

2018

Preceptor Class Evaluation & Redesign

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Recommended Citation

Schulz, Katherine A., "Preceptor Class Evaluation & Redesign" (2018). *Nursing Posters*. 101.
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Preceptor Class Evaluation & Redesign

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Background & Purpose

In August 2016, Education Committee identified need to comprehensively evaluate Preceptor Class for curriculum structure, content, teaching modalities, etc. Preceptor Class Subgroup was formed to lead evaluation efforts.

Preceptor Class Subgroup

Katie Schulz, MSN, RN-BC, Educator, Med 1 (co-lead)
 Carla Olson, BSN, RN-BC, CMSRN, Educator, Med 2/MPCU (co-lead)
 Jolene Archer, BSN, RN, CCRN, Clinical RN, ICU
 Roland Brummer, RN, OCN, Clinical RN, Medical & Oncology (retired)
 Sarah Dingmann, MSN, RN, Clinical RN, MPCU
 Lora Gullette, MSN, RN, Graduate/Intern & Student Coordinator
 Mackenzie Hauer, MSN, RN, CMSRN, Educator, CCH - Monticello/
 Simulation
 Jessica Thoma, MSN, RN-BC, Educator, CCU/CVTU

Role	Description
Buddy	• Welcoming - in others • Explain the "You"
Teacher	• Assess, plan,...
Evaluator	• Does new employee know what they're doing? • Performance concerns?
Role Model	• Lead by example • They watch you!

References

Bengtsson, M., Carlson, E. (2015). Knowledge and skills needed to improve as a preceptor. *BMC Nursing*, 16(14), 51-56.
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 Guerorguieva, V., et al. (2016). Working towards a competency-based preceptor development program. *Journal of Continuing Ed in Nursing*, 47(9), 427-432.
 Martensson, G., Lofmark, A., & Mamhidir, A.G. (2016). Preceptors' reflections on their educational role before and after a preceptor preparation course. *Nurse Education in Practice*, 19, 1-6.

	Pre-2017 Preceptor Class	Evaluation	2017 Preceptor Class Changes
Target Audience	<ul style="list-style-type: none"> - Any CCH employee - Content was general and examples/stories shared were non-patient care related 	<ul style="list-style-type: none"> - Approximately 96% of attendees from past 2 years were patient care staff. Highest non-patient care dept usage was Patient Access. 	<ul style="list-style-type: none"> - All CCH employees are welcome to attend - Given the small percentage of non-patient care staff in attendance, stories and examples shared by instructors can be patient care related
Frequency, Length, & Teaching Modalities	<ul style="list-style-type: none"> - Every other month 0900 - 1300 - Waiting list often filled with 10+ staff (except summer months) - Over past 2 years, summer classes had not filled to capacity - 4 hour total class <ul style="list-style-type: none"> • 3 hour lecture • 1 hour department-specific time 	<ul style="list-style-type: none"> - No evening class times available - Four hour class convenient for scheduling - Educators indicated the need for additional classes via Survey Monkey (Feb 2017) - Instructors commonly noted department-specific time did not last the full hour - Subgroup saw opportunity to focus on learner-centered teaching modalities 	<ul style="list-style-type: none"> - Classes remain 4 hours in length - Evening classes added 1300 – 1900 - Department-specific time was reduced to 30 minutes to allow more time in class for activity - Classes held 10 months each calendar year, skipping June and July - Minimal lecture, instead focusing on small/large group discussion and activities
Instructors	<ul style="list-style-type: none"> - 2 Educators scheduled (one Educator "back-up") - 8 Educators routinely taught class 	<ul style="list-style-type: none"> - Subgroup saw value including a clinical preceptor as an instructor to provide real-life examples/ perspective - By teaching class, clinical staff develop professionally and gain clinical ladder points 	<ul style="list-style-type: none"> - Preceptor Class taught by one Educator and one clinical preceptor - Two consistent Educator "back-up" class - Currently about 9 Educators and 9 clinical preceptors teach class
Objective, Outcome, & Topics of Preceptor Class	<p>No outcome statement identified.</p> <p>Objectives:</p> <ul style="list-style-type: none"> - Describe how precepting can benefit everyone, especially the preceptor and new employee. - Identify methods to welcome employees and provide a professional learning environment. <p>Content:</p> <ul style="list-style-type: none"> - Role of Preceptor (60 min) - Orientation checklists (30 min) - Learning styles & Gregoric (90 min) - Generational differences (60 min) - Department expectations (60 min) 	<ul style="list-style-type: none"> - Lack of outcome statement and clear objectives made measurement of success - Objectives lacked focus and did not encompass content covered - Subgroup surveyed Nursing Directors (Nov 2016) and Education Committee (Feb 2017). Identified gap in giving feedback, conflict management, and critical thinking - Extensive literature review completed and identified gaps in current content related to feedback and critical thinking development - Subgroup saw benefit in adding concepts from Our Best Begins with Me (OBBWM) which align with precepting concepts, such as shadows, appreciative feedback, filters, and mood elevator 	<p>Outcome: Learners will self-report ability to apply new knowledge to their practice.</p> <p>Objectives: Learner will be able to...</p> <ul style="list-style-type: none"> - Describe how learning style, behavioral style, and generation differences may impact precepting. - Apply feedback and conflict resolution communication strategies to a simulated preceptor scenario. - Identify strategies to foster critical thinking. - Apply new knowledge to unit or department expectations or preceptors. <p>Content now includes OBBWM concepts:</p> <ul style="list-style-type: none"> - Relationship Building (90 min) - Communication (60 min) - Critical thinking development & competency evaluation (30 min) - Role play / Simulation (30 min) - Department expectations (30 min)