y. (2011). Preceptors' experiences training new graduate nurses: a hermeneutic phenomenological approach. Journal of Nursing Research, 19(2), 132-140 Cho, S., Lee, J. Y., Mark, B. A., & Yun, S. (2012). Turnover of new graduate nurses in their first job using survival analysis. Journal of Nursing Scholarship, 44(1), 63-70, doi:10.1111/i.1547-5069.2011.01428.x Goss, C. R. (2015), Systematic review building a preceptor support system. Journal for Nurses in Professional Development, 31(1). E7- E 14. DOI: 10.1097/NND.0000000000000117 Hayes, L. J., O'Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J., Hughes, F., & ... North, N. (2012). Nurse turnover: A literature review - An update. International Journal of Nursing Studies, 49(7), 887-905. doi:10.1016/j.ijnurstu.2011.10.001 Henderson, A., & Eaton, E. (2013). Assisting nurses to facilitate student and new graduate learning in practice. Nurse Education in Practice, 13, 197-201. http://dx.doi.org/10.1016/j.nepr.2012.09.005 Horton, C. D., Depaoli, S., Hertach, M., & Bower, M. (2012). Enhancing the effectiveness of nurse preceptors. Journal for Nurses in Staff Development, 28(4), E1-7. Kaddoura, M. A. (2013). The effect of preceptor behavior on the critical thinking skills of new graduate nurses in the intensive care unit. The Journal of Continuing Education in Nursing, 44(11), 488-495. doi:http://dx.doi.org/10.3928/00220124-20130816-21 Rush, K. L., Adamack, M., Gordon, J., Lilly, M., & Janke, R. (2013). Best practices of formal new graduate nurse transition programs: An integrative review. International Journal of Nursing Studies, 50(3), 345-356. doi:10.1016/j.ijnurstu.2012.06.009 Sandau, K. E., Cheng, G., Pan, Z., Gailard, P. R., & Hammer, L. (2011). Effect of a preceptor education workshop: Part 1. Quantitative results of a hospital-wide study. The Journal of Continuing Education in Nursing, 42(3), 117-126. doi:10.3928/00220124-20101101-01 Sandau, K. E., & Halm, M. (2011). Effect of a preceptor education workshop: Part 2. Qualitative results of a hospital-wide study. The Journal of Continuing Education in Nursing, 42(4), 172-181. doi:10.3928/00220124-20101101-02 Seibert, S. (2015). The meaning of a healthcare community of practice. Nursing Forum, 50(2), 69-74. doi:http://dx.doi.org/10.1111/nuf.12065

Abstract Summary:

The Professional Development Council's vision for transformational change provided the structure to develop, implement and evaluate a highly innovative evidence-based preceptor education curriculum. This curriculum encompassed critical thinking skills linked to both didactic and experiential learning methodologies. Pilot results demonstrate early increased registered nurse orientee retention and high preceptor satisfaction.

Learning Activity:

LEARNING OBJECTIVES EXPANDED CONTENT OUTLINE

1. The learner will be able to list content elements of an evidence-based preceptor program.	I. Problem statement: Loss of human capital and financial capital due to new graduate nurse turnover.
2. The learner will be able to identify interactive problem-based learning activities to enable preceptor application of educational theory and teaching strategies.	II. Leadership agenda: Transformational Change and Innovations for Nursing Education and Professional Development Council. a. Pre-intervention assessment b. Consultation with academic clinical nurse educator c. Theoretical framework
3. The learner will be able to identify interactive problem-based learning activities to enable preceptor application of educational theory and teaching strategies.	III. Evidence-based practice project. a. PICO Question b. Literature review c. Evidence-based preceptor curriculum d. Examples of curricular content i. Creating a welcoming, learning environment ii. Coaching critical thinking
4. The learner will be able to recognize organizational outcomes related to an effective preceptor preparation program.	IV. Pilot project. a. Cohort b. Evaluation methods c. Results
5. The learner will be able to relate the leadership function of a Professional Development Council in developing, implementing and evaluating an innovative preceptor preparation program.	V. Implications for practice.

Abstract Text:

New RN retention was a strategic goal of the Education and Professional Development Governance Council. Anecdotal reports indicated that new graduate RNs were dissatisfied with orientation, preceptors, and the processes. Staff Development Specialists reported low attendance in the preceptor courses. Newly employed RNs were often not assigned to the same preceptor with preceptors reporting inadequate time with their orientee due to patient load. What was apparent was that the retention rate for RNs who as students completed their medical surgical clinical on the Dedicated Education Unit (DEU) was far higher than employed RNs who had not had the same opportunity (100% vs 85% respectively). The council chose to transform the preceptor program modeling the strategies for developing competent clinical teachers in the DEU.

Three strategies were implemented to achieve the strategic goal: (1) evaluate/revise the current preceptor program; (2) develop and fortify critical thinking in orientees; and (3) support the preceptor/orientee relationship. The Preceptor Survey revealed only 46% of preceptors had taken a preceptor education program. Barriers to being an effective preceptor were lack of self-confidence, not having enough time to spend with orientee, and nervousness. The preceptor voiced being pulled away to do other things and having too many patients to support the orientee. To develop critical thinking the curriculum for preceptor program was reformulated using eight evidence based concepts. A one-day experiential workshop used three high fidelity simulation labs and was piloted for two Medical Surgical units and four Critical Care units. Clinical Supervisors for each unit were engaged in this program to foster preceptor/orientee relationships by arranging appropriate patient load and schedules.

The one year orientee retention rate for this pilot program rose from 73%% to 92%. The first cohort of 70 preceptors successfully completed the pilot program where preceptors reported an increase of preceptor

knowledge and skills with a score of 3.4 on a 4 point Likert scale. Perceived self-efficacy was also noted. Orientees reported preceptors were competent and available. Coupled with the success was the intentional focus on matching preceptor/orientee schedules and creating a reasonable patient load to meet the need of the newly hired RN. Based on the success of this pilot preceptor program, the Council advocated for and received support to offer the program for all house-wide preceptors. This initial success of this nursing initiative shows considerable impact on the organization goal to retain competent nurses and to support leadership at the bedside.