

Optimizing Clinical Preceptorship Outcome: A Call to Action for Nursing Education Leaders

Kimberly N. Dunker, PhD, DNP, RN, CNE, CNECl, PHN



Nursing administrators for pre-licensure nursing programs are responsible for ensuring that all necessary resources are available to support student success. This encompasses not only the faculty members who teach students in various courses but also preceptors who play a vital role in guiding students during their clinical rotations, recognizing that the combination of teaching and mentorship is crucial for developing knowledge and skills and for acclimation to clinical practice. Ultimately, a Dean, Director, or Chair of the program must know whether the preceptor-student relationship is effective and whether the students have received the training they need in the culminating synthesis clinical course.

Significance of Preceptors to Nursing

Nationally, there is a projected shortage of 78,610 full-time equivalent (FTE) registered nurses (RNs) in 2025 and 63,720 FTE RNs in 2030. The most recent pandemic, COVID-19, significantly impacted the nursing profession. To meet the increased demand for nurses,

The literature extensively documents clinical preceptorships as an effective strategy for supporting students, new graduates, and registered nurses (RNs) in their transition into health care roles. However, significant challenges remain in ensuring preceptors receive adequate training and are appropriately matched with preceptees to foster successful learning relationships. Health care facilities work to identify qualified preceptors, provide comprehensive training, and confirm preceptors' willingness to serve in this capacity. Similarly, academic institutions must verify that preceptor selection meets the Board of Nursing criteria and that outcomes are properly documented.

Despite these institutional efforts, a critical gap persists; students are frequently placed in clinical rotations with minimal input regarding their preferences, learning needs, or compatibility with their assigned preceptors. This disconnect warrants closer examination and discussion within our academic community.

Keywords: Preceptorship, training, senior nursing students, student outcomes

nursing schools across the country are rising to the challenge by admitting students at maximum capacity. However, enrollment statistics in the United States confirm that students seeking admission to nursing school find it challenging. Nursing school programs generally have a competitive admissions process; in 2022, 66,262 qualified applicants were denied admission to pre-licensure nursing programs in the United States (AACN 2023). Reasons cited include limited spots due to a lack of clinical practicum placements, faculty vacancies, and a shortage of preceptors. As nursing schools seek to enroll more students, these limitations are notable barriers to growth, further exacerbating the nursing shortage. Interestingly, one of the most-cited causes of the nursing shortage is a lack of qualified nursing faculty, with 1,637 faculty vacancies across baccalaureate and graduate programs nationwide (American Association of Colleges

of Nursing [AACN], 2022). Not having a sufficient number of qualified faculty members greatly impacts the student experience and the ability to admit more students.

From the college's perspective, nursing administrators are responsible for ensuring the quality of the nursing program and maintaining enrollment numbers. This includes having enough physical and co-curricular resources to support the nursing students. Additionally, using the preceptorship model as an experiential teaching strategy to support nursing education enables ongoing preparation despite the challenges posed by the nursing faculty shortage. Using a triad model, students interact with clinical nursing preceptors, the nursing lead clinical instructor, and the lead nursing theory professor. Preceptorship often occurs during the final practicum clinical experience, in which the student works one-on-one with a hospital nurse to

Kimberly Dunker, PhD, DNP, RN, CNE, CNECl, PHN, is the MS/DNP Program Director, Loma Linda University, Loma Linda, CA.

learn the nurse's role. During the preceptorship, the student nurse becomes immersed in the professional role, making the preceptor-student relationship critical to students' success as they complete their pre-licensure program.

A positive relationship between a student and their preceptor can enhance the student's learning experience and deepen their understanding of their professional role. Conversely, when this relationship turns negative, it can greatly hinder a student's ability to learn effectively. Instances where problems arise in the preceptor-student relationship can have detrimental effects on student learning outcomes. This includes potential delays in graduation or even failure to complete courses successfully. Due to the inherent power dynamics involved in these relationships, students often feel powerless and unsure about advocating for themselves when facing difficulties with a preceptor. Therefore, seeking feedback from students early on during their rotations is necessary to ensure they receive adequate support during their final clinical experience.

As nursing education continues to evolve, clinical nurse preceptors have become an essential component of nursing program training; therefore, it is critical to understand their role and how to ensure they are supported, as this directly affects the student's clinical experience. The student's experience during the preceptorship affects the success of new graduates as they enter the workforce and is directly linked to employer satisfaction with newly graduated nurses. When nursing programs successfully train and graduate cohorts to their approved capacity, retention and graduation rates improve, thereby positively impacting the overall nursing shortage.

Preceptors' Extension of Nursing Education

Nursing preceptors have become an important part of the training that nursing students receive while in school. They facilitate preparation at the clinical site and provide students with education on the nurse's role and how to function within the health care environment. Because nursing is an experiential, technical profession, education in clinical practice is an essential component of the learning experience and vital to training. The preceptor is not only a role model but also a mentor who supports the student's transition as they begin to socialize into health care while facilitating the

application of theory to practice (Bartlett et al., 2020).

The literature supports that a critical component of the student nurses' training includes a preceptor as part of an educational team in which the preceptor becomes a vital part of helping the student attain the necessary knowledge, skills, and attitudes to meet the learning outcomes of the clinical experience (Ward & McComb, 2017). However, these nurses, although experts in their field, may have little to no formal training in precepting nursing students (Laari et al., 2021; Weidman, 2013). Often, health care organizations train preceptors to orient newly hired or newly graduated nurses. In doing so, the preceptor's role is viewed through a narrow lens, often limiting the student's experience.

In contrast to the learning needs of the newly graduated nurse orienting to the hospital environment, student learning is vastly different, and the preparation of the preceptor for this role must be designed specifically for this responsibility (Cusack et al., 2020; McLeod et al., 2021). For this reason, it is important to understand preceptors' needs to support them in this role (Hong & Yoon, 2021). Ultimately, the preceptor is responsible for student learning in the clinical environment, working to help students achieve identified learning outcomes.

The role preceptors have within the nursing educational unit is an important aspect of understanding the impact on nursing education, as well as the influence on the global shortage of nurses and nursing educators, which is well documented in the nursing literature (AACN, 2022; Scheffler & Arnold, 2019; WHO, 2020). Although several different strategies are being undertaken by organizations to train their nurses to be preceptors (Blegen et al., 2015; Chen et al., 2021; Dunker, 2024; Harper et al., 2021), the issue of how to effectively support expert nurse preceptors in their role to work with pre-licensure nursing students is variable in the literature. Furthermore, students' experiences of their interactions and training under a preceptor have not been studied beyond traditional course evaluations, anecdotal findings, and graduate exit surveys for nursing accreditation.

Impact of Preceptor-Student Relationship on Student Learning

Collaborative work among a preceptor, a student, and the nursing faculty ideally leads to a positive outcome. In the

end, the goals for the student are to enhance knowledge acquisition, further develop clinical skills, and increase confidence in the final clinical course experience. Ultimately, better preparing senior nursing students as they complete their program and transition to practice helps them to improve their critical thinking and decision-making as newly licensed nurses (Warren et al., 2023; Ulrich, 2024). The impact of the preceptorship is significant, as it allows the student mentee to gain a greater understanding of their professional role and responsibilities as a new nurse.

Although there are many positive effects of the preceptorship experience, there are also adverse effects that can affect student learning outcomes. This includes the lack of support and guidance from the preceptor to the preceptee, which can lead to confusion or mistakes. Unfortunately, if the preceptor is not acclimated to their role and oriented to the responsibilities within their scope of practice, they may experience frustration and stress, leading to job dissatisfaction and/or burnout. One of the most important strategies for preventing preceptor burnout is to provide a high-quality onboarding process and ensure that both the preceptor and preceptee are fully engaged from the beginning (Bodine, 2018). Furthermore, the nurse manager or educator chooses a preceptor because they possess characteristics that work well in this type of relationship (L'Ecuyer et al., 2018); however, this often results in their repeated use, which can cause burnout and exhaustion (Bodine, 2018). The manager must be involved in supporting their nursing preceptors and be aware of the signs of burnout.

Preceptors assume additional responsibilities and are challenged to care for patients safely and efficiently while effectively teaching their preceptee (Hansen, 2021; Valizadeh et al., 2016). When preceptors are not given adequate resources and clear information during onboarding, they are more likely to report feelings of abandonment and a lack of support, which are often cited as leading causes of burnout (Bodine, 2018). Additionally, when the organization repeatedly assigns the same nurse as a preceptor, it can lead to burnout and undermine the preceptorship experience.

For this reason, it is important to address burnout among preceptors in the hospital setting. The negative outcomes of preceptor burnout can adversely affect both the preceptor and the student, leading to decreased motivation and self-esteem. This can impact not

only the overall student learning experience but also the student's ability to successfully meet the experience's outcomes. This includes failure to complete the preceptorship course or having to repeat it. Lastly, the quality and safety of the patients cared for by the preceptor and student can be adversely affected if the preceptor-student relationship is not well matched. These adverse effects are counterintuitive and not conducive to the goal of retaining nursing staff or to the growth and development of new graduates to address the current nursing shortage.

Theoretical Frameworks to Understand Preceptorship

Multiple conceptual frameworks related to preceptor-student relationships in nursing education provide comprehensive lenses for examination, including Watson's Theory of Caring, Knowles' Adult Learning Theory (1980), and Benner's Novice-to-Expert Theory. Watson's Theory of Caring is essential because caring preceptors foster holistic, supportive environments in which students feel empowered to learn (Benner, 1982; 1984). This extends beyond medical tasks to recognize individuals as whole beings encompassing physical, emotional, spiritual, social, and psychological dimensions (Taheri-Ezbarami et al., 2023). This holistic approach directly influences nursing curriculum and prepares well-rounded professionals. Andragogy, Knowles' adult learning model, addresses how adults acquire knowledge. Since nursing students in higher education and their preceptors are adult learners and professional nurses, this framework appropriately represents the learning population's characteristics and needs. Benner's Novice-to-Expert Theory (1982| 1984) describes nurses' professional transitions as they enter practice. This framework is particularly relevant because it addresses the dynamics between novice nursing students and experienced preceptors. The theory helps preceptors, nurse leaders, and educators identify students' developmental stages, recognize knowledge gaps, and determine when guidance is needed (Wu et al., 2018). Together, these frameworks create a comprehensive approach to understanding preceptor-student relationships.

Strategies to Support the Preceptor and Student

Preceptor support throughout the program is imperative. While orientation

lays the groundwork for a successful preceptorship, ongoing support for the student and the preceptor is critical (Ulrich, 2024). The student is assigned a faculty member who provides feedback and highlights the relevant clinical application during the preceptorship. The preceptor will receive support from the faculty, but their unit educator or manager will also intervene as needed and provide direction when the preceptor needs advice (Smith, 2024). Frequent check-ins to assess how the preceptorship is going are a great way to support both parties.

Implementing Consistent Check-ins and Feedback During the Preceptorship

Regular check-ins by the faculty member assigned to the clinical course are essential during the experience. Therefore, the faculty must be on alert to ensure the preceptor feels supported, as otherwise it can negatively impact the student experience. Additionally, the faculty must be cognizant of encouraging the preceptor to provide ongoing feedback during the preceptorship. The preceptor ideally provides this feedback, but the faculty must ensure it is not only timely but also appropriate for the student's level.

Ongoing feedback through preceptorship is a great way to ensure the preceptor feels supported during the rotation. Because the hospital has trained the preceptor rather than the academic institution as a faculty member, the preceptor needs to understand the difference between formative and summative feedback in educational pedagogy. This can be taught to the preceptor during orientation. If the preceptor is granted this authority without adequate training, it is crucial to ensure that students can articulate their thoughts, feelings, and feedback about their preceptor (Hoot, 2020). Adjustments should be made to the assignment during the formative phase of the preceptorship to ensure that both the preceptor and student are well prepared for a successful practical clinical experience that aligns with educational outcomes.

Establishing Clear Expectations and Goals for Both Parties

When establishing the relationship between the preceptor and the student, it is critical to relay expectations. Ideally, the academic institution, through its full-time nursing faculty, collaborates with the preceptor during the orientation period to establish clear expectations and goals for both the preceptor and the stu-

dent. The goal is to ensure the clinical rotation runs as smoothly as possible and that the faculty, preceptor, and student are clear on the rotation's goals.

Communication Techniques for Effective Collaboration

Good communication among the full-time faculty member, the preceptor, and the student is essential to ensuring an effective and successful working relationship (Ulrich, 2024). During the clinical practicum, the preceptor must provide clear instructions to the student while working in the clinical environment. This includes all aspects of patient care, nursing unit policies and procedures, and teamwork and collaborative practices with other hospital disciplines. In addition, the student must be allowed to provide feedback to their preceptor. Feedback should include relaying critical information about the patient or the assignment, information from the clinical team regarding the patient, and information the patient has provided the student (Hong & Yoon, 2021).

Additionally, if a student does not understand something, it is vital that they feel they can approach their preceptor to discuss the situation and improve their understanding (Ulrich, 2024). The nursing faculty can serve as an important liaison between the student and the preceptor in all communication. Because the student may feel insecure, they may communicate ineffectively with their preceptor out of fear of being perceived as incapable in their role.

Conclusion

Preceptorship has become a vital part of the training students receive during their program (Hong & Yoon, 2021). The key to a successful preceptorship is orientation, support, and development for the preceptor. Although this is well documented in the literature, understanding the variables around the student's experience of a successful preceptorship is essential. The student is in a vulnerable position, and the power dynamics between an expert preceptor and a novice student can be intimidating. Furthermore, if the student fails to achieve the preceptorship outcomes, it should not be due to factors beyond their control. Since preceptorship is an extension of clinical learning, nursing Deans, Directors, or Chairs can ensure its success by beginning with formal orientation and by supporting the student, preceptor, and faculty throughout the clinical rotation. **DN**

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