How to precept a new nurse employee

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DOES THIS SOUND FAMILIAR? As a clinical RN, you’ve been working on a busy medical-surgical unit for 5 years. Your nurse manager has asked you to be a clinical nurse preceptor for a nurse who’s just been hired for your unit. The new employee has been an RN for 2 years but has never worked on a med-surg unit. Now that you’ve agreed to this career-enhancing assignment, you may not be sure how exactly to proceed.

Precepting nurses who are new to your unit can be challenging. This article describes strategies that will enhance the process and support your growth in this role as well as the growth of the nurse...
new to your unit. Precepting new graduate nurses is beyond the scope of this article.

**Start with confidence**
Remember that if you’ve been asked to become a clinical nurse preceptor, you’re a well-respected nurse with demonstrated competence and clinical skills. Precepting a new nurse is a great way to enhance your own clinical skills, improve your career-ladder options, and learn valuable coaching and precepting techniques.

Consider all of the nurses from whom you’ve learned so much; now is your chance to pay forward those gifts by serving as a resource for your facility and profession. Here are some processes you may use as you move forward within this new and exciting clinical nurse preceptor role. (For more information, see Resources for preceptors for postlicensure nurses.)

**Lay the foundation**
Encourage your facility to provide you with the following:
• current evidence-based preceptor/preceptee guidelines or policies that have been generated through a preceptor committee or a similar committee responsible for formulating and implementing such documents. (If your facility doesn’t have such a committee, now would be an excellent time to not only encourage its formation but to actively participate in it.) The performance expectations for clinical nurse preceptors need to be clearly defined.
• ongoing scheduled preceptor development meetings with nurse leaders and/or unit educators. Agenda topics might include legal and regulatory requirements for patient safety and quality care; teaching, coaching, and learning skills; preceptor and preceptee forms and documents; and communication strategies.1
• a thorough, well-developed, evidence-based new nurse orientation program with anticipated timelines.2
• a thorough, well-developed preceptor training program and/or external classes and courses designed to help you learn the clinical nurse preceptor role.

**Further preparation**
Initial steps you can take before assuming the preceptor role include learning all you can about being a clinical nurse preceptor. Resources could include quality texts and online courses and programs, which may be free or low cost. Conduct a literature search and read peer-reviewed nursing articles on precepting or adult learning strategies in journals and periodicals; many are excellent. Document your activities to share with your nurse manager.

In addition, consider these suggestions:
• Network with current and past clinical nurse preceptors at your facility. Ask for their suggestions and advice.
• Consult your state’s Nurse Practice Act and Board of Nursing staff for information and guidelines related to the clinical nurse preceptor role. Specifically review the legal aspects of delegation for inexperienced nurses.
• Carefully study your facility’s policies and procedures about precepting new employees. Understand what criteria will be used to evaluate your preceptee, when and how these evaluations will take place, how you should proceed if evaluations don’t meet expectations, and how competency is to be verified for each new skill or task.
• Review your own job description and job duties. This job list will help you organize and specify steps you will take to teach and coach this new employee.

**Along the way**
During the clinical nurse precepting experience, you’ll want to develop a professional working relationship with your preceptee. This relationship is grounded in mutual respect, appreciation, and ongoing communication. Because a professional connection with your preceptee will give you both an efficient, effective, and positive experience, develop and nurture the preceptor/preceptee relationship.3 Creating an environment that’s conducive to the teaching/learning process is consistent with adult learning theory and greatly enhances this relationship. In addition:
• Keep your own standards of practice high. Follow current, evidence-based...
practice requirements, not a “we’ve always done it this way” philosophy.

- Frequently share your expectations with your preceptee, as well as the required job description and job duties. Orient the new nurse to the unit and to the unique characteristics of your clinical setting, including the nursing culture.
- Attend and actively participate in the preceptor/preceptee meetings.
- Perform ongoing process and outcome face-to-face evaluations of your preceptee’s abilities to handle ever-more complex care situations.
- Objectively document your observations as well as your teaching, coaching, and facilitating strategies.
- Validate your preceptee’s competencies using your facility’s established guidelines and forms and comparing them to the job description on your unit.
- Implement teaching/learning strategies consistent with adult learning theory.
- Employ a learner-centered focus to your teaching strategies by first learning all you can about your preceptee’s learning style, needs, and expectations; this should be an ongoing process. Use a hands-on, problem-solving, learner-active approach instead of a learner-passive style. Adults learn better and retain more of what really matters when they actively participate in their own learning.
- Meet with your preceptee before and after each shift and on an ongoing basis as needed. Even short teaching/learning sessions will keep communication between you clear and your day’s precepting activities organized. Remember that constructive feedback is key, so privately give regular feedback that’s specific, positive, timely, and honest.

Being clear and specific is essential to the teaching/learning process. Ask open-ended questions. For example, before the performance of a complex task, ask, “What steps will you follow to accomplish this task?” Following the task, ask, “What went well? What would you do differently if given the chance? How were you able to maintain patient comfort and safety?” If any concerns surface, the preceptee should complete a written self-assessment of the situation and you should seek additional input from your nurse manager and other nurses working with the preceptee.
- Perform a formal written and oral evaluation of your preceptee as required, but no fewer than twice—for a midyear and final evaluation. Before these formal meetings, ask your preceptee to perform a written self-assessment, following the established criteria and job performance parameters.
- Provide chain-of-command information, including the sharing of any reports regarding concerns or issues.

**Mission accomplished**

After the formal preceptor/preceptee relationship has ended, reflect on and evaluate the entire process. Assess your skills as a preceptor and consider the significant contributions you’ve made. Continue to attend the preceptor meetings. Join any related policy and procedure committees, and share with these groups and your own nurse manager what went well, what might have been improved (especially if a facility-wide change is warranted, such as a new procedure or documentation form), and why. Continue to learn and grow as a clinical nurse preceptor by attending formal preceptor training classes and sessions.

Importantly, consider the personal growth you’ve achieved before your next preceptor assignment and congratulate yourself on a job well done!

**REFERENCES**


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