The Essential Preceptee Handbook

Your pocket companion for a successful preceptorship

DIANA SWIHART PHD, DMIN, MSN, APN CS, RN-BC

HCPro
a division of BLR
Dedication

To my beloved husband, Dr. Stan, who is still my greatest encourager and support; to my amazing son, Matthew, a brilliant and creative writer in his own genres; and, to my beautiful and gifted daughter-in-law, Gianna, an exceptional nurse serving so many through the American Red Cross. These three are my greatest blessings and the inspiration for all I do. I pray that each and every one of you reading this work have such wondrous blessings in your own lives and careers.

Special Dedication To those who, like my precious Gianna, have the passion and willingness to give back to others; those who understand the importance of giving. Judie Bopp best expressed the specialty of preceptoring and its impact on those who give and receive within the context of such relationships: “The capacity to watch over and guard the well-being of others is an important gift, and one that is learned with great difficulty. For it is one thing to see the situation others are in, but it is quite another to care enough about them to want to help, and yet another to know what to do.”
Preceptee Skills and Onboarding Register

Your name (preceptee):

Title:

Position:

Current Skills Acquisition Status:

- Student
- New graduate
- Newly qualified
- Intern
- Resident

Onboarding Status:

- **Organization orientation**
  Date initiated: __________________________
  Date Completed: _______________________

- **Service-specific orientation**
  Date initiated: __________________________
  Date Completed: _______________________

- **Preceptorship**
  Date initiated: __________________________
  Date Completed: _______________________

- **Competencies validation**
  Date initiated: __________________________
  Date Completed: _______________________

- **Internship/Residency**
  Date initiated: __________________________
  Date Completed: _______________________

Lead Preceptor name:

Title:

Position:

Educator: Date:

Manager/Supervisor: Date:
Contents

About the Author vii
Acknowledgements ix
Preface xi
Introduction 1
What is a Preceptorship? 3
The Preceptoring Process 5
Preceptorship Forms and Worksheets 13
Discovering Your Learning Style 21
Creating Your Portfolio 27
Working in Teams 31
Giving and Receiving Feedback 35
Performance Evaluation Process 39
Handling Reality Shock and Building Confidence 43
Evaluating Your Preceptor and Your Experience 47
Contacts 51
Notes 53
About the Author

Diana Swihart, PhD, DMin, MSN, APN CS, RN-BC

**Dr. Diana Swihart** enjoys many roles in her professional career, practicing in widely diverse clinical and nonclinical settings. She is a healthcare educator and consultant. An author, speaker, researcher, educator, and mentor, she holds graduate degrees in nursing and leadership and doctorates in theology, ministry, and ancient Near Eastern studies (archaeology). She has provided operational leadership for the preceptorships and shared governance processes for multiple organizations nationally and internationally and facilitated the application of evidence-based practice and nursing research. Dr. Swihart is a member of Sigma Theta Tau International, the National Organization of VA Nurses, the Veterans Educators Integrated Network, the VHA DoD Facility-Based Educators Community of Practice, and serves on several professional advisory boards, including the Forum for Shared Governance. She also served multiple terms as an American Nurses Credentialing Center (ANCC) Magnet® appraiser, as treasurer for the National Nursing Staff Development Organization (NNSDO [now the Association for Nursing Professional Development, ANPD]), as a member of the
About the Author

Dr. Swihart is the founder and CEO for the American Academy for Preceptor Advancement (www.preceptoracademy.com) and has published and spoken on a number of topics related to building effective preceptorships, nursing, shared governance, competency assessment, professional development (i.e., *Nursing Professional Development Review Course* for Gannett Education), and servant leadership, Magnet Recognition Program®, and research- and evidence-based practice at points of service locally, nationally, and internationally. She published *Shared Governance: A Practical Guide for Reshaping Professional Nursing Practice in 2006* and *Shared Governance: A Practical Approach to Transform Professional Nursing Practice, (2nd ed.*) in 2011. In 2008, her publication *Nurse Preceptor Program Builder: Tools for a Successful Preceptor Program* (2nd ed.) was selected as a foundational resource for the national *VHA RN Residency Program*.

Dr. Swihart’s training and experiences, including those in academia and staff development, give her a broad and balanced perspective that influences and colors all that she does as she creatively challenges and encourages others to embrace change, shift paradigms, and throw away *the box*. 
Acknowledgements

Every work, regardless of scope and size, is completed only with the help and inspiration of others. My utmost appreciation goes to my beloved family for their constant support and encouragement, their unwavering belief in me.

I would also like to thank the preceptors, those clinicians, educators, and nursing professional development and staff development specialists whose unfailing commitment have provided a legacy of lived experiences in preceptoring and mentoring through transformational leadership to all those they serve.

Finally, I would also like to acknowledge those speakers and teachers who have contributed their ideas, lessons learned, and thoughts through the countless classes, seminars, and lectures I have attended over the years. I write from their influence and want to recognize their contributions, though their names are too numerous to list.

—Dr. Diana Swihart
Congratulations! You have become a preceptee! Somewhere in the context of your orientation or competency validation process, you were introduced to at least one person who will be your preceptor. If you are very fortunate, your preceptorship is part of a formal program to introduce you to the intricacies of your new role, responsibilities, and accountabilities within academia, a new workplace, or both.

However, the role of the preceptee has some unique and intrinsic complexities and is not one to be accepted lightly. Preceptors provide practical and pragmatic support, guiding new employees, new graduates, and students through the onboarding and competency validation processes. As a preceptee, you have the opportunity to help shape your experiences in positive and creative ways. But to do that successfully, you need some tools and information. For example:

- Will you have only one preceptor or a team of preceptors during your preceptorship?
- What do you want to know about your primary preceptor before and while building your relationship with him or her?
Has your primary preceptor ever worked with preceptees (students, new employees, newly qualified, or employees transitioning into new roles) before?

What knowledge, skills, and abilities does your preceptor bring to the preceptoring relationship?

What happens if you and your primary preceptor are not a good fit—if the relationship does not work for either or both of you?

What training did your preceptor receive to prepare him or her for this role?

Does your preceptor have a certificate or certification in preceptoring?

The Essential Handbook for Preceptees is a compilation of tools and ideas to help you successfully participate in a preceptored relationship as you explore your studies and new workplace. There are guides sharing with you how adults learn, what a climate of learning looks like, and what you might expect during the competency validation process. You can explore ways for providing feedback positively and constructively and evaluating your preceptor(s) and preceptorship.

It is also important for you to understand and confront reality shock and prepare for the “letting go” of your preceptor as you transition into practice. This can be especially difficult for both you and your preceptor if you have developed a deep respect and trust—perhaps even a mutual admiration—for one another.

This handbook features a number of aids you can use as you grow and develop your knowledge, skills, and abilities through the specialty of preceptoring. These tools can support your work as you
participate in a partnership with your preceptor, leadership, educators, interprofessional colleagues, and interdisciplinary team members and will ensure you are prepared to confidently engage in safe, competent practice at school and at work.

The information presented in this preceptee handbook reflects the research and opinions of the author, contributors, and advisors. Because of ongoing research and improvements in preceptoring, information technology, and education, this information, these tools, and their applications are constantly shifting, changing, and evolving as preceptoring continues to grow as a specialty role in healthcare, leadership, and other services and disciplines.

It is the author’s sincere hope you will add this work to your toolbox and consider how you, too, might contribute to this growing body of knowledge and expertise through your own practice and career development through preceptoring. And when you are ready to give back, you, too, will become a qualified preceptor and help shape the careers of those who come along beside you.
Introduction

Learning is a continuous, lifelong journey of discovery. *Preceptors and mentors embrace your learning by providing you with experiences at multiple junctures of your onboarding and transition to service within the context of a structured preceptorship.*

Why is it so important to have a preceptor? Workplace and practice environments are more complex and demanding than ever before, especially in health care. Employees at all levels of an organization benefit from guidance and support in the midst of shifting policy decisions, fluctuating staff skill mixtures, increasing regulatory sanctions and audits, ever-present education reforms, and information overload. However, perhaps the most basic and all-encompassing reason is that it works.

So often, two peers can solve difficulties they encounter in their work much better together than with an educator or manager—no matter how expert or experienced a manager may be. In many ways, the working preceptor can help you as a new employee, one who is newly qualified, or during your time as a student more than an educator or a peer. The problem or issue you want the preceptor to explain is often one he or she has recently handled. Staff members with little or no experience as preceptors, like those who have not been trained to precept others, may see a multitude of
2 Introduction

other problems, limitations, needs, and issues that “ought” to concern you as a preceptee, but do not. They also see the problem or situation in such a completely different light they may miss your needs altogether.

Use this handbook as a roadmap. It will provide you with the tools you need to complete your preceptorship in partnership with your preceptor and act as a resource you can use as you transition into your new position. You will increase your personal and professional growth and ease into professional practice.

As you begin, establish a mutually respectful relationship with your preceptor; review the objectives, duration, and termination of the program; and address the expectations of the preceptorship. This is an excellent time to consider creating a professional portfolio if you do not already have one. If you do have a portfolio, review it with your preceptor and discuss how to add to it during the onboarding and competency validation processes.
**What is a preceptorship?**

A *preceptorship* is a formal agreement between or among individuals to engage in a time-limited apprenticeship generally reliant on proximity. It is a relationship constructed to partner seasoned, experienced employees (preceptors) with students, the newly-qualified or new hires (preceptees) to facilitate their orientation and integration into their new roles and responsibilities in their work environments.

**Key roles and definitions**

*Coaches* advise and instruct preceptees primarily on job-related activities and tasks—in other words, on how to perform and prioritize technical tasks, documentation, employee and safety issues, organizational relationships and etiquette, professional work habits, as well as how to organize and delegate work assignments and duties.

*Mentors* encourage *mentees* (recipients of mentoring) to move beyond the status quo and help them find groundbreaking professional opportunities, such as exploring new leadership roles, accepting speaking or writing engagements, or acquiring advanced learning experiences.
4 What is a preceptorship?

Preceptors are employees who generally have a wealth of work experience and knowledge of the organization and service areas, are dedicated to helping other employees advance in their careers, provide feedback on preceptees’ strengths and weaknesses, and offer suggestions for improvement in tasks and behaviors. Preceptors help preceptees balance tasks with work issues (e.g., time management, accepting new responsibilities, adjusting to a new work environment and team, stress management, and how to give and receive constructive criticism).
The preceptoring process

During onboarding, your preceptor will help you assess and verify your service- and work-specific competencies. He or she will provide ongoing support and encouragement as you, as a preceptee, transition to your new roles or position. Eventually, the preceptorship may evolve into a mentorship as you mature into your new roles, responsibilities, and accountabilities.

Preceptors provide you with leadership, guidance, and support; model desired skills and behaviors identified by the organization and service; listen to you and communicate with empathy and patience; provide you with organization and service information; and, manage your orientation and competencies during the preceptorship.

Onboarding and competency processes

Organizational socialization, commonly known as onboarding, describes the global process of assimilating preceptees into an organization. It includes three phases: (a) pre-hire, (b) orientation, and (c) transition to service as you, the preceptee, acquire the necessary knowledge, skills, attitudes, and behaviors to become a successful member of the new organization and service.
The preceptoring process

This handbook is designed to support you through the second and third phases of onboarding. During this time, you will complete competency assessments and verifications for whatever competencies (knowledge, skills, and abilities) you need to function in your new roles and service settings.

Your preceptor will help you develop each of those work-specific competencies. He or she will evaluate your progress and provide feedback to help you improve your knowledge and skills. You will develop professionalism while entering your new roles, throughout the critical developmental transition phases of onboarding and entry into service.

Validating competency

Your competency is the primary goal of the preceptoring process. Your preceptor will have the option of using different types of competency verification methods, one or more of which will complement the unique ways that you access and process information. Competency validation methods include the following:

1. *Tests/exams*—measure cognitive skills and knowledge only; used for competencies that require the retention or understanding of information (e.g., written tests, quizzes, oral exams, surveys, worksheets, calculation tests, crossword puzzle tests, some word games)

2. *Return demonstrations*—measure technical skills only (e.g., CPR, ACLS, use of new equipment, skills checklists, direct observation)

3. *Evidence of daily work*—measures skills in the technical domain; assesses the actions demonstrated on a daily basis to do the job (e.g., verify ability to use bar code medication
administration [BCMA] by observing the final product; medications are given and entered correctly into the BCMA system during daily work; direct observation)

4. **Case studies**—measure critical thinking skills (e.g., performance-based interviews)

5. **Exemplars**—measure both critical thinking skills and interpersonal skills that are difficult/impossible to observe (e.g., grief counseling, customer service, learning on the fly, professionalism)

6. **Peer reviews**—measure both critical thinking skills and interpersonal skills (e.g., professionalism, 360-degree assessments, customer service)

7. **Self-assessments**—measure critical thinking skills associated with values, beliefs, myths, and assumptions; assess the affective domain of learning (e.g., coping with change, pain management, career development)

8. **Discussion/reflection groups**—measure critical thinking skills. When linked with mock events, may measure technical and interpersonal skills (e.g., debriefing after a code or crisis intervention, discussions using case studies or exemplars, root cause analysis after a sentinel event)

9. **Presentations**—measure knowledge and understanding (e.g., debriefings, grand rounds, shift reports, journal clubs, review boards, inservices)

10. **Mock events/surveys**—assess responses in daily work or practice; reflect individual performance; important to debrief after mock events (MEs) (e.g., simulations, mock
The preceptoring process

codes, simulated disaster drills or other emergency situations, mock surveys for accreditation agencies, mock surveys of proper equipment use and maintenance)

11. Quality improvement monitors—measure any of the three skill domains (cognitive, affective, psychomotor) anytime they reflect individual performance; check compliance with policies and protocols; benchmark desired outcomes and achievement of those outcomes (e.g., chart/documentation audits, medical records, compliance with policies and protocols, appropriate equipment setup/teardown/cleanup)

Competency-based orientations

Competency-based orientations (CBO) initiate competency assessment and verification processes for you during the orientation. CBOs give clear guidelines regarding competency expectations and can decrease the amount of time spent in orientation if you are a more experienced or skilled preceptee (e.g., if you have worked in the organization or service-specific department but recently transferred from another department or work area). Conversely, if you need more time, this can be negotiated with your preceptor.

You can review the competency assessment and verification form used by your organization (see Figure 1 for a sample form) with your preceptor to receive timely feedback on your progress. With this feedback, your preceptor can remediate or restructure your work experiences to address any deficits, problem areas, or competencies you would like to improve or strengthen, for example.

The three important elements of CBOs are as follow:

1. Technical competence. This is the most familiar and objective skill domain. Elements are traditionally found on checklists,
## Position-specific competencies including technical skills

Date of initial assessment: __________________ Name: ___________________ Service/Section: _____________ Position: ___________________

**Verification:** ME/S – Mock event/Survey; T – Test/Exam; SCL – Skills checklist; Sim – Simulation; Pres – Presentations/Rounds; EF – Employee feedback/Self-assessment; PR – Peer review; RD – Return demonstration; P&P – Policy & procedure review; EDW – Evidence of daily work; CS – Case studies; EX – Exemplars; QI – QI monitors; D/RG – Discussion/Reflection group

**Competency level:** E – Education/Training needed; S – Competent - Self-directed education/training may be desired; C – Competent through education/training/experience verification

<table>
<thead>
<tr>
<th>COMPETENCY</th>
<th>DESCRIPTION OF COMPETENCY (BEHAVIORS)</th>
<th>Competency Level</th>
<th>Demonstrated Competency</th>
<th>Competency verifier’s initials</th>
<th>COMMENTS/ EMPLOYEE FEEDBACK</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>E</td>
<td>S</td>
<td>C</td>
<td>Verification methods</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Overall competency level (circle one):  E  S  C

- E – Education/Training needed
- S – Competent - Self-directed education/training may be desired
- C – Competent through education/training/experience verification

Employee Signature: ___________________ Date: ___________ Verifiers’ Signatures: ___________________ Date: ___________
Preceptors’ Signatures: ___________________ Date: ___________ Manager/Supervisor Signature: ___________________ Date: ___________
and competency is measured by direct observation of psychomotor tasks. Efficiency components are often added to assess advanced competency. Some technical competencies that your preceptor may choose to evaluate include:

- Manages equipment properly.
- Verifies accuracy of data transfer.
- Identifies problematic technology issues and takes appropriate actions.

2. *Interpersonal competence*. This skill domain refers to the effective use of interpersonal communication when working with others. These competencies are often found on checklists and measured by direct observation of interactions and behaviors that consistently convey caring and courteous attitudes. Your preceptor may consider the following interpersonal competencies during your assessment:

- Greets staff with warmth and genuineness.
- Calls the preceptee by his or her preferred name.
- Displays proper phone etiquette.
- Anticipates preceptee anxiety and offers information, reassurance, and comfort.
- Works cooperatively with team members.

3. *Critical thinking (or decision-making) competence*. This skill domain addresses your ability to apply principles of critical thinking, problem solving, and decision-making to evidence-based practice. To measure competencies in this skill domain, preceptors must be more creative in their verification methods. Competencies are predicated on your abilities to recognize problems, identify alternative actions, anticipate outcomes, and make choices based on the most current best
practices. Asking questions helps you get beneath the surface of problems, generate more questions, and increase the number of possible solutions. Your preceptor may look for these indicators of your critical thinking competency:

- Asks “why” questions.
- Looks for patterns and trends; is open to possibilities.
- Views events as part of a larger whole.
- Uses intuition and “hunches” when problem solving.
- Seeks advice.

### Questions to Promote Critical Thinking

<table>
<thead>
<tr>
<th>Your preceptorship provides you with a safe environment during orientation for exploring the challenging problems found in complex organization systems. Ask yourself these guided questions to stimulate critical thinking and enhance your decision-making skills:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- How will I prioritize my work today?</td>
</tr>
<tr>
<td>- What alternative measures would work in this situation?</td>
</tr>
<tr>
<td>- What else could be causing my equipment problems?</td>
</tr>
<tr>
<td>- How will I determine the effectiveness of that intervention?</td>
</tr>
<tr>
<td>- How will I document my outcomes related to that action?</td>
</tr>
</tbody>
</table>

It is important for you to know yourself to get the most out of your preceptorship. You and your preceptor frequently need to check your perceptions before making final decisions regarding competency, levels of knowledge, skills, and abilities in any skill domain, to ensure objectivity rather than subjectivity. Your preceptor uses adult learning principles and an understanding of learning styles and of multiple intelligences to determine the best way to meet your needs.

The orientation and competency validation processes are bound up in the policies and protocols of the organization. Your preceptor
The preceptoring process will build your preceptorship tasks and activities around these protocols and will incorporate the forms and resources of the facility and the nursing service. This will increase your ability to successfully transition into following the protocols and processes of the organization through onboarding, competency assessment, and consistent feedback.
The Essential Preceptee Handbook is the perfect guide for new staff members during a preceptorship and beyond. In this invaluable and compact handbook, preceptees will find tools and information they need to become effective and competent members of staff, including techniques for:

- applying evidence-based practice and critical-thinking behaviors
- developing key competencies
- dealing with reality shock
- working in teams
- communicating and providing effective feedback
- transitioning to service

The Essential Preceptee Handbook is the perfect onboarding companion for new preceptees.

Diana Swihart, PhD, DMin, MSN, APN CS, RN-BC is an internationally-known speaker, author, educator, and consultant on topics related to preceptors, shared governance, competency assessment, professional development, servant and transformational leadership, professional research and evidence-based practice. Dr. Swihart is the CEO for the American Academy for Preceptor Advancement.