



DR. SUSAN L. DAVIS, R.N.,
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COLLEGE OF NURSING

Sacred Heart University

Nurse Practitioner Preceptor Orientation

**Guiding the Next Generation of
Advanced Practice Nurses**



**"If you have knowledge, let others light their
candles in it."**

— Margaret Fuller



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Welcome to Sacred Heart University and the Davis and Henley College of Nursing

APRN Preceptor Orientation

Objectives of the Orientation

The purpose of this presentation is to provide an overview of the Dr. Susan L. Davis, RN, and Richard J. Henley College of Nursing (DHCON) and to outline the roles and responsibilities of faculty, students, preceptors, Sacred Heart University (SHU), the DHCON and clinical and course facility.

- Understand the role and responsibilities of an APRN preceptor
- Explore effective preceptor strategies
- Review expectations for preceptor-student collaboration
- Discuss resources and support available for preceptors



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Learning Outcomes

Upon successful completion of this orientation, preceptors will be able to:

- Articulate the roles and responsibilities of the key players in clinical preceptorship
- Serve as student role models through appropriate professional actions in clinical settings
- Support program curriculum with planned clinical experiences
- Facilitate appropriate and immersive clinical experiences for the APRN student
- Collaborate with appropriate SHU faculty during student clinical experiences



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What is Clinical Preceptorship?

"Clinical preceptorship involves contact with an experienced and competent role model and a means of building supportive one-to-one teaching and learning relationship. This relationship is short-term and aimed at assisting a newly qualified practitioner to adjust to their new role." (Mhango et al., 2021)

A preceptor:

- Is an experienced practitioner who provides supervision during clinical practice and has a deep interest in and commitment to our academic programs and demonstrates excellence in clinical practice and community service.
- Provides an invaluable piece of a student's clinical education.
- Facilitates the translation and application of theory to practice for students and learners.



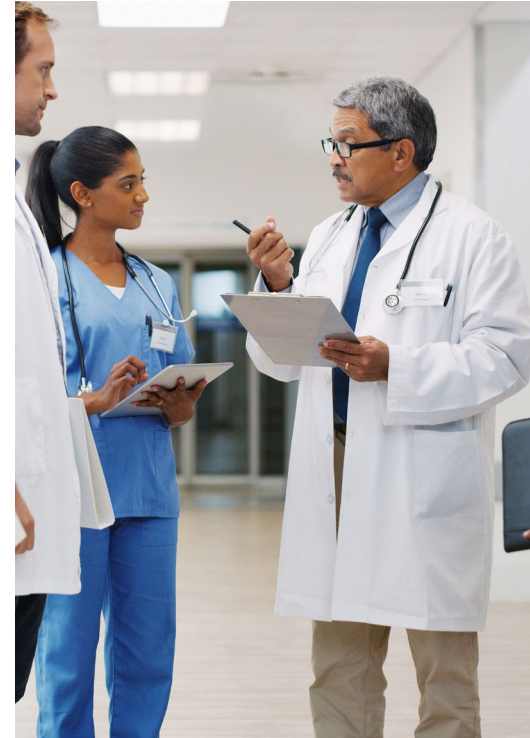
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What is Clinical Preceptorship?

Preceptors bridge the gap between theoretical learning and clinical practice. They guide students in meeting clinical objectives and delivering safe and quality patient care.

Preceptors educate nursing students through observation and direct instruction. Students are given immediate feedback as well as more formal assessments in the form of written evaluations.



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What are Clinical Preceptor Responsibilities?

- Bridge the gap between theory and actual practice
- Orient students to practice setting, organizational and institutional policies and key personnel
- Assist students in planning clinical assignments based on course objectives and student-articulated learning needs
- Provide supervision of student on a one-to-one clinical basis until both the student and preceptor deem direct supervision is no longer necessary
- Provide weekly feedback to students
- Review and co-sign all student documentation in clinical records
- Submit a Student Evaluation Form to Clinical Faculty Advisor, as requested
- Serves as a role model to nursing students
- Maintain an open line of communication with the student's advisor



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What are the Benefits of Being a SHU Preceptor?

Give back: Pay forward the dedication of your past preceptors! Preceptors shape nursing students' careers by teaching a new generation of nurses through unique knowledge and experiences.

Grow the nursing profession: Play a vital role in solving the nationwide nursing shortage. One reason why the U.S. lacks nurses is that nursing schools cannot enroll enough students. Preceptors enable nursing schools to expand student enrollment and play a direct role in growing the nursing profession.

Fulfill requirements for credential renewal: The certification and licensure renewal process for APRNs and physicians requires the completion of continuing education. You can obtain continuing education hours through preceptorship. For additional details please visit [AANP Certification](#) [ANCC Certification](#)

Enhance your resume: Preceptorship demonstrates your willingness to lead, commitment to lifelong learning and dedication to improving health care.

Sacred Heart University benefits: Reduced ticket pricing for shows, concerts and sporting events, access to SHU Fit Health & Wellness Center, access to Sacred Heart University Library resources



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Roles and Responsibilities of the Key Players in Clinical Preceptorship

As identified by The American Association of Colleges of Nursing (AACN)

Program Faculty

- Hold primary responsibility of meeting intended program outcomes per the institution's accreditation standards.
- Evaluate student outcomes via input from faculty, student and preceptor
- Evaluate the experience and setting of the clinical rotation
- Ensure that APRN students acquire content and competencies as delineated in the AACN Essentials and APRN role and population-focused competencies of the National Organization of Nurse Practitioner Faculty (NONPF), as required by certifying bodies
- Clearly communicate to the APRN Clinical Preceptor the level, the intended clinical progression, and outcome objectives for the student's clinical rotation to afford the student meaningful clinical experiences that will support the development of comfort in practice and clinical competency.
- Provide oversight of the design, implementation, and evaluation of clinical practice experiences that are aligned to student and program outcomes.
- Engage in regular communication with the APRN Clinical Preceptor to ensure the curriculum is being effectively delivered and student outcomes are met.



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Roles and Responsibilities of the Key Players in Clinical Preceptorship

As identified by The American Association of Colleges of Nursing (AACN)

APRN Student

- Primary responsibility for the ongoing communication with the program faculty and clinical preceptor in preparation for and throughout the clinical rotation
- Meet all institutional and clinical practice site health and regulatory requirements to include confidentiality, HIPPA, security clearance as required by clinical site
- Share their learning needs and objectives of the clinical experience that are approved by the program faculty
- Come prepared to clinical site with proper identification, dress/uniform, equipment
- Review any content needing further mastery following each clinical experience



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Roles and Responsibilities of the Key Players in Clinical Preceptorship

As identified by The American Association of Colleges of Nursing (AACN)

Clinical Preceptor

- Vital component of the clinical education process in creating a safe setting for the APRN student to gain experience and develop clinical competency to effectively manage the population consistent with the role for which they are being educated, e.g., appropriate across the life span management of patients for the family nurse practitioner student.
- The APRN clinical preceptor serves as a role model by incorporating evidence-based education best practices to ensure safe and effective patient outcomes.

[Clinical Preceptor Guide](#)



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Effective Preceptor Strategies to Provide Immersive Clinical Experiences for APRN Students

- Establish clear expectations
- Encourage active participation
- Provide constructive feedback
- Foster independence
- Model professionalism
- Promote reflective practice
- Facilitate learning opportunities
- Encourage self-directed learning
- Maintain open communication
- Be flexible and adaptive
- Seek feedback and continuous improvement

By implementing these strategies, APRN preceptors can effectively support the growth and development of aspiring advanced practice nurses, ultimately contributing to the advancement of the nursing profession as a whole!



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Challenges in Precepting

Practice based challenges to precepting may include

- Time constraints
- Balancing teaching and patient care
- Administrative burden
- Limited opportunity for continued education

Preceptors and their agencies can address **time constraints** and balance teaching and patient care challenges by implementing **scheduling strategies aimed at helping preceptors maintain productivity while precepting**

[NP clinical preceptors challenges and opportunities](#)



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Strategies to Save Preceptor Time

Include focused half days and wave scheduling

- **The focused half-day** is useful for inexperienced students or on busy clinic days. With this strategy, the preceptor selects one or two patients from the day's schedule and the student spends time before and after their patient arrives studying the chart and looking up material related to the focus of the day and the care of the patient.
- **With wave scheduling**, two or three patients are scheduled at the same time followed by a break of 10 to 15 minutes. The student sees one patient while the preceptor sees the others, and the break is used for seeing the student's patient and precepting.



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Challenges in Precepting

Student or curriculum-based challenges to precepting may include

- Varying levels of student preparedness
- Feedback delivery
- Managing difficult situations

To overcome the above precepting challenges, preceptors can:

- Communicate problems early to both student and faculty
- Set expectations for professional behaviors and professional dress
- Be respectful--focus on actions and preparation, not personality
- Provide both day to day feedback or interval evaluation
- Identify poor professional behavior or boundary breeches early and communicate expectations for change
- Reach out to assigned clinical advisor whenever necessary



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Student Clinical Evaluations

Evaluation should be a collaborative effort between the student and the preceptor. The student should develop and use personal learning objectives to discuss learning needs with the preceptor. Likewise, the preceptor can use these objectives, along with course objectives, professional standards/scope of practice, and standards of care to provide the student with constructive evaluative feedback.

Formative Evaluation

- Informal evaluation should occur throughout the clinical experience with the preceptor. This gives the student the opportunity to use the feedback in a positive manner in order to improve on performance.
- The preceptor should also elicit feedback from the student as to how the preceptor might improve in providing feedback to the student.

Midterm Evaluation: (Preceptor mid-semester evaluation)

- In the mid-point of the semester, the student will complete a self-evaluation in EValue which will get pushed to the preceptor for completion.
- The preceptor should complete the evaluation in EValue, review it with the student so the student can work on improvement in specific areas as needed prior to the end of the clinical rotation.

Summative Evaluation: (Preceptor final evaluation)

- At the end of the clinical experience, again the student will complete a self-evaluation in E-value which will get pushed to the preceptor for completion.
- The preceptor will provide a summary of the student's performance on the preceptor evaluation form.
- The preceptor and student should review this evaluation together at the end of the clinical experience.



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Techniques to Help in the Precepting Process

- Identify appropriate patients for practicum assignment
- Direct questioning
 - Fosters critical thinking skills and provides insight into the student's knowledge base and ability to problem solve in clinical situations.
 - Avoid situations that put the student on the spot in front of patients or staff, create stress, and/or make it difficult for student to concentrate. Commonly used strategies include the One- Minute and Five-Minute Preceptor Model and SNAPPS.

[Precepting 101: Teaching Strategies and Tips for Success for Preceptors](#)



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Techniques to Help in the Precepting Process

- **Think aloud**
 - Fosters critical thinking, clinical reasoning skills and enhances reflective thinking.
 - Encourages student to verbalize thoughts and rationale for making clinical decisions.
 - Helpful technique with all levels of learners but is particularly good for beginning students.
 - Useful in understanding how the student is processing information and making decisions.
- **Assign directed readings**
- **Coaching**
- **Procedures:** Preceptor provides verbal cues to student during performance of a procedure.
 - Facilitates increased opportunities for student involvement and skill building in procedures.



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Techniques To Help in the Precepting Process

- Observation
 - Preceptor and student can observe each other. Good to use with any level of student who is new to a site or preceptor. Often used with beginning students but beneficial for advanced students to do periodically.
- Case presentation
 - Reflects the student's ability to obtain complete histories, identify and report pertinent physical findings, generate relevant differential diagnoses, and develop appropriate management and follow-up plans.
 - Helps to identify gaps in student learning. Clarify format preceptor prefers for case presentations; may be different than format student knows.



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Video Resources for the Clinical Preceptor

*The following video links are vignettes provided complimentary from the **National Organization of Nurse Practitioner Faculties (NONPF)** sharing best practices for specific clinical experiences and interactions between preceptors and NP students in acute care, primary care, and specialty settings.*

1. [The One Minute Preceptor Model](#) (OMP) shows a preceptor and student interacting in a primary care setting. The preceptor demonstrates how to provide student feedback. The OMP teaching model provides five microskills to organize a learning experience for students in the clinical environment. For a more in-depth systematic review of the One Minute Preceptor Model, visit [The One Minute Preceptor Model](#).



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Video Resources for the Clinical Preceptor (continued)

2. [Preparing to Precept: Precepting in a Busy Clinic](#) This video provides strategies for pre-planning activities that maximize time.
3. [Working with the Overly Confident NP Student](#) This video shows a preceptor's interaction with an overly confident and confrontational NP student, demonstrating strategies for communicating expectations and providing constructive feedback.
4. [Working with the Overly Sensitive NP Student](#) This video shows a preceptor's interaction with an overly sensitive student. It illustrates different approaches to mentoring students in professional behavior and expectations and providing constructive feedback.



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Resources for the Clinical Preceptor

Here are several resources to guide you if you would like to learn more about development of a personal practice philosophy, formative and summative evaluations and to review techniques for constructive criticism for the adult learner in the clinical setting. The final resource is a direct link to the student success centers at SHU to which you can refer the student if you feel the student requires additional academic support.

[Giving Students Feedback in the Clinical Setting](#)

[Characteristics of Good Student Feedback](#)

[Effective Feedback and Formative Assessment](#)

[Preceptor Education Program for Health Care Professionals](#) - the DHCON recommends these modules: Giving and Receiving Informal Feedback, Understanding and Fostering Clinical Reasoning, and The Evaluation Process

[SHU Office of Student Advising & Success](#)

[AANP Recertification- preceptorship hours](#)

[ANCC Recertification- preceptorship hours](#)

[SHU Preceptor Portal](#)- DHCON's preceptor portal can provide additional resources for nurse practitioner preceptors



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Contact Us

Please visit the [Preceptor Portal](#) for additional resources.

For any student or precepting related concerns, please reach out to the student's clinical advisor.

References

Mhango, L., Jere, D., Msiska, G., Chorwe-Sungani, G., & Chirwa, E. (2021). The roles and experiences of preceptors in clinical teaching of undergraduate nursing and midwifery students in Malawi. *Malawi Medical Journal: The Journal of Medical Association of Malawi*, 33(Postgraduate Supplementary Iss), 35-39. <https://doi.org/10.4314/mmj.v33iS.7>



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