

# Impact of Preceptorship Models for Undergraduate Nursing Students and Its Implementation: Systematic Review

Nurfadhillah Awang Rosli<sup>1</sup>, Teo Yan Choo<sup>2</sup>, Deeni Rudita Idris<sup>3</sup>

<sup>1</sup>Registered Nurse, Pantai Jerudong Specialist Centre, Brunei Darussalam, <sup>2</sup>Lecturer, PAPRSB Institute of Health Sciences, Nursing program, Universiti Brunei Darussalam, <sup>3</sup>Assistant Professor, PAPRSB Institute of Health Sciences, Nursing program. Universiti Brunei Darussalam

## Abstract

**Background:** A preceptorship model of clinical teaching supports nursing students during their clinical placements, as clinical placement is integral in the incorporation of theory and practice. Aim: To explore the clinical teaching and learning within a preceptorship model and make recommendations for improving clinical nursing education. Methods: Science Direct, PubMed and Google Scholar were utilized using keywords. Results: The preceptorship model is essential in professional socialisation for nursing students through role modelling and enhancing the students' sense of responsibility as well as building the students' confidence and ease their transition from being a student to a nurse. Findings showed that the preceptorship model had been linked with a positive nursing student experience and an effective approach in facilitating students' learning and acquisition of skills in clinical practice. Conclusions: This review has found positive impact of developing a preceptorship model to improve the clinical teaching practice for nursing students.

**Keywords:** "Preceptorship model", "impact", "clinical", "undergraduate" and "nursing students".

## Introduction

Preceptorship has existed in nursing education since long ago. Many supported the use of the preceptorship model as an effective approach to facilitating students' learning and acquisition of skills in clinical practice<sup>1-4</sup> and most supported using preceptorship in undergraduate nursing education<sup>5</sup>. The terms mentor and preceptor exist interchangeably; however, according to literature,

both terms are different in their meaning and setting whereby, mentors are usually a long-term relationship which is between a novice and the mentor and generates a sense of awe and respect from the novice to the mentor at an organisational level<sup>6</sup>. On the other hand, the preceptor relationship is usually brief and lasts several weeks between an experienced employee and a novice<sup>7</sup>.

Despite the presence of mentors, undergraduate nursing students still face challenges such as insufficient clinical hours, not achieving learning needs<sup>8</sup>, not having a good clinical experience<sup>9</sup>, inadequate faculty supervisions and lack of qualified staff<sup>10</sup> as found in various literature which would all lead the students to be incompetent and not confident when they become registered nurses.

---

### Corresponding author:

**Deeni Rudita Idris**

PAPRSB Institute of Health Sciences  
(Nursing program) Universiti Brunei Darussalam  
Jalan Tungku Link Gadong BE 1410  
Brunei Darussalam

Clinical placements are central to facilitating the integration of theory and practice, which the faculty cannot meet independently. Ultimately, the clinical placement is where undergraduates are exposed to the reality of nursing<sup>11</sup> and where they are readied and prepared for practice<sup>12</sup>. The need for implementing a nursing preceptorship program, especially concerning nursing educators, has been supported by many<sup>13-14</sup>. For instance, it was found that while nurse educators were expected to accompany student nurses, a shortage of staff limits them to lectures in the classroom, resulting in minimal student accompaniment, whereas this shortage also makes it difficult for a nurse educator to spend enough time with each student<sup>14</sup>. Another study found that the ratio of students to nurse educators was too high to allow for effective student supervision in

clinical practice, signaling the need for preceptorship<sup>13</sup>. Therefore, this literature review acts as a baseline to fill in the gap between the existing preceptorship models and evaluate their pros and benefits for it to be implemented.

### Methods

Using the research question “*Would undergraduate nursing students benefit more with the existence of preceptorship during their clinical practice?*”, a literature search was performed using the following databases Science Direct, PubMed and Google Scholar. Keywords such as “nursing students”, “preceptorship”, “impacts”, “effects”, “nurse” and “clinical” were used. The following inclusion criteria were applied.

**Table 1: Inclusion and exclusion criteria for literature selection**

Inclusion
Studies that look at the following are included in the review:
· Preceptorship
· Involves Nursing students
· Takes place within clinical practice
· Published in English

This search review was conducted per the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. A total of 52 paper are included in this review.

### Results and Discussion

Three themes were formed namely i. *Enhanced ability to incorporate theory into practice*, ii. *Increased self-confidence* and iii. *Increased satisfaction and retention of students*. The key concepts within these themes centralise the advantages of implementing the preceptorship model in the clinical context.

*Enhanced ability to incorporate theory into practice*

Students and preceptors needed to build a trusting relationship by spending time together within a relationship of mutual interest and respect where the student’s confidence was fostered, so that teaching and learning could occur. Some inhibiting factors on students’ clinical learning have been noted in other studies, such as being ignored, being spoken to in a condescending or judgmental way<sup>15-16</sup>. Stalmeijer et al.<sup>17</sup> had reported that when students worked alongside their preceptor regularly, the continuous

relationship appropriate guidance and a more accurate in-depth assessment occurred. Thus, it is better when preceptors had the time to teach and the knowledge and skill to articulate their practice as students would be able to construct their knowledge through the interactive dialogue that occurred<sup>18</sup>. Regarding the teaching approach whereby preceptors would explain or ‘talk through’ their practice was regarded to be important by both the preceptors and students<sup>18</sup>.

Following that, the preceptors would ask the students the key actions they were going to implement or had already implemented, which students found helpful to their learning. Some preceptors would adjust their guidance and teaching strategies according to the students’ level of performance and understanding, which have been mentioned previously in other studies investigating practice education<sup>17, 19</sup>. With these continuous assessments on the student’s learning throughout their time in placement, effective teaching was linked as the students would become more competent<sup>18</sup>. Additionally, some preceptors would challenge the students’ ability to solve problems. The usefulness of critical questioning in developing students’ clinical reasoning skills in the context of clinical practice is supported in the findings of other studies<sup>20, 21</sup>. According to McSharry & Lathlean<sup>18</sup> preceptors and students believed that this kind of questioning helped students verbalise and refine their knowledge. It encouraged them to identify procedural knowledge, scientific knowledge, and rationale for care by applying it to the presenting patient’s context.

#### *Increased self-confidence*

Self-confidence is defined as a sense of security that is soundly based on the nurses’ awareness of their capability<sup>22</sup>. Therefore, nursing preceptorship has implications for students developing their competency skills and confidence in clinical settings. Haggerty et al<sup>23</sup> identified four factors that supported

effective preceptorships as students developed their competence and confidence. The four factors included (a). participants’ access to their preceptors, (b). the importance of the preceptor/new graduate relationship, (c). preceptor preparation for their role and (d). the overall culture of support<sup>23</sup>. This indicates that the preceptors are in a unique position to assist students to develop competency skills.

To successfully cope with increased responsibility, all newly qualified nurses must have confidence in themselves and their abilities. This increase in responsibility and accountability is a significant cause of stress when first qualified<sup>24</sup>. A systemic review of the literature also found that newly qualified nurses feel unprepared for practice, lacking confidence in their abilities, and insufficient time during their clinical skills training<sup>24</sup>. This is especially true in Brunei’s context as undergraduate student nurses are constantly dealing with insufficient clinical days and hours, which would lead them to feel incompetent later when they become newly qualified nurses.

Preceptorship has been shown to help students build confidence and ease their transition from being a student to a nurse. Students may feel more confident in performing nursing procedures under their preceptor’s supervision. Preceptorship was particularly beneficial to students in that it could help build the student’s confidence and self-esteem<sup>25</sup>, increase the level of independent functioning and for attaining competency and confidence and aid in the application of theory to clinical practice and critical thinking<sup>26</sup>. Students who participated in a preceptorship program appeared more confident in their ability to manage care for a patient. For instance, students felt a sense of inclusion in the unit and became more actively involved in communicating with other healthcare team<sup>27</sup>. The literature review indicates that nursing students who had positive preceptorship experiences have effectively promoted the critical thinking ability in the

practice setting<sup>28</sup>, could assume more responsibility, prioritise more acutely ill patients, and perform a greater number of skills than students in a non-preceptorship course.

#### *Increased satisfaction and retention of students*

Previous research investigating satisfaction with nursing education found that over one-third of final year students were dissatisfied with their preparation for nursing work<sup>29</sup>. Students also raised concerns regarding the adequacy of the clinical component of the Bachelor of Nursing course in terms of both the number of clinical hours and the level of support and supervision provided during the clinical placement. Some respondents referred explicitly to the impact of negative experiences during clinical placement on their career intentions<sup>29</sup>. It was found that work preparation satisfaction to be a significant predictor of job satisfaction but found that the effect on the expectation of leaving the job was only through work environment satisfaction which includes clinical support, resources and staffing<sup>30-31</sup>. It is also consistent with several studies identifying work environment factors as necessary to the stress and dissatisfaction experienced by new graduate nurses<sup>32-34</sup>.

McSharry and Lathlean<sup>18</sup> found that insufficient time to teach, highly dependent on students' ability to participate in and contribute to practice with minimal guidance, had negatively impacted students' learning. Subsequently, these nurses could potentially affect nurses' job satisfaction<sup>35</sup>. Similarly, the inability to handle intense working environments has resulted in new graduate nurse turnover rates of 35-65% within the first year of employment<sup>36</sup>. Consequently, failure to support and prepare these new nurses for their working roles may affect their ability to deliver the level of clinical nursing care required<sup>37</sup>.

To overcome this issue, preceptorship has been widely recommended as the solution. The clinical

preceptor role is perceived as an essential supportive framework for undergraduate nursing students to facilitate skills development, reflection, and reduce emotional burnout<sup>38</sup>. It is also highlighted that preceptorship programmes can reduce the transitional stress related to becoming a qualified nursing practitioner<sup>39</sup>. Therefore, teaching and educating nursing students in the clinical setting is significant to produce competent practitioners and enhance retention rates<sup>40</sup>. The hospital preceptorship programme is a long-term strategy to improve recruitment and retention in providing a supportive and safe working environment that would make an enjoyable workplace and enable growth and development both as an individual and professionally<sup>41</sup>. Appreciation of and benefits from the support of preceptors have been shown in earlier studies<sup>42-43</sup>. The results from Löfmark et al.<sup>44</sup> showed a high level of satisfaction for the support from preceptors, and the association between preceptor supervision and meeting the learning outcomes was high. This was also agreed by Lamont et al.<sup>9</sup> where the findings also suggest that nursing students on placement at a teaching hospital have a positive learning experience and predominantly report having their expectations met.

#### **Recommendation and Conclusion**

This study found that the existence of the preceptorship model has many benefits in the development of a nursing student both individually and professionally. Preceptorship is vitally crucial in nursing education as it assists nursing students to incorporate theory into practice, integrates students into the practice setting within the organisation, allows the student to apply learning and internalise the role and values of the profession within a nurturing and supportive relationship, and assists in recruiting nursing students into the profession. Some of the benefits of preceptorship included *1. The ability to incorporate theory into practice, 2. Increased*

self-confidence and 3. Increased satisfaction and retention of students. Findings illuminate the need of implementing a preceptorship model for undergraduate nursing students as there has been profound evidence that implies positive experience and learning for nursing students. This suggests a need for extensive educational preparation and further educational and organisational support to implement the preceptorship model in the clinical setting. The concept of preceptorship within the clinical practice was an appropriate framework for effective clinical teaching and learning. A formal collaboration between faculty and the healthcare agencies could be one of the strategies in implementing the preceptorship model to support nursing students in the clinical setting. Therefore, it is recommended that the Team Preceptorship Model (TPM) form the basis of preceptorship and be incorporated within the nursing education.

**Declaration of Conflict of Interest:** Nil

**Funding:** None

**Ethical Consideration:** Not applicable

### References

1. Deegan J, Burton T, Rebeiro G. Clinical assessment and the benefit of the doubt: what is the doubt?. *Aust J Adv Nurs*. 2012. 30(1): 42-48. Available from: <https://www.ajan.com.au/archive/Vol30/Issue1/Deegan.pdf>
2. Kim KH, Lee AY, Eudey L, Dea MW. Improving Clinical Competence and Confidence of Senior Nursing Students through Clinical Preceptorship. *Int J Nurs*. 2014. 1(2):183-209. Available from: <https://doi.org/10.15640/ijn.v1n2a14>
3. Smith C, Swain A, Penprase B. Congruence of perceived effective clinical teaching characteristics between students and preceptors of nurse anesthesia programs. *AANA J*. 2011. 79(4): 62-68. Available from: <https://pubmed.ncbi.nlm.nih.gov/22403969/>
4. Sundler AJ, Björk M, Bisholt B, Ohlsson U, Engström AK, Gustafsson M. Student nurses' experiences of the clinical learning environment in relation to the organisation of supervision: A questionnaire survey. *Nurse Educ Today*. 2014. 34(4): 661-666. Available from: <https://doi.org/10.1016/j.nedt.2013.06.023>
5. Udulis KA. Preceptorship in undergraduate nursing education: an integrative review. *The Journal of Nursing Education*. 2008. 47(1): 20-29. Available from: <https://pubmed.ncbi.nlm.nih.gov/18232611/DOI:https://doi.org/10.3928/01484834-20080101-09>
6. Madison J, Watson K, Knight BA. Mentors and preceptors in the nursing profession. *Contemp Nurse*. 1994. 3(3): 121-126. Available from: <https://doi.org/10.5172/conu.3.3.121>
7. Firtko A, Stewart R, Knox N. Understanding mentoring and preceptorship: clarifying the quagmire. *Contemp Nurse*. 2005. 19(1-2): 32-40. Available from: <https://doi.org/10.5172/conu.19.1-2.32>
8. Sedgwick M, Harris S. A Critique of the Undergraduate Nursing Preceptorship Model. *Nurs Res Pract*. 2012. 1-6. Available from: <https://doi.org/10.1155/2012/248356>
9. Lamont S, Brunero S, Woods KP. Satisfaction with clinical placement - The perspective of nursing students from multiple universities. *Collegian*. 2015. 22(1): 125-133. Available from: <https://doi.org/10.1016/j.colegn.2013.12.005>
10. Teferra AA, Mengistu D. Knowledge and attitude towards nursing clinical preceptorship among Ethiopian nurse educators: An institution-based cross-sectional study. *Int J Afr Nurs Sci*. 2017. 7(May): 82-88. Available from: <https://>

- doi.org/10.1016/j.ijans.2017.10.001
11. Henderson A, Cooke M, Creedy DK, Walker R. Nursing students' perceptions of learning in practice environments: A review. *Nurse Educ Today*. 2012. 32(3): 299–302. Available from: <https://doi.org/10.1016/j.nedt.2011.03.010>
  12. Zilembo M, Monterosso L. Nursing students' perceptions of desirable leadership qualities in nurse preceptors: A descriptive survey. *Contemp Nurse*. 2008. 27(2), 194–206. Available from: <https://doi.org/10.5172/conu.2008.27.2.194>
  13. Kemper NJ. Win-win strategies help relieve preceptor burden. *Nurs Manag*. 2007. 38(2):10. Available from: <https://doi.org/10.1097/00006247-200702000-00004>
  14. Monareng LV, Jooste K, Dube A. Preceptors' and preceptees' views on student nurses' clinical accompaniment in Botswana. *Afr J Nurs Midwifery*. 2009. 11(2): 115–129. Available from: [https://uir.unisa.ac.za/bitstream/handle/10500/9706/ajnm\\_v11\\_n2\\_a10.pdf?sequence=1&isAllowed=y](https://uir.unisa.ac.za/bitstream/handle/10500/9706/ajnm_v11_n2_a10.pdf?sequence=1&isAllowed=y)
  15. Chesser-Smyth PA, Long T. Understanding the influences on self-confidence among first-year undergraduate nursing students in Ireland. *J Adv Nurs*. 2013. 69(1): 145–157. Available from: <https://doi.org/10.1111/j.1365-2648.2012.06001.x>
  16. Levett-Jones T, Lathlean J, Higgins I, McMillan M. Staff - Student relationships and their impact on nursing students' belongingness and learning. *J Adv Nurs*. 2009. 29: 342–349. Available from: <https://doi.org/10.1111/j.1365-2648.2008.04865.x>
  17. Stalmeijer RE, Dolmans DHJM, Wolfhagen IHAP, Scherpbier AJJA. Cognitive apprenticeship in clinical practice: Can it stimulate learning in the opinion of students?. *Adv in Health Sci Educ*. 2009. 14(4): 535–546. Available from: <https://doi.org/10.1007/s10459-008-9136-0>
  18. McSharry E, Lathlean J. Clinical teaching and learning within a preceptorship model in an acute care hospital in Ireland; a qualitative study. *Nurse Educ Today*. 2017. 51: 73–80. Available from: <https://doi.org/10.1016/j.nedt.2017.01.007>
  19. Spouse J. *Professional Learning in Nursing*. Oxford: Blackwell Science; 2003.
  20. Benner P. Using the Dreyfus model of skill acquisition to describe and interpret skill acquisition and clinical judgment in nursing practice and education. *Bull Sci Technol Soc*. 2004. 24(3): 188–199. Available from: <https://doi.org/10.1177/0270467604265061>
  21. Forneris SG, Peden-Mcalpine C. Creating context for critical thinking in practice: The role of the preceptor. *J Adv Nurs*. 2009. 65(8): 1715–1724. Available from: <https://doi.org/10.1111/j.1365-2648.2009.05031.x>
  22. Lathlean L, Corner J. *Becoming a Staff Nurse: A Guide to the Role of the Newly Qualified Nurse*. London: Prentice-Hall Direct; 2013.
  23. Haggerty C, Holloway K, Wilson D. How to grow our own: An evaluation of preceptorship in New Zealand graduate nurse programmes. *Contemp Nurse*. 2013. 43(2): 162–171. Available from: <https://doi.org/10.5172/conu.2013.43.2.162>
  24. O'Kane CE. Newly qualified nurses experiences in the intensive care unit. *Nurs Crit Care*. 2012. 17(1): 44–51. Available from: <https://doi.org/10.1111/j.1478-5153.2011.00473.x>
  25. Wieland DM, Altmiller GM, Dorr MT, Wolf ZR. Clinical transition of baccalaureate nursing students during preceptored, pregraduation practicums. *Nurs Educ Perspect*. 2007. 28(6): 315–321. Available from: [https://doi.org/10.1043/1094-2831\(2007\)028\[0315:CTOB](https://doi.org/10.1043/1094-2831(2007)028[0315:CTOB)

NS]2.0.CO;2

26. Mantzorou M. Preceptorship in Nursing Education: Is It a Viable Alternative Method for Clinical Teaching? *ICUS Nurs Web J.* 2004. 19(4). Available from: <http://www.learningdomain.com/MEdHOME/SPECIALISATIONS/Clinical.prece%0Aptorship.pdf>
27. Flynn JP, Stack MC. *The role of the preceptor: A guide for nurse educators, clinicians and managers.* 2nd ed. New York: Springer publishing company; 2013.
28. Myrick F, Luhanga F, Billay D, Foley V, Yonge O. Putting the Evidence into Preceptor Preparation. *Nurs Res Pract.* 2012. (Article ID 948593). Available from: <https://doi.org/10.1155/2012/948593>
29. Milton-Wildy K, Kenny P, Parmenter G, Hall J. Educational preparation for clinical nursing: The satisfaction of students and new graduates from two Australian universities. *Nurs Educ Today.* 2014. 34: 648–654. Available from: <https://doi.org/10.1016/j.nedt.2013.07.004>
30. Kenny P, Reeve R, Hall J. Satisfaction with nursing education, job satisfaction, and work intentions of new graduate nurses. *Nurse Educ Today.* 2016. 36: 230–235. Available from: <https://doi.org/10.1016/j.nedt.2015.10.023>
31. Laschinger HKS. Job and career satisfaction and turnover intentions of newly graduated nurses. *J Nurs Manag.* 2012. 20: 472–484. Available from: <https://doi.org/10.1111/j.1365-2834.2011.01293.x>
32. D'Ambra AM, Andrews DR. Incivility, retention and new graduate nurses: An integrated review of the literature. *J Nurs Manag.* 2014. 22: 735–742. Available from: <https://doi.org/10.1111/jonm.12060>
33. Flinkman M, Salanterä S. Early career experiences and perceptions - a qualitative exploration of the turnover of young registered nurses and intention to leave the nursing profession in Finland. *J Nurs Manag.* 2015. 23(8): 1050 – 1057. Available from: <https://doi.org/10.1111/jonm.12251>
34. Parker V, Giles M, Lantry G, McMillan M. New graduate nurses' experiences in their first year of practice. *Nurse Educ Today.* 2014. 34: 150–156. Available from: <https://doi.org/10.1016/j.nedt.2012.07.003>
35. Giallonardo LM, Wong CA, Iwasiw CL. Authentic leadership of preceptors: Predictor of new graduate nurses' work engagement and job satisfaction. *J Nurs Manag.* 2010. 18(8): 993–1003. Available from: <https://doi.org/10.1111/j.1365-2834.2010.01126.x>
36. Beecroft PC, Dorey F, Wenten M. Turnover intention in new graduate nurses: A multivariate analysis. *J Adv Nurs.* 2008. 62:41–52. Available from: <https://doi.org/10.1111/j.1365-2648.2007.04570.x>
37. Leigh JA, Douglas CH, Lee K, Douglas MR. A case study of a preceptorship programme in an acute NHS Trust - Using the European Foundation for Quality Management tool to support clinical practice development. *J Nurs Manag.* 2005. 13(6): 508–518. Available from: <https://doi.org/10.1111/j.1365-2934.2005.00570.x>
38. Brunero S, Lamont S. The process, logistics and challenges of implementing clinical supervision in a generalist tertiary referral hospital. *Scand J Caring Sci.* 2012. 26: 186–193. Available from: <https://doi.org/10.1111/j.1471-6712.2011.00913.x>
39. Monaghan T. A critical analysis of the literature and theoretical perspectives on theory-practice gap amongst newly qualified nurses within the United Kingdom. *Nurse Educ Today.* 2015. 35(8): e1–e7. Available from: <https://doi.org/10.1016/j.nedt.2015.07.003>

nedt.2015.03.006

40. Bukhari E. Nature of Preceptorship and Its Impact on Clinical. The University of Manchester; 2011.
41. Happell B. A model of preceptorship in nursing: Reflecting the complex functions of the role. *Nurs Educ Perspect.* 2009. *30*(6): 372–376. Available from: <https://doi.org/10.1043/1536-5026-30.6.372>
42. Billay D, Myrick F. Preceptorship: An integrative review of the literature. *Nurse Educ Pract.* 2008. *8*(4): 258–266. Available from: <https://doi.org/10.1016/j.nepr.2007.09.005>
43. Papp I, Markkanen M, Von Bonsdorff M. Clinical environment as a learning environment: Student nurses' perceptions concerning clinical learning experiences. *Nurse Educ Today.* 2003. *23*(4): 262–268. Available from: [https://doi.org/10.1016/S0260-6917\(02\)00185-5](https://doi.org/10.1016/S0260-6917(02)00185-5)
44. Löfmark A, Thorkildsen K, Råholm MB, Natvig GK. Nursing students' satisfaction with supervision from preceptors and teachers during clinical practice. *Nurse Educ Pract.* 2012. *12*(3): 164–169. Available from: <https://doi.org/10.1016/j.nepr.2011.12.005>