

# Mastering Precepting to Ensure the Success of the Next Generation of Nurses

Beth Ulrich, EdD, RN, FACHE, FAONL, FAAN

## THE EVOLUTION OF MASTERING PRECEPTING

[AKA – THINGS I LEARNED ALONG THE WAY]



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1



## Let's Talk Precepting!

### Today's Agenda

#### Mastering Precepting

- Discuss the development and impact of the Ulrich Model, and how its use can guide preceptor development
- Explain how each role contributes to the success of a nursing preceptor and preceptee
- Articulate the future directions of preceptor development and how this impacts the nursing profession

2

# Mastering Precepting to Ensure the Success of the Next Generation of Nurses

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**SWIM**  
**SINK**

You're in charge!

I know how to be a nurse, but I don't know much about the kidneys or dialysis.

We'll teach you. See one, do one, teach one.

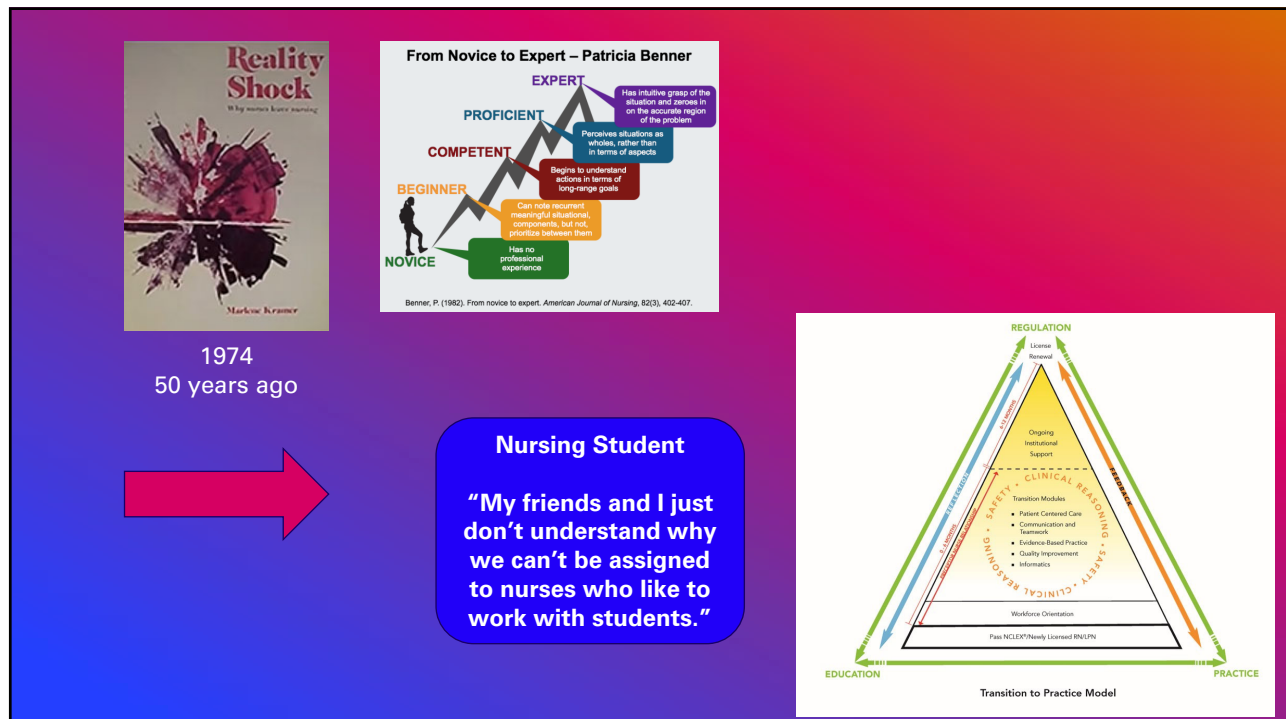
Becoming a nephrology nurse

I know dialysis, but I don't know how to be a manager.

I'll teach you!

Becoming a manager

3



**Reality Shock**  
18 key nursing career warnings  
Mark Kramer

1974  
50 years ago

**From Novice to Expert – Patricia Benner**

**NOVICE**: Has no professional experience

**BEGINNER**: Can note recurrent meaningful situational components, but not prioritize between them

**COMPETENT**: Begins to understand actions in terms of long-range goals

**PROFICIENT**: Perceives situations as wholes, rather than in terms of aspects

**EXPERT**: Has intuitive grasp of the situation and moves in on the accurate region of the problem

Benner, P. (1982). From novice to expert. *American Journal of Nursing*, 82(3), 402-407.

**Nursing Student**

"My friends and I just don't understand why we can't be assigned to nurses who like to work with students."

**Transition to Practice Model**

REGULATION  
License Renewal  
Ongoing Institutional Support  
Transition Modules  
Patient Centered Care  
Communication and Teamwork  
Evidence-Based Practice  
Quality Improvement  
Informatics  
Clinical Reasoning  
Safety  
Clinical Reasoning  
Safety  
Clinical Reasoning  
Safety  
Workforce Orientation  
Pass NCLEX/ Newly Licensed RN/LPN  
PRACTICE

4

## Transitions - Moving Out of Your Comfort Zone

**It isn't the changes that do you in; it's the transitions**

William Bridges

**It's not so much that we're afraid of change**

**or so in love with the old ways,**

**but it's that place in between we fear....**

**it's like being between trapezes.**

**it's Linus when his blanket is in the dryer.**

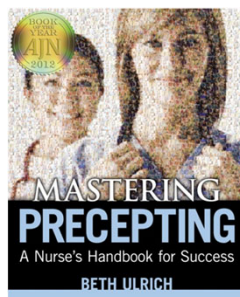
**There's nothing to hold onto.**

Marilyn Ferguson, American Futurist

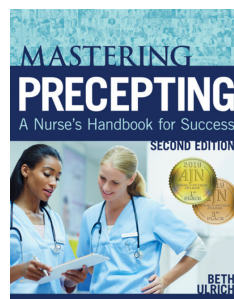


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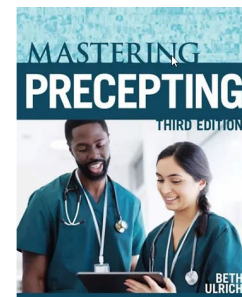
## The Journey



2012



2019



2024

6

## Preceptor Basics

- Preceptors live at the intersections of education and practice and of the present and the future.
- They practice at the point where theoretical learning meets reality and where the gap between current and needed knowledge and expertise gets filled.
- Preceptors are the essential link between what nurses are taught and what they do, and between what nurses know and what they need to know.
- Having competent preceptors is critical to educating nursing students, transitioning new graduate nurses to the professional nursing role, and transitioning experienced nurses to new roles and specialties.

Ulrich, 2024

7

## Patricia Benner

**“Only experiential learning can yield the complex, open-ended, skilled knowledge required for learning to recognize the nature of the particular resources and constraints in equally open-ended and undetermined clinical situations.”**

**“Experiential learning depends on an environment Where feedback in performance is rich and the opportunities for articulating and reflecting on the experiences are deliberately planned” (p. 43).**

Benner et al., 2010

8

## Preceptors

- **Every nurse and health care professional deserves a preceptor.**
  - New level of practice
  - New work organization/unit
  - New role
  - New specialty/sub-specialty
- **Every preceptor deserves to be educated on how to precept and be supported in the role.**



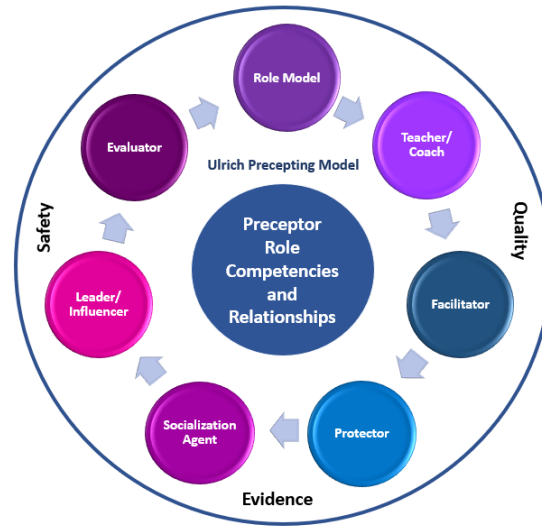
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## Myths

- **Good clinicians always make good preceptors.**
- **You must be an expert clinician to be a good preceptor.**
- **Precepting must work around whatever patient assignment is made and whatever is going on in the unit/practice/etc.**

10

## Ulrich Precepting Model



Source: Ulrich, 2012, 2019, 2024

11

## Preceptor

**An individual with demonstrated competence  
in a specific area  
who guides, assesses, and validates the  
knowledge, skills, and attitudes  
needed to transition  
to a new role, specialty, or environment**

Ulrich et al., 2012, 2024; Harper et al., 2023

12

## Preceptors are...

- The significant purveyor of culture,
- The primary window into the community of practice and its operating realities, and
- A business-critical resource.

(Porter-O'Grady, Malloch, & Good, pp. 90-92)

13

## Preceptor Roles

Role Model	Models professionalism and role competence to positively influence the preceptee
Teacher/Coach	Expands the knowledge, skills, and competence of the preceptee with sensitivity to the preceptee's individual strengths and learning needs
Facilitator	Finds, negotiates, and creates positive and rich experiential learning opportunities and environments
Protector	Ensures the safety of the preceptee and the patient by creating a safe and supportive learning environment and providing preceptee oversight
Socialization Agent	Facilitates assimilation of the preceptee into the work environment and relationships by helping the preceptee understand social and cultural norms
Leader/Influencer	Inspires and guides the actions of others and conveys professional values in the practice setting
Evaluator	Continuously assesses the preceptee's performance and competence for job readiness with ongoing feedback for performance improvement

Sources: Ulrich, 2012, 2024; Harper et al., 2023

14

## Role Model

**Models professionalism and role competence to positively influence the preceptee**

- Preceptors role-model competencies, professional practice, and professional identity.
- Beware of dissonance between what you say and what you do and between what others say and others do.

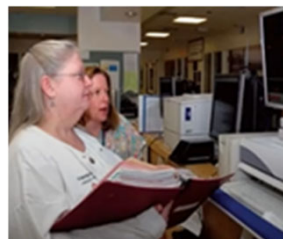
Source: Ulrich, 2024

15

## Teacher/Coach

**Expands the knowledge, skills, and competence of the preceptee with sensitivity to the preceptee's individual strengths and learning needs**

- Teaching
- Coaching



Source: Ulrich, 2024

16



## Facilitator

**Finds, negotiates, and creates positive and rich experiential learning opportunities and environments**

- **Creates purposeful learning experiences**
- **Recognizes learning opportunities**
- **Requires relationships and collaboration**
- **Requires negotiation**

Source: Ulrich, 2024

17

## Protector

**Ensures the safety of the preceptee and the patient by creating a safe and supportive learning environment and providing preceptee oversight**

- **The number one concern in precepting is ensuring a safe environment for patients.**
- **Preceptors have to find or create situations in which preceptees can learn while at the same time protecting the safety of patients.**
- **There should never be any doubt that patient safety is job one.**
- **Protect the preceptee.**

Source: Ulrich, 2024

18

## Socialization Agent

**Facilitates assimilation of the preceptee into the work environment and relationships by helping the preceptee understand social and cultural norms**

- **Preceptors facilitate the socialization of preceptees into the organization, into the unit, and even into the shift within a unit by teaching preceptees**
  - the norms,
  - the sacred cows (things or people considered immune from question or criticism),
  - the formal and informal expectations, and
  - the unwritten rules of the game.



Source: Ulrich, 2024

19

## Leader/Influencer

**Inspires and guides the actions of others and conveys professional values in the practice setting**

- **Leadership is not related to title or position, but rather is related to the way an individual acts as a leader in whatever role they are in.**
- **Brené Brown (2018) defines a leader as, "anyone who takes responsibility for finding the potential in people and processes and has the courage to develop that potential" (p. 4).**

Source: Ulrich, 2024

20

## Leader/Influencer

**Preceptors lead and influence through their values.**

- What do you value?
- What does your manager value?
- What does your organization value?
- What does your preceptee value?

Source: Ulrich, 2024

21

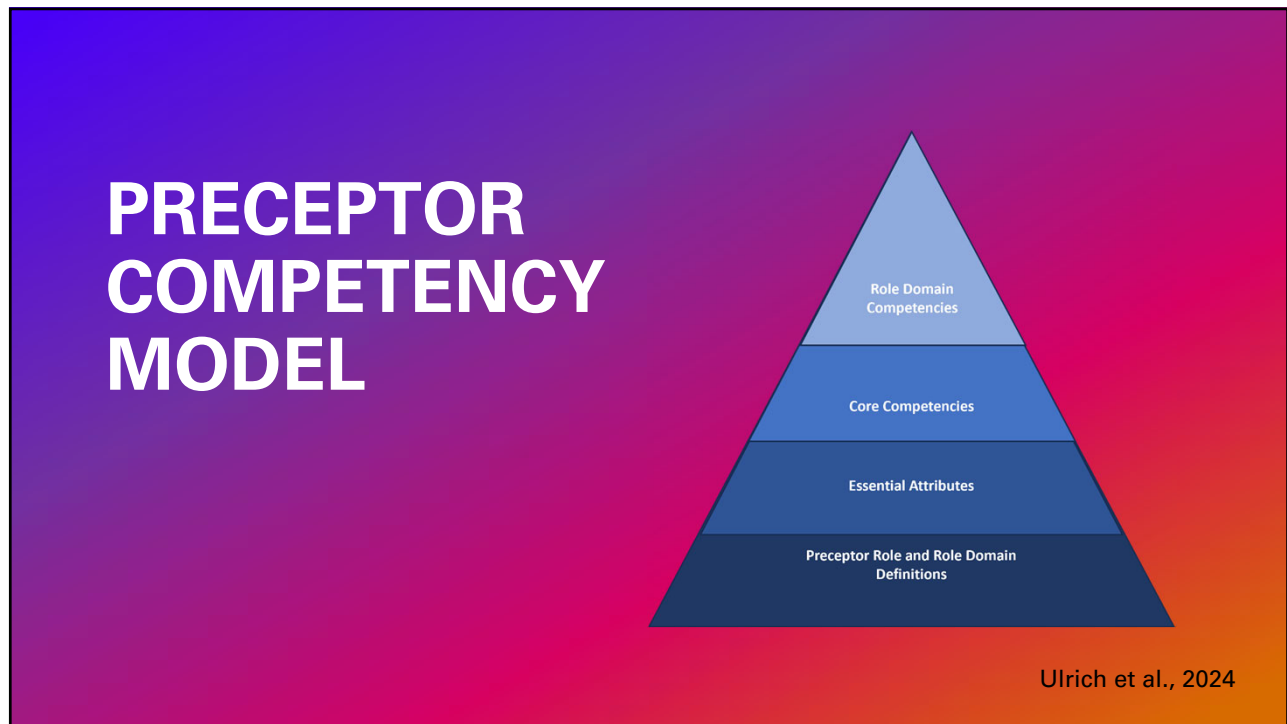
## Evaluator

**Continuously assesses the preceptee's performance and competence for job readiness with ongoing feedback for performance improvement**

- |   |  |
|---|--|
| <ul style="list-style-type: none"><li>• Assess progress on a regular basis.</li><li>• Provide continuous feedback.</li><li>• Make sure you are clear on why you are delivering the feedback.</li><li>• Tackle problems immediately.</li><li>• Be positive.</li><li>• Focus on the behavior, not the person.</li><li>• Be specific.</li><li>• Be timely.</li><li>• Don't use judgment as a means for feedback.</li></ul> | <ul style="list-style-type: none"><li>• Provide feedback from a neutral place.</li><li>• Make it a two-way conversation.</li><li>• Make sure you have these three qualities before delivering feedback—authority, credibility, and trust.</li><li>• Identify solid performance.</li><li>• Keep clear records.</li><li>• Communicate openly.</li><li>• Develop a plan of action.</li><li>• Follow up every step of the way.</li></ul> |
|---|--|

Source: Ulrich, 2024

22



23



24

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<p><b>Preceptor Role Clarification</b></p> <p><b>Managers, NPD Practitioners, Preceptors</b></p>	<p><b>Expected Outcomes</b> At what level of practice do you expect the preceptee to be at the end of the preceptorship? What specific competencies do you expect the preceptee to have at the end of the preceptorship?</p> <p><b>Preceptor Role Requirements</b> What are your expectations of me in the preceptor role? Are there classes I need to take? Are there continuing education requirements? Will I need to liaison with anyone (e.g., nursing school faculty for student nurses)? If yes, with whom?</p> <p><b>Support Available for the Preceptor and Preceptee</b> What initial preparation will I get for the preceptor role? Will additional education be available in the future? If so, what? Who is available for me as a resource? Will I have an experienced preceptor to precept me in my preceptor role? What information resources are available to me and my preceptee? If the preceptee is a new graduate RN (NGRN), do we have a structured RN residency or transition to practice program in place? Will there be training for me on that program?</p> <p><b>Time Dedicated to the Preceptor and Preceptee Roles</b> How much of my time will be dedicated to the preceptor role for each type of preceptee (e.g., NGRN, new hire experienced nurse, experienced nurse new to our specialty)? How much preceptee time will be dedicated to the preceptee role for each type of preceptee (e.g., NGRN, new hire experienced nurse, experienced nurse new to our specialty)? What part of my hours and my preceptee's hours will be counted in staffing?</p> <p><b>Priority of the Precepting Role With Other Duties</b> Except for emergencies, will I be pulled to staff other shifts or units when I am in my preceptor role? If yes, will someone take my place with my preceptee?</p> <p>Ulrich, 2024, p.80</p>
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25

**PRECEPTOR DEVELOPMENT  
AND SUPPORT**

**Structured Programs Needed**

**NOT ONE AND  
DONE!**

26

## When Problems Occur

- **Competence issues**
- **Performance issues**
- **Preceptor-preceptee relationship – It's not always a good match**



27

## Ending the Preceptor-Preceptee Relationship

- **Closure**
- **Affirmation**
- **Action planning**
- **Handoff**
- **Celebrate**



28

## **WORDS MATTER!**

**Validate competencies**  
**NOT**  
**Check you off**

29

### **What We Know...The data has shown that...**

- **Preceptors are critical to the success of nurses and other health care professionals transitioning into practice, new roles, and new specialties.**
- **How a nurse becomes a preceptor and how the preceptor is supported by the organization impacts the preceptor's success, the success of those precepted, and patient outcomes**
- **Currently, preceptor preparation ranges from none to very sophisticated preceptor development and support programs**
- **Despite the importance of the preceptor role, many health care staff serve as preceptors without preparation for the role, without formal feedback on their performance, and without the continued support they need**

30

# Where To Go From Here

## Personal

- Assess your own knowledge and skills.
- Assess your resources.
- Make an improvement plan.
- Keep learning and improving.

## Organization

- Clarify role(s)
- Assess preceptor need, availability, and competence of current preceptors
- Create/improve preceptor development program
- Assess results
- Continuously improve

31

## BECOMING A PRECEPTOR

**“The most important practical lesson that can be given to nurses is to teach them what to observe, how to observe, what symptoms indicate improvement, what the reverse, which are of importance, which are of none, which are evidence of neglect and of what kind of neglect.”**

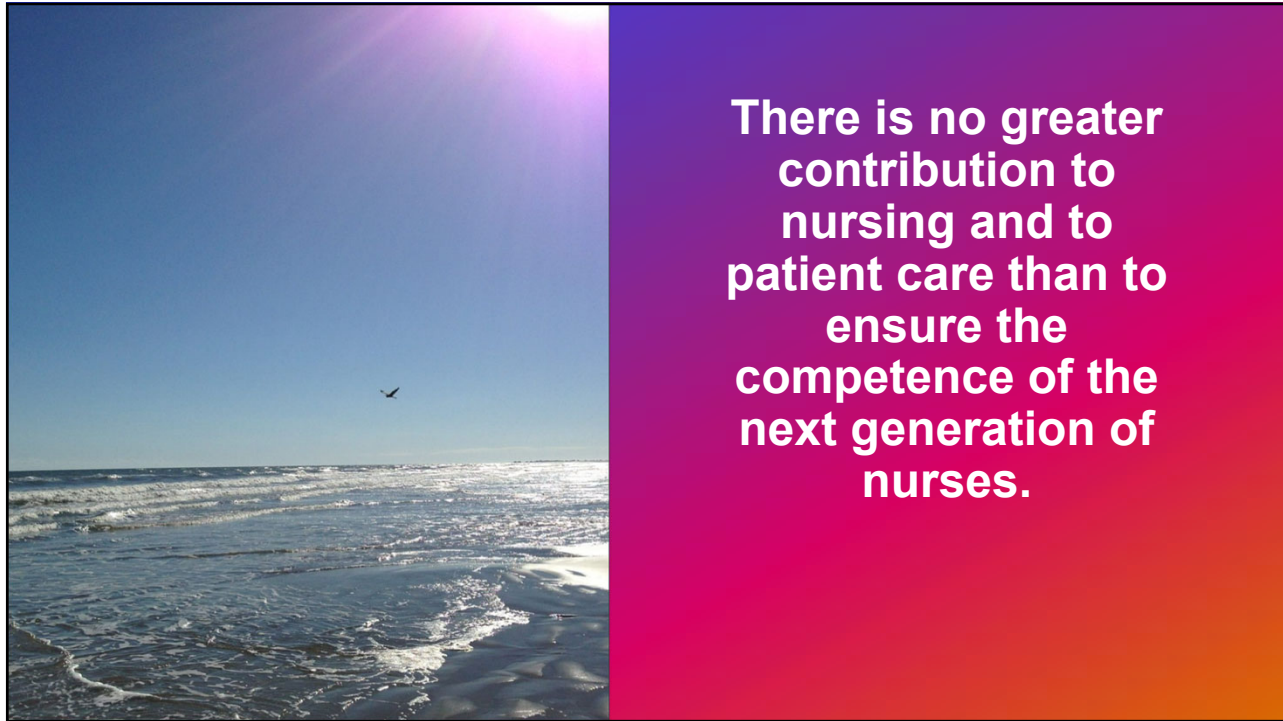
**–Florence Nightingale**

32



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33

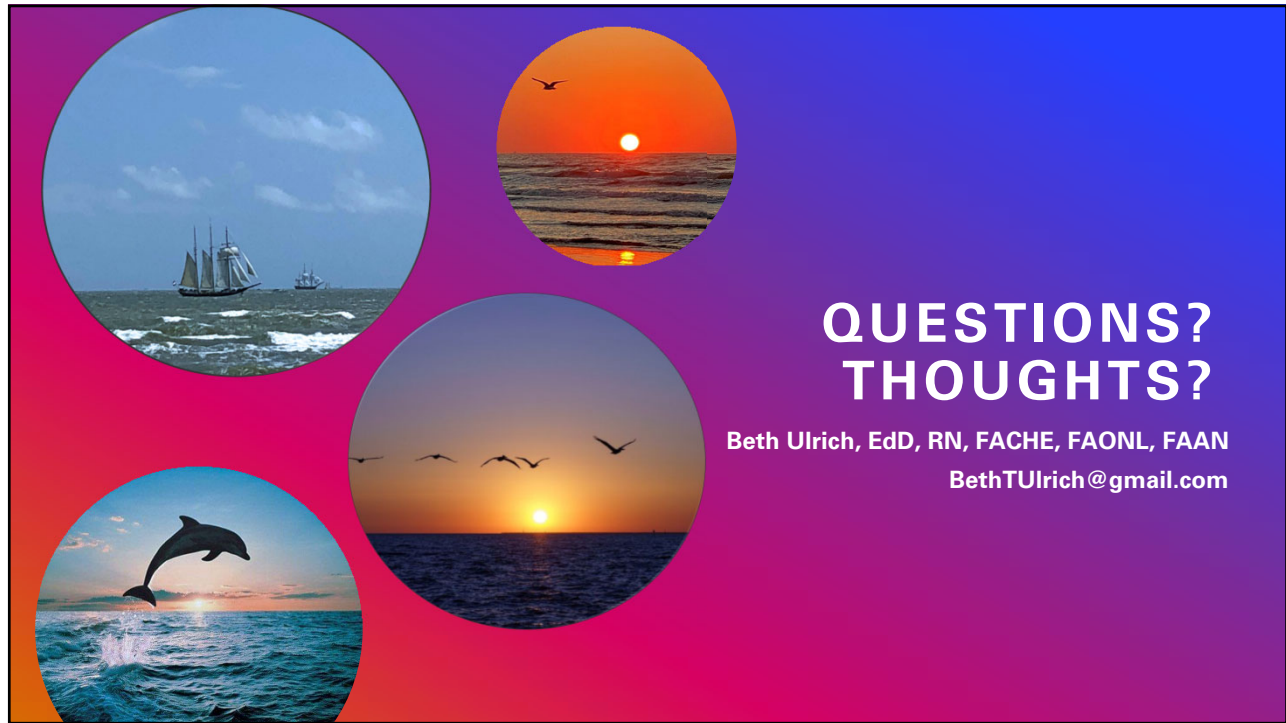
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34

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35