



**THE IMPACT OF PERCEPTION OF PRECEPTORSHIP IN NURSING: AN ARTICLE
REVIEW**

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Abstract

Preceptorship is a frequent practical education approach for new nurses, and opinions about it vary and originate from a variety of sources. The purpose of this study was to explore the effective qualities of nursing preceptorship. Methods: The outcomes of the article review were attained by selecting publications that explicitly connected to preceptorship as well as those that studied the most beneficial qualities linked with clinical precepting.

Keyword: Perception, Preceptorship, Nursing

Introduction

Preceptors must possess abilities that clinical nurses lack since the clinical learning setting is complicated. Preceptor training programs are essential for equipping them with the appropriate knowledge. Even more so, given that different countries demand authorization. (National League for Nursing, 2020). Though, there is no agreement on what topics preceptors should be taught.

Because of the critical function they perform, preceptors have received a lot of attention in recent decades. A substantial amount of research has been conducted, with the majority of it concentrating on medical practice instruction for student nurses at the scholar and in hospital settings. Precepting serves a variety of purposes in clinical practice education, including assisting students in integrating theory and practice; supporting pupils in the acquisition and knowledge application that involves critical and reflective thinking; and providing students with learning alternatives that enable them to integrate theory and practice (Ewertsson., 2017, Jokelainen et al., 2011), to give students with knowledge alternatives that enable them to integrate theory and practice. Precepting is a teaching style in which preceptors help students in achieving competency (Carlson et al., 2010; Haggman et al, 2007).

Clinical training is required at nursing and midwifery programs, allowing students to practice in real-life circumstances. Multiple co-morbidities and diseases, technical developments and therapies, technological and pharmacological constraints, and people management issues including lack of staff all contribute to a challenging clinical setting for registered nurses and trainees (World Health Organization, 2016a).



Because of the complexities and obligations associated with patient care, as well as the limitations of the clinical context, nurse practitioners have limited time to react to students' learning requirements, causing them to suffer in the clinical location. (Asirifi et al., 2019).

Clinical nursing education allows students to gain experience in a range of patient care settings, obtain proper supervision, and hone their clinical abilities. A nursing student is matched with a nurse practitioner instructor who is accountable for clinical guidance in a preceptorship program. Preceptors advise, model, and promote professional growth in nursing students to assist them enhance their clinical skills, competencies, and attitudes (Li, Su., 2014). Students learning experiences and clinical competence are influenced by preceptor competency levels. Preceptors, but in the other hand, usually lack teaching skills, expertise, leading to job insecurity and a lack of familiarity with clinical education approaches (Wu., 2016).

As a result, clinical teaching pedagogy training is recommended to help preceptors improve in their jobs. Innovative persisting education helps health-care workers advance professionally while fitting into their hectic schedules (Singapore Ministry of Health., 2016.).

The unique learning demands of health care workers in the clinical setting cannot be met only through technology. Nonetheless, blended learning is widely acknowledged as a viable option for providing a different learning style and promoting the integration of theory and practice (McCutcheon et al., 2018). The success of the preceptorship experience is dependent on preceptor preparedness (Luhanga, Dickieson, & Mossey, 2010; McClure & Black, 2013). Because clinical expertise does not always imply competency as a preceptor, physicians must undergo extensive and specific training to guarantee that they have the essential skills, information, and personality traits to fulfill the preceptor job (Luhanga et al., 2010; Nasser et al., 2011). The student or novice misses out on a successful learning experience when preceptors lack the skills and competencies to assist learning or properly communicate their knowledge (McClure & Black., 2013).

Because it takes on the character of teaching, the act of completing a technique with the goal of displaying it to pupils becomes a qualified activity. As a result of this predicament, nurses are constantly questioned about preceptorship and the competences required to practice it. As a result, disagreements and even pain are typical throughout this procedure' execution. Even nurses with a degree in teaching techniques have no guarantee of success when it comes to developing preceptorship activities. They must learn to reflect on their professional knowledge and abilities on a regular basis as part of an internal self-learning process. (Ferreira et al., 2018).

As a result, preceptors must recognize the importance of their involvement in students' education, both citizens and undergraduates. It is their obligation to oversee the growth of these prospective professionals, beginning with studying the course goals and participating in essential development activities. Preceptors should also focus on assisting and recognizing learning weaknesses, encouraging citizens and undergraduate students to actively participate, encouraging theoretic knowledge application in practical actions, involvement in activity preparation and preparation, and encouraging self-learning. Lastly, if required, they must seek out support from other instructors and instructors to address these pupils' potential deficiencies (Autonomo., 2015).



Review of the Literature

Legal and Ethical Behavior:

Ethics is aware of the moral principles such as right and wrong, as well as whatever is deemed acceptable or unacceptable in interpersonal behavior, and it reflects "ought" and "ought not" in interpersonal behavior (College & association of Registered nurses of Alberta. 2005). The RN Code of Ethics offers a framework for nurses to make ethical judgments and perform their public obligations, other health team members, and the professional. And though the code governs nurses' actions, it will not provide a way for determining priorities when ethics and values clash; nurses must make their own decisions in the end. Professional engagement necessitates a high level of accountability. For example, the Canadian Nurses Association Code of Ethics, is based on eight basic ideas that are essential to ethical nursing. Treatment that is safe, experienced, and ethical; privacy; equality; and responsibility are only a few of them (CNA, 2008).

The nursing profession's objective was to offer public with safety, efficient, and ethical nursing care (CAN., 2008; CARNA., 2005a). To provide safe client care and ethical, professional practice, nursing students, like registered nurses, must provide care in line with the Nursing Practice Standards (CARNA, 2005a). As well as the RN Code of Ethics (CAN., 2008). Students must also adhere to the general faculties of council's code of student behaviour, in addition to the academic guidelines and requirements provided in the course description, practise within the health care department's laws and regulations, and perform at the anticipated medical level outlined in their instructional goals and medical assessment forms (Faculty of Nursing, University of Alberta., 2004). As a result, student nurses, like RNs., are required to (a) deliver the best excellence of care to their patients, (b) practise within their degree of proficiency, and (c) tolerate errors and errors all reasonable measures to avoid or minimize any impairment that may follow from an unfavorable event (CNA, 2008, CARNA, 2005a). Nursing undergraduates must also recognize that they are responsible for their own education and that failure to do so may result in penalties. (Billings & Halstead., 2005; Phillips., 2002). The fact that all students and nurses must approach their profession with an ethical mindset is a major problem.

Role of the preceptor

The preceptor is traditionally thought of as an educator or instructor who assists preceptors in obtaining clinical knowledge and technical capacity. Preceptorship, according to Marks-Maran et al. (2013), gives newly graduated nurses a supervisory role as well as a protective function. Boyer (2008) highlights a preceptor's more concrete roles as a safety administrator and competency validator for their preceptors. A preceptor produces a practical nurse who demonstrates competence while doing safe practice as he or she nurtures clinical competence and builds a preceptee's confidence. Tracey and McGowan (2015) In a research done in the United Kingdom, it was shown that preceptors have a significant responsibility to be good role models by maintaining their knowledge and practice up to date (Quek, & Shorey., 2018). In addition to education and improvement, the empathy function of a preceptor is another role of a preceptor (Richards & Bowles., 2012; Wilson et al., 2013). When a preceptor first starts working in a clinical setting, this part of their profession matches to their psychological requirements. When a



preceptor takes time to carefully guide and orient a preceptee, the preceptor's interpersonal skills are put to use. (Wilson et al., 2013). The preceptor provides emotive, conceptual, and societal assistance as a socializer. (Hautala et al., 2007).

Despite the fact that the role of a mentor is challenging, several research findings have shown that a good mentorship can result in new nurse retention, lower turnover, and higher job satisfaction (Quek, & Shorey., 2018).

Preceptorship

Mentorship and preceptorship are widely used together to define the approach used to assist scholar nursing students in medical learning situations, according to the reviewed literature. Preceptorship offers short-term support at limited periods, Mentoring, on the other hand, is a long-term commitment, more prolonged, and close relationship (Hale, 2018). As a strategy, the preceptorship model may influence nursing students' learning in clinical placements, helping them to develop necessary caring traits and utilize situational knowledge (Lethale et al., 2019).

The capacity to provide students with learning opportunities, adequate supervision, All of these factors contribute to the learning environment's quality. (McSharry & Lathlean, 2017). The most essential factor impacting clinical learning, whether positively or negatively, there appears to be interaction between the instructor and the student, as well as senior nurses (Lawal et al., 2015; McSharry & Lathlean, 2017).

Relationship between preceptor and new nurse

The first influential component, according to Watson's Theory of Caring, is the preceptor's care, a positive connection between the preceptor and the novice nurse is characterized as. The preceptor's relationship with the brand-new nurse, according to Kelly and McAllister, has a favorable impact on the new nurse's transition to the workroom. If brand-new nurse have a solid relationship with their preceptor, they will be able to quickly adjust to the task. Psychosocial and interpersonal assistance are required for the new nurse. If the preceptor demonstrates compassionate conduct toward the new nurse, this support will be fulfilled. According to Watson's Theory of Human Caring, humans have psychological and interpersonal needs. Nurses moving from nursing students to professional nurses, who are apprehensive, afraid, or under pressure, require strong and compassionate connections (Kurniawan, 2019). The preceptor's compassionate behaviors develop a link between the new nurse and the preceptor. The preceptor's advice can help the new nurse's job satisfaction, work quality, and patient safety.

Positive interactions will boost rookie nurses' competence and confidence. New nurses' self-efficacy has an impact on their job performance and happiness (Kim et al., 2014). Nurses with a high level of self-efficacy are more able to adjust to their working environment. Self-efficacy is low in the majority of novice nurses, reducing the standard of nursing care. Also, the new nurse's self-efficiency has an influence on how she or he handles a crisis (Wilson, Byers. 2017).



Nurse performance and work satisfaction are influenced by self-efficacy. There is a relationship between nursing performance and self-efficacy (Judge et al., 2007). There is a relationship between self-efficacy and nurse job satisfaction, according to Wilson and Byers. The outcomes of this study demonstrate that having a high level of self-efficacy can help nurses be happier and more productive. New nurses may choose to quit if the nursing orientation period proves to be too difficult. Preceptor care and new nurse self-efficacy are crucial for enhancing nursing care quality, making new nurses feel like they belong, lowering stress, fear, and tension, and boosting nurse retention.

Factors that positively affect the relationship

Although some interpersonal features may act as a buffer, differences in the pairing may have detrimental consequences. Preceptor-preceptee traits like kindness, according to an Australian study, can assist preceptees cope. According to the same study, because of the healthcare system's complexity and outcome-driven structure, such attributes are missing in healthcare occupations like nursing. As a result, the needs of more vulnerable groups, such as freshly minted nurses, are overlooked. Another component that has come to light is empathy between the learner and the preceptee. The preceptor-preceptee connection helps when preceptors demonstrate empathy toward their preceptees. The effectiveness of preceptors' teaching tactics will improve, and preceptees would feel more supported, according to Kuroda et al. (2009), when they understand their preceptees' increased anxiety levels (Kelly & McAllister, 2013).

Poradzisz et al. (2012) looked at preceptor-preceptee psychological compatibility, and their findings revealed that a personality clash might impair preceptorship outcomes. Diverse personality types have different worldviews, and preceptor-preceptee pairs that fit these personality types are happier. They also stated that combining preceptees with diametrically different personalities might benefit them by exposing them to a range of working and learning environments. As a result, type-appropriate preparation and support can help all preceptees succeed.

Conclusion

A preceptor is an important person in nursing education, and crucial to have the right abilities and attributes to conduct a successful orientation process for nursing students in their clinical teaching and learning. Data on preceptor availability found that both training institutions had a relatively low preceptor populations when compared to prior research done in Northern America, which demonstrated that nurse and preceptor are accountable for the clinical education of a single student (Kaniaru et al., 2016).

In this study, the effects of legal and ethical conduct on the preceptor's role, the new nurse's preceptorship connection with the preceptor, and other factors that positively influence the relationship in the nursing sector are explored.

Preceptorship programs can also help to (a) increase the number of preceptors by improving their expertise, (b) nursing schools' teaching capacity should be improved, (c) boost the number of new nurses that join the workforce (Shermont & Krepcio., 2006).



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