

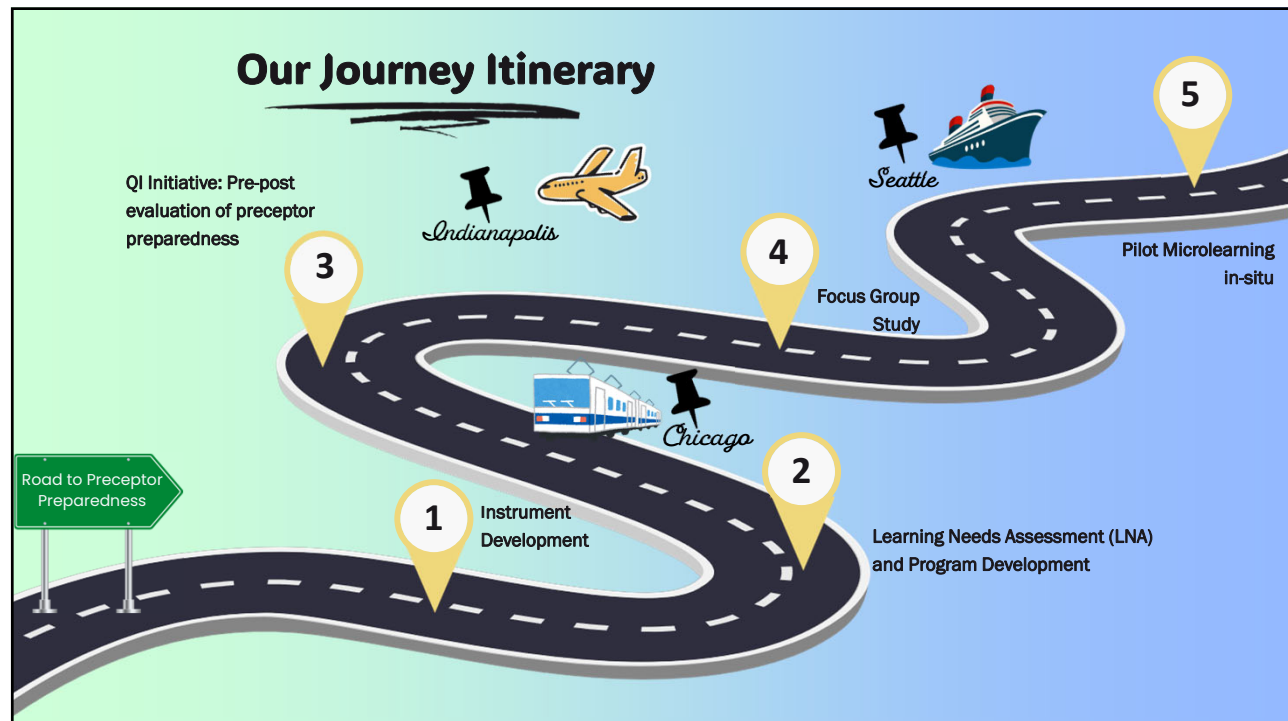
Journey to Increasing Preceptor Preparedness: Foundations and Beyond

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The Gap

- Study methods used to evaluate preceptor training +
- Measures to evaluate effectiveness of preceptor training +
- Research of preceptors working with capstone students +

= GAP

Need an instrument measuring preceptor preparedness

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The Instrument

Cap-ExPresS
has 4 domains
22 Items

- Clinical Competence (3)
- Pedagogic Competence (6)
- Student-Centeredness (8)
- Nurse Professionalism (5)

**Adapted to
Prep-ExPresS**

- Rarely do preceptors work with just one type of preceptee
- Students
- New Graduate Nurses
- Experiences Nurses
- “student” changed to “preceptee”



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The Findings

- Cronbach's alpha of Cap-ExPresS (N = 118) was .95 (Guthrie et al., 2023)
- Enjoyment correlated with all domain scores
- Enjoyment was a predictor of higher scores for each domain
- Working with NGNs correlated with Clinical Competency domain
- Experience precepting and years as RN correlated with all scores except Student Centeredness
- Training did not correlate with any Cap-ExPresS scores
- Sample of preceptors varied with population of RNs, tending to be younger, more likely Caucasian, with higher % BSN or higher

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Learning Needs Assessment (LNA) guides course development

- Wanted to look at improving our current program
- **Content Validity:** Cross-walked 22 items with preceptor training content (Ulrich, 2019)
- Sent Prep-ExPresS to nurse preceptors Summer 2023
 - N = 224 preceptors
 - Cronbach's alpha .96
- Focused training on lowest scoring items in 2 domains:
 - Pedagogic Competence
 - Nurse Professionalism
- Development of preceptor foundational course



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**Excursion to Chicago
for ANPD Aspire Convention 2024
Present: Preceptor Course Development**

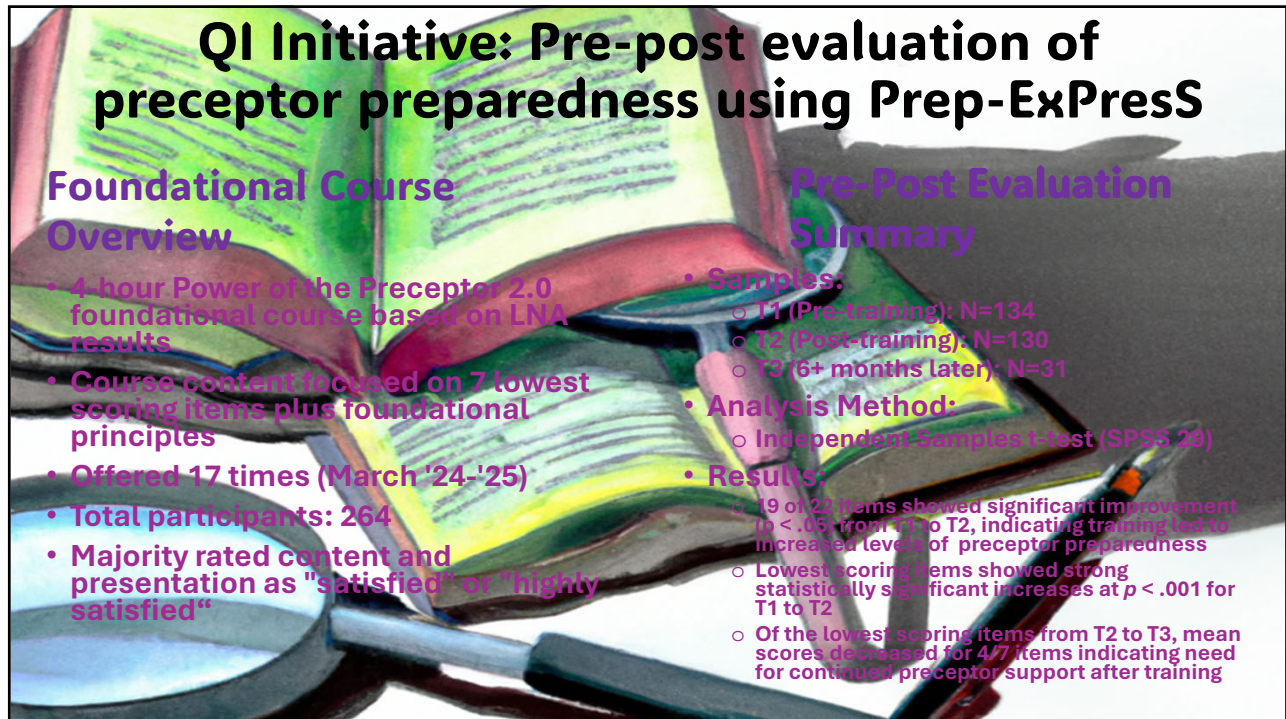
ANPD

**Increasing Preceptor Preparedness: A
Quality Improvement Project Using the
Prep-ExPress**

Lisa E. Guthrie, PhD, RN, NPD-BC
Carrie Armstrong, BSN, RN, NPD-BC

ASPIRE 2024
CONVENTION

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**QI Initiative: Pre-post evaluation of
preceptor preparedness using Prep-ExPress**

**Foundational Course
Overview**

- 4-hour Power of the Preceptor 2.0 foundational course based on LNA results
- Course content focused on 7 lowest scoring items plus foundational principles
- Offered 17 times (March '24-'25)
- Total participants: 264
- Majority rated content and presentation as "satisfied" or "highly satisfied"

**Pre-Post Evaluation
Summary**

- **Samples:**
 - T1 (Pre-training): N=134
 - T2 (Post-training): N=130
 - T3 (6+ months later): N=31
- **Analysis Method:**
 - Independent Samples t-test (SPSS 29)
- **Results:**
 - 19 of 22 items showed significant improvement ($p < .05$) from T1 to T2, indicating training led to increased levels of preceptor preparedness
 - Lowest scoring items showed strong statistically significant increases at $p < .001$ for T1 to T2
 - Of the lowest scoring items from T2 to T3, mean scores decreased for 4/7 items indicating need for continued preceptor support after training

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Excursion to Indianapolis for MNRS 49th Annual Conference 2025 Present: QI Initiative

Evaluating Effectiveness of Nurse Preceptor Education: A Pre-Post QI Initiative
Lisa E. Guthrie, PhD, RN, NPQ-BC; Carrie Armstrong, BSN, RN, NPQ-BC; Ericka Sanner-Stiehr, PhD, RN, COI

Background

- Nurse preceptors can positively impact the quality and retention of preceptors, improving the quality of patient care.
- Identifying best practices in preparing nurse preceptors has been elusive due to:
 - Lack of consistent study methodologies and
 - Lack of validated instruments measuring attributes of preceptors or preceptor training.
- Cap-EdPrep™ measures preceptor preparedness as a level of confidence (See QR Code).
- Recognized need to demonstrate effectiveness of preceptor training.

Purpose: Evaluate the effectiveness of an educational initiative based on preceptor learning needs and measured using an instrument with demonstrated validity and reliability.

Methods

- Learning needs assessment (LNA) performed using the Preceptor Experience Preceptor Preparedness Scale (Prep-EdPrep).
- Adapted from Cap-EdPrep™ by changing "student" to "preceptor".
- 22 items across 4 domains.
- Cronbach's alpha .94.
- Bandura Self-Efficacy as theoretical framework (See QR Code).
- Preceptor preparation curriculum developed to focus on reported learning needs of:
 - Creative teaching methods.
 - Effective supervision.
 - Ongoing self-development as preceptor.
- Included best practices in education:
 - Adult learning principles.
 - Evaluation principles.
 - Tanner's Clinical Judgment Model.
 - Active learning strategies.
 - Importance of humor and breaks.
- Iterative debriefing sessions with participants offered practical strategies to improve classroom experience.
- Measured participant preceptor preparedness:
 - Before & immediately after - March 24-March 25.
 - At least 6 months after - August 24-February 25.

Evidence-Based Toolkit Improves Preceptor Preparedness Scores



QR Code:
Address Preceptor Challenges, Theoretical Framework, Skills, Learning, Reflection

Results

- 4-hour curriculum based on LNA:
 - Offered 17 times between March 24-25.
 - Content and presentation overall rated as "satisfied" or "highly satisfied".
- Participant sample size:
 - T1: before (N = 24).
 - T2: immediately after (N = 130).
 - T3: at least 6 months after (N = 13).
- Sample description: 75% Caucasian, 88% Female, 92% BSN, 5 mean years as RN, & 73% assigned to precept.
- Cronbach's alpha .86 for the Prep-EdPrep at T1 indicated strong internal consistency reliability.
- Comparisons using independent samples t-tests:
 - Scores for all but 1 of the 22 items improved, with 11 items improving significantly between T1 and T2 and 10 and 1 item QR Code.
 - Scores from T2 to T3 began higher, demonstrated modest increase in preparedness at item level and overall.

Conclusion

- Using an established scale to measure preceptor preparedness offers actionable results.
- Measuring preceptor level of preparedness at different points, can strengthen the evaluation of training effectiveness and then focus the need for continued support.
- Effective learning starts by understanding the learning needs of target audience.
- Bandura Self-Efficacy theory is a useful framework for studying preceptor preparedness within nursing.
- Evaluations using valid and reliable instruments, such as the Prep-EdPrep, support nurse preceptor science with identification of best practices for preceptor training over time.
- Next steps:
 - Focus Group to identify how preceptors want to receive additional support during precepting.
 - Offer and evaluate support specific to addressing identified preceptor challenges (QR Code).








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Background for Focus Group Study



- Preceptors continue to lack confidence even after training
- Offering continuous support to meet preceptor needs may increase confidence/preceptor preparedness
- Microlearning offers a method of presenting preceptor education in small chunks, when needed
- This study explores preceptor preferences for Microlearning sent via text during precepting hours

Subscription to microlearning platform paid by an internal Star Grant.
Provides support for staff projects and innovations.

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The Focus Group Results/Themes

Evaluating the Foundations Course

- ✓ Experienced preceptors still had more to learn
- ✓ Awareness of identifying learning styles of preceptee
- ✓ Night shift often feels unsupported
- ✓ Support while precepting inconsistent in availability and content

Preceptor Preferences for Microlearning via Text

- ✓ Customizable
- ✓ Able to pull and push content
- ✓ Short, use bullet points
- ✓ Sync microlearning with precepting timeline
- ✓ Offer space for collaboration
- ✓ Limit required clicks and number of "pages" of content
- ✓ Build on foundational knowledge

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Excursion to Seattle: SIGMA 2025 International Nurse Research Congress Present: Focus Group Study

Increasing Nurse Preceptor Preparedness through Continuous Microlearning Support: A Qualitative Exploration of Preceptor Preferences

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Microlearning Development

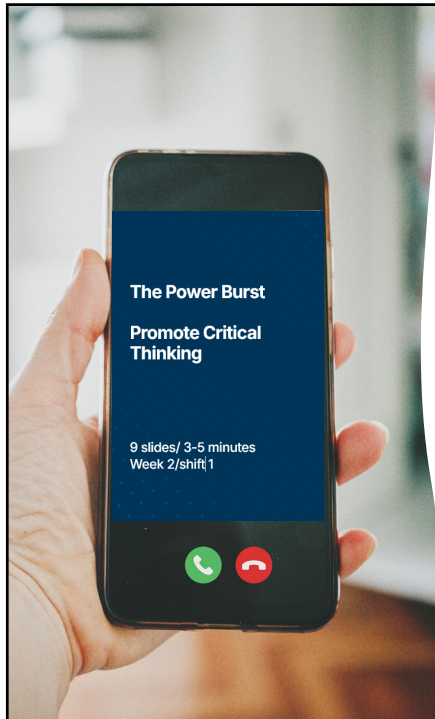
Microlearning Principles

1. Audience
2. Learning Domain
3. Learning Outcomes
4. Guiding Principles
 - a. Timeframe
 - b. Content- Single focus
 - c. Bite-sized amount of content
 - d. Interactive and engaging
 - e. Targeted content
 - f. Delivery mode

Preceptor Preferences

- Customizable
- Able to pull and push content
- Short, use bullet points
- Sync microlearning with precepting timeline
- Offer space for collaboration
- Limit required clicks and number of “pages” of content
- Build on foundational knowledge

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Microlearning Pilot Project

- Recruited volunteers preparing to precept new graduate nurses, preferred POTP 2.0 participants
- Included 6 preceptors from acute care and ICU
- Registration and consent
- Texts were scheduled on set times/days
- Topics chosen:
 - A test module
 - Most critical information when beginning a preceptorship
- Evaluated each module for
 - Convenience
 - Ease of use
 - Helpfulness of content
 - Amount of content
- Overall evaluation/comments

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