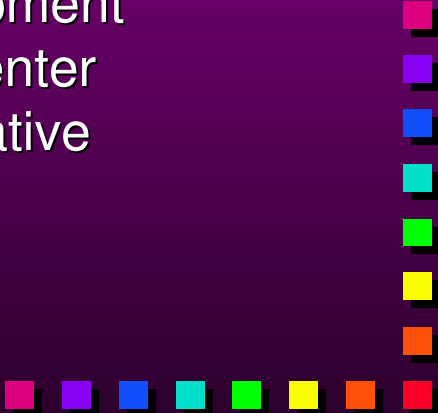




Preceptor Program

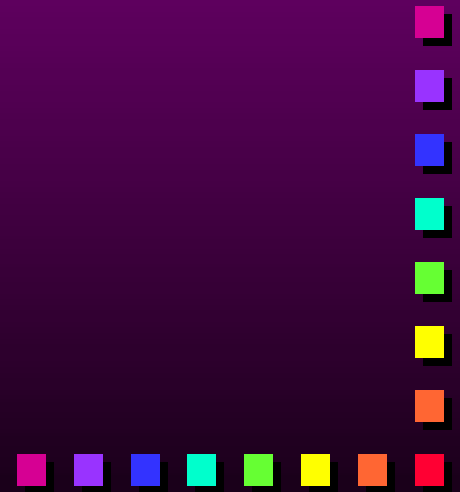
A Collaboration

California Economic and Workforce Development
Regional Health Occupations Resource Center
The Orange County Ethnic Workforce Initiative
The Nurse Workforce Initiative

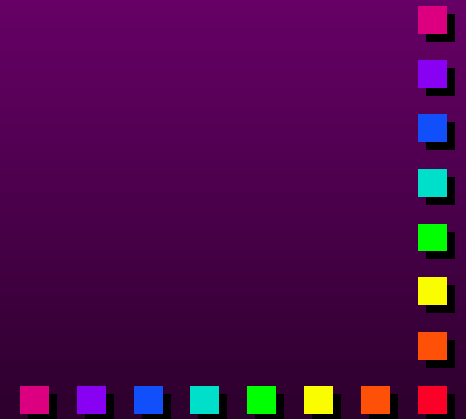
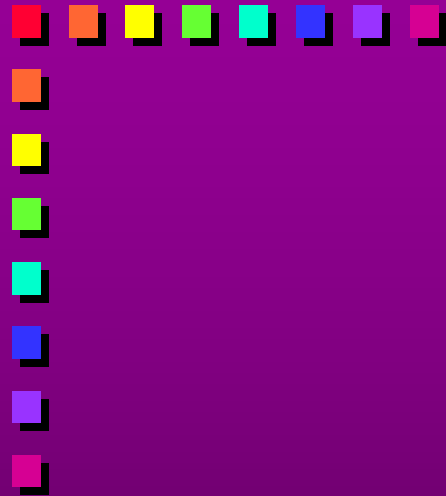


Program Overview

- Goal
- Program Objectives
- Preceptor Roles
 - Role Model
 - Educator
 - Facilitator
 - Evaluator



Icebreaker Activity



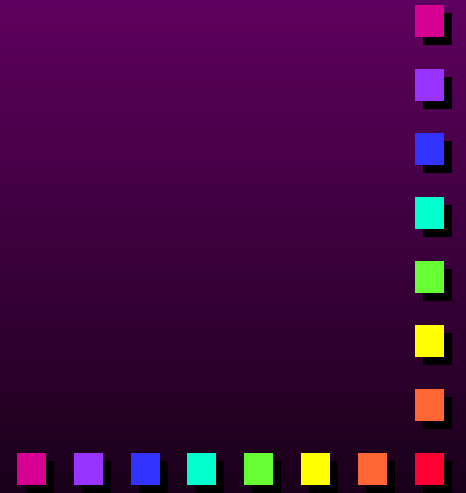
Module One

Preceptor Role



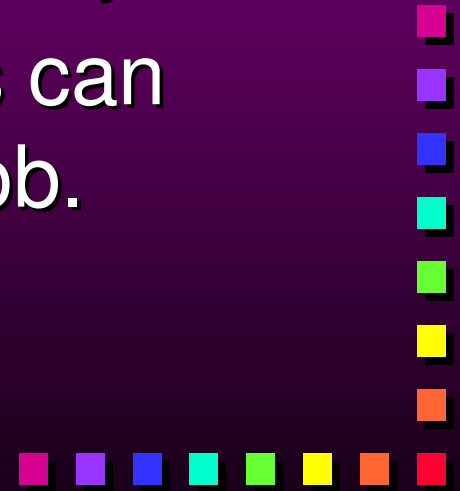
Definitions

- Preceptor
- Preceptee
- Preceptorship



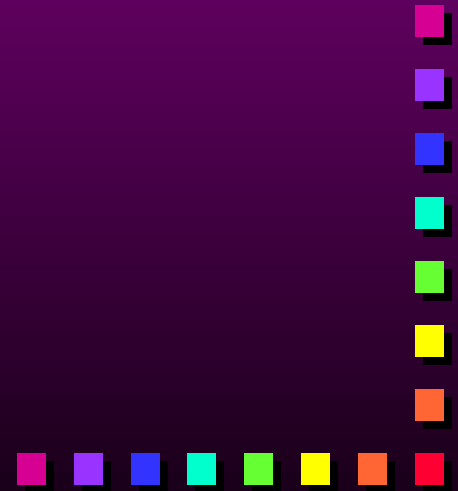
Module 1: Role

- DACUM
 - Develop A Curriculum
- A method to determine the competencies or tasks in a given job.
- Philosophy that expert workers can most accurately describe the job.



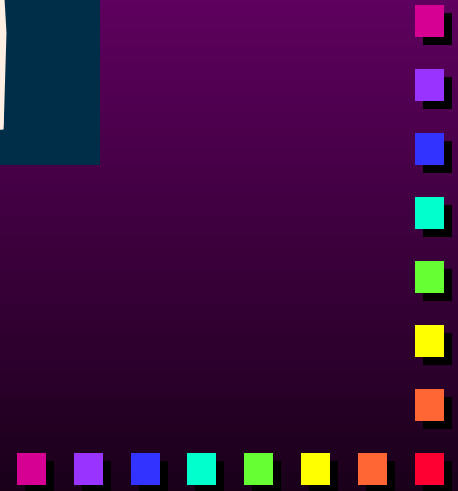
DACUM Process

- Job
- Duty
- Task
- Step
- Knowledge and Skills
- Equipment
- Traits and Behaviors



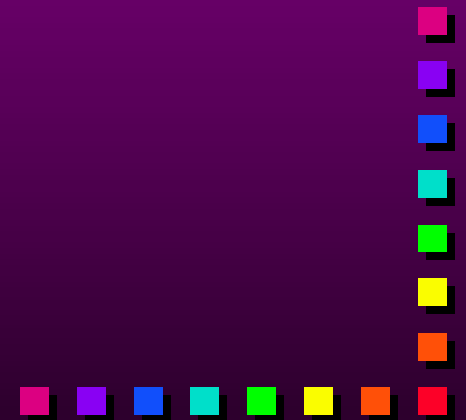
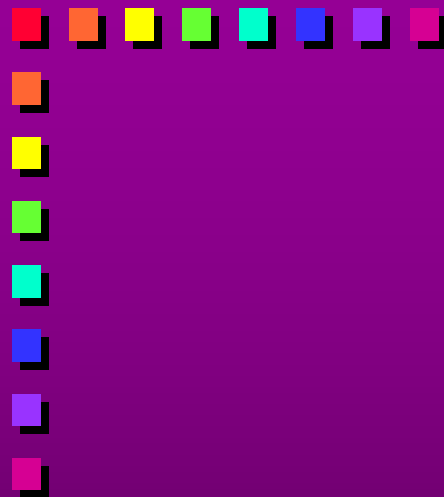
Role Transition

- Staff Nurse
- Preceptor



Activity

(preceptor qualities)



An Effective Preceptor

Knowledge



Skills

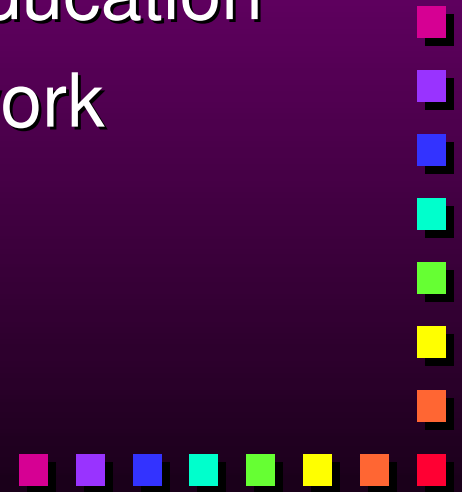


Attitudes



Knowledge

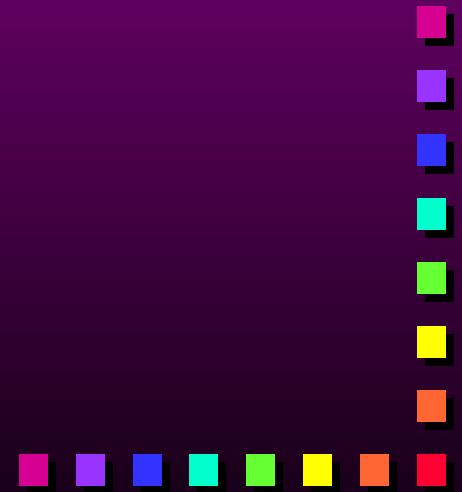
- Policies/procedures
- Practice standards
- Routines
- Documentation
- Preceptee's job description
- Biculturalism
- Resources
- Principles of teaching/learning/adult education
- Teamwork



Attitudes

- Respectful
- Realistic
- Patient
- Open-minded
- Dependable
- Good Listener

- Supportiveness
- Positive
- Sense of humor
- Constructive
- Mature
- Honest



Skills

- Patient care
- Communication
- Use of equipment
- Use of resources
- Interpersonal relations

- Work organization
- Problem-solving
- Decision-making
- Priority-setting
- Delegation



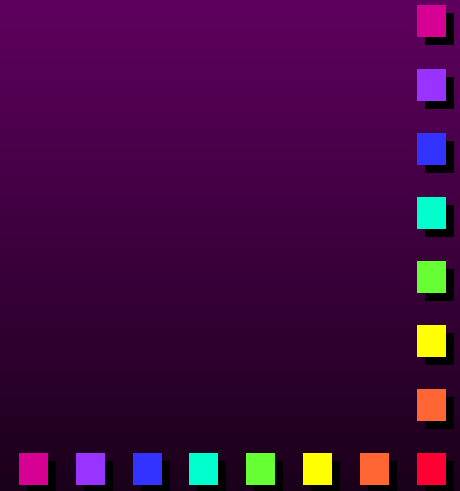
Preceptor's Expectations

- Role definition
- Performance expectations
- Delineation of responsibilities
- Enumeration of expected outcomes for the preceptor program
- Valid and reliable evaluation tools



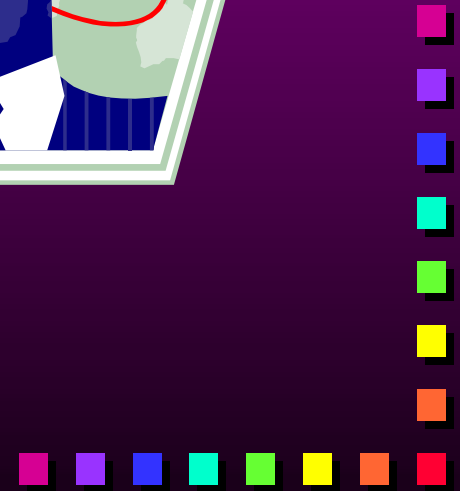
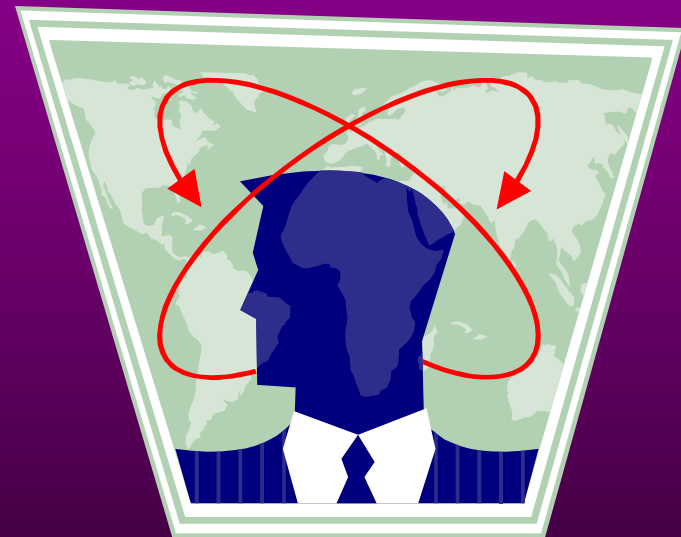
Preceptor's Expectations

- Available resources
- Support system
- Adequate preparation for the role
- Adequate training



Responsibilities of the Preceptee

- Identifies own learning needs
- Is active in the learning process
- Readily asks questions



Responsibilities of the Preceptee (continued)

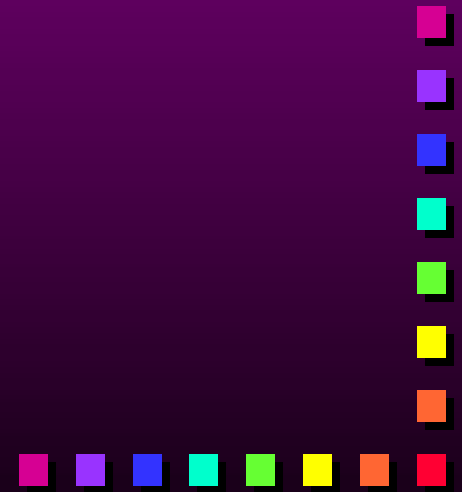


- Reads and follows policy/procedure manuals
- Utilizes resources
- Identifies goals
- Competencies
- Reports concerns
- Evaluates



Preceptee Expectations

- Job Description
- Preceptor/Job Expectations
- Unit staff
- Responsibilities
- Evaluation Tools/Measures
- Hands-on Experiences
- Support Systems



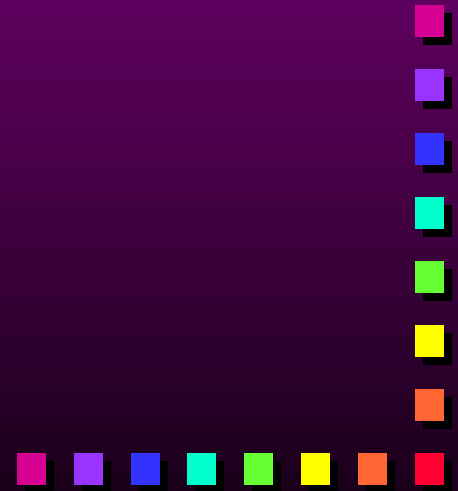
Stress

- Internal Stress
- External stress



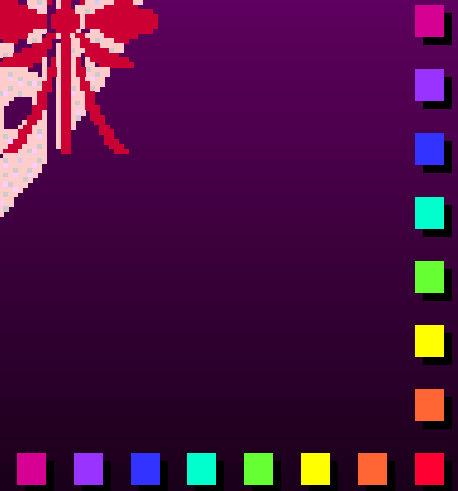
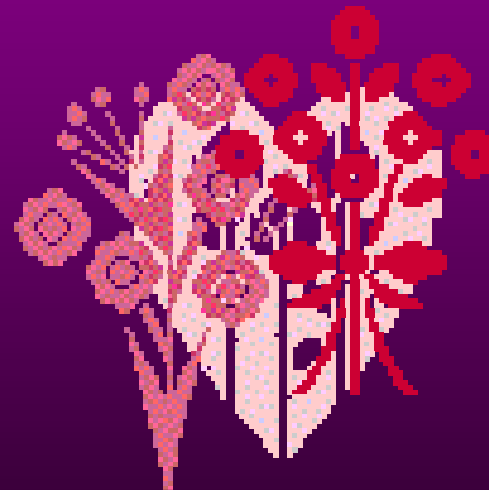
Reality Shock

- Reality shock phases
 - Honeymoon
 - Shock
 - Recovery
 - Resolution



Reality Shock - Honeymoon

- Characteristics
 - Everything is wonderful
 - Excited
 - Rose-colored glasses
 - Enthusiastic



Reality Shock - Honeymoon

■ Strategies

- Take an interest
- Help to set realistic expectations
- Encourage to ask questions about the history of the organization
- Assist to focus on developing a reputation for competence



Reality Shock - Shock

- Characteristics
 - Anger, moral outrage
 - Frustration, rejection
 - Confusion
 - Disappointment
 - Disillusionment



Reality Shock - Shock

■ Strategies

- Be a good listener
- Encourage a look at current learning status
- Focus on the good things
- Create a climate for learning
- It is all right to be a learner
- Prevent feelings of abandonment



Reality Shock - Recovery

■ Characteristics

- Stress is reduced
- Able to grasp the role
- Realized the truth; more than one perspective exists
- Sense of humor begins to return



Reality Shock - Recovery

■ Strategies

- Nurture ability to see humor in the situation
- Give positive feedback; share stories about preceptor's own first work experience
- Assist to turn disappointments into learning experiences



Reality Shock - Resolution

- Characteristics

- Adjustment

- job hopping

- returning to school

- Bicultural adaptation

- Integration of two conflicting value systems



Reality Shock - Resolution

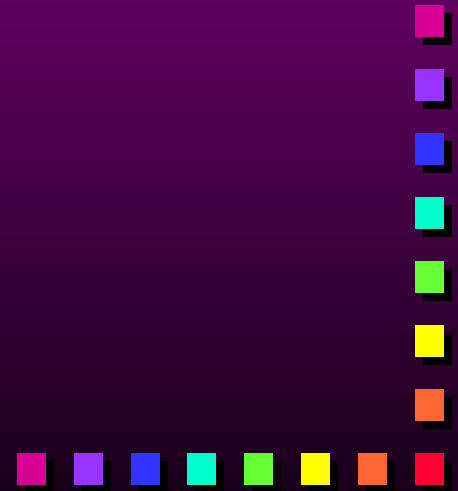
■ Strategies

- Assist to evaluate work situation objectively
- Help identify appropriate and obtainable goals
- Discuss constructive problem-solving



Implementing a Program

- Roles
- Responsibilities
- Plan



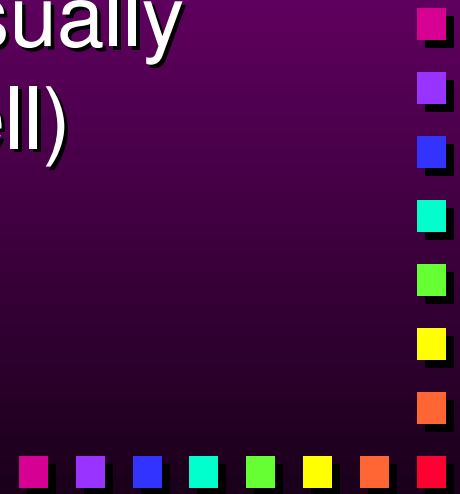
Module Two

Role Model



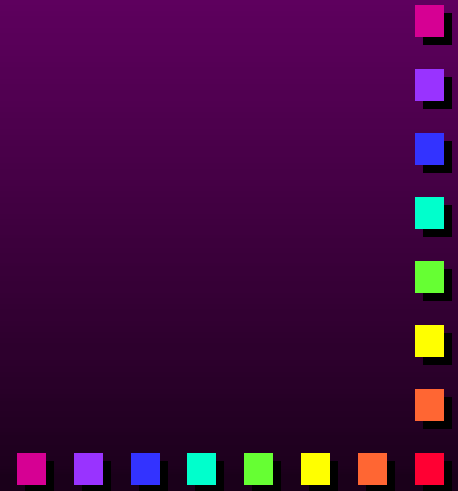
Module 2: Role Model

- Role Modeling is a process in which an individual identifies with and assumes the values and behaviors of another person that ultimately results in behavior modification that is usually permanent. (Bidwell & Braswell)



Role Model

- Demonstrates by example how competent staff perform their job
- Attributes include
 - Clarity
 - Consistency
 - Openness
 - Communicativeness
 - Specificity
 - Accessibility



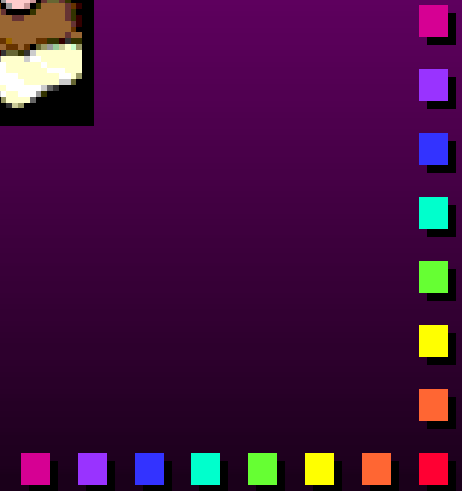
Role Model

- Provides competent patient care.
 - Examples:



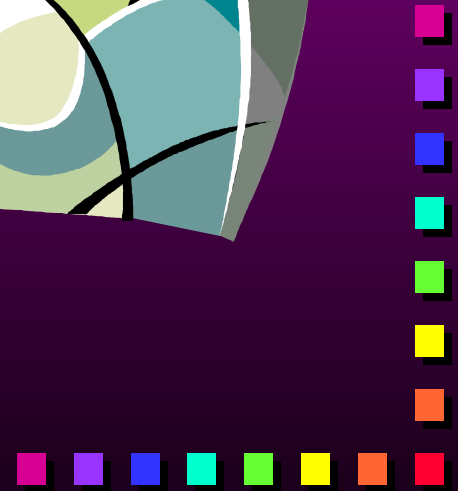
Role Model

- Maintains current practice.
 - Examples:



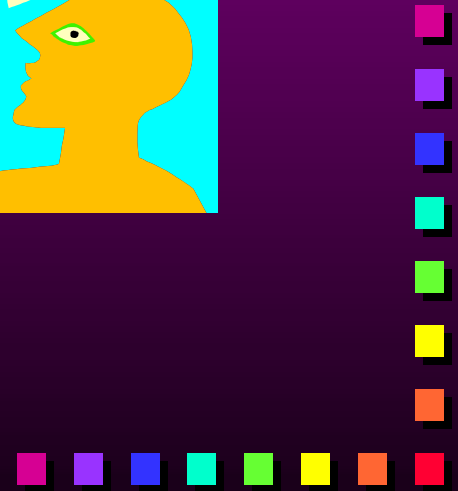
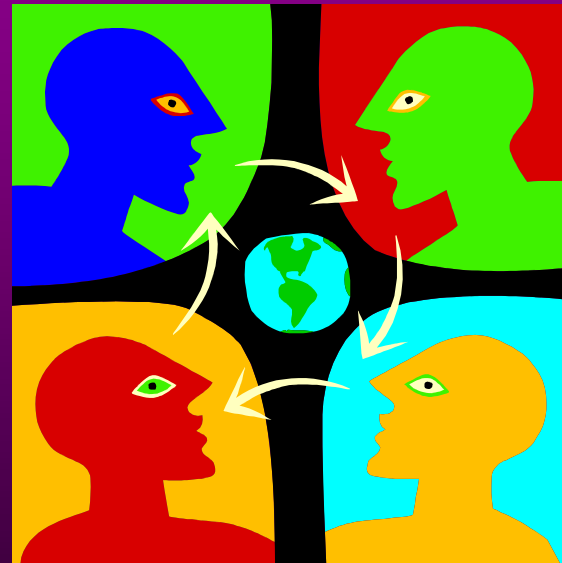
Role Model

- Participates in unit governance
 - Examples:



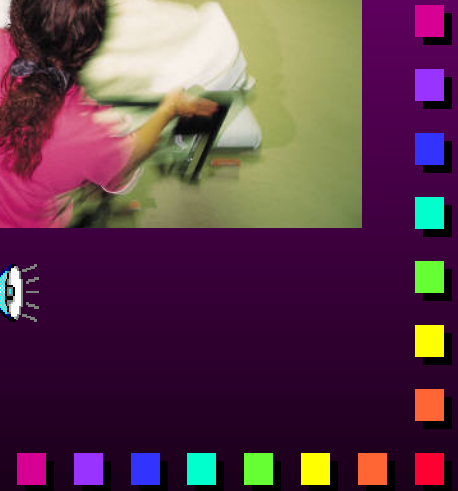
Role Model

- Serves as resource person.
 - Examples:



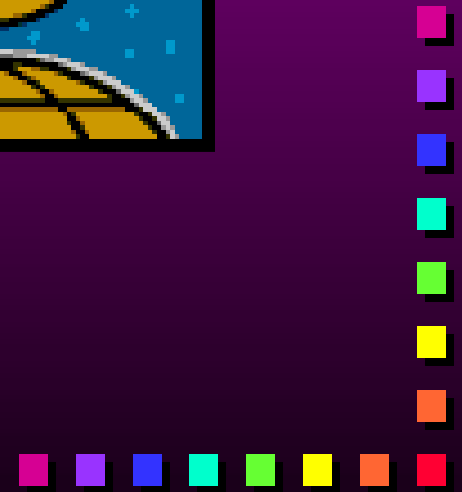
Role Model

- Maintains effective working relationships with all members of the healthcare team.
 - Examples:



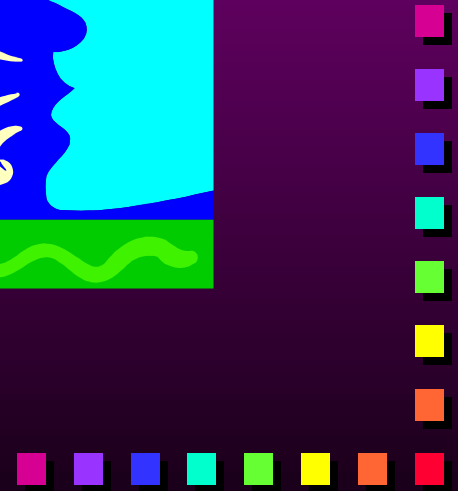
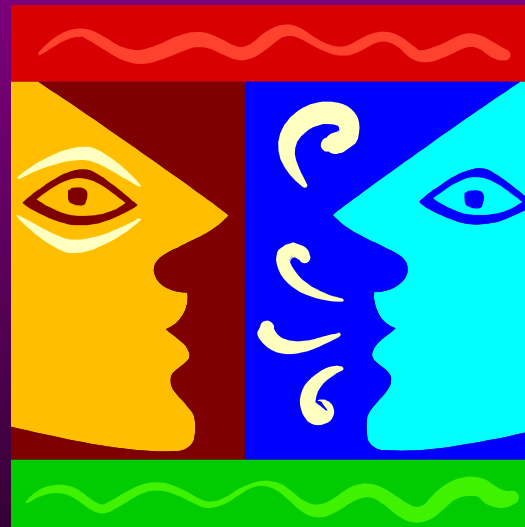
Role Model

- Demonstrates time management and organizational skills.
 - Examples:



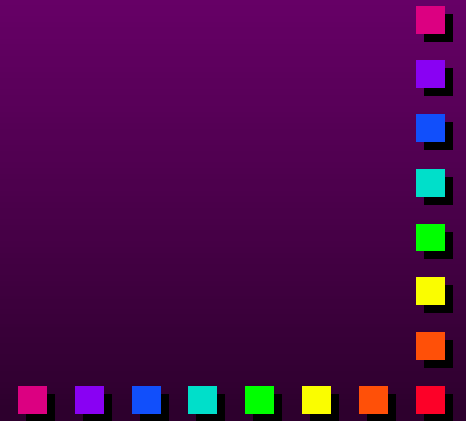
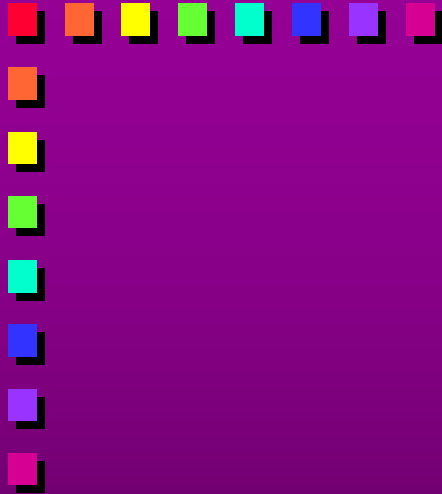
Role Model

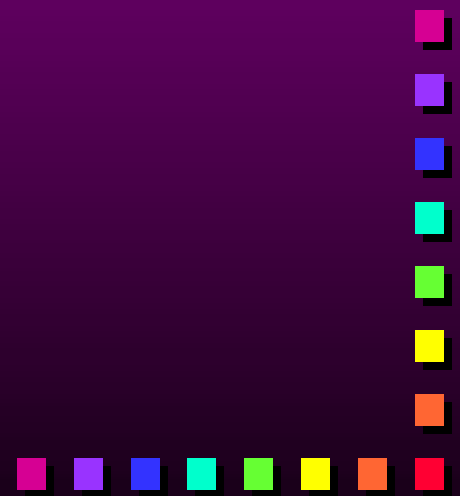
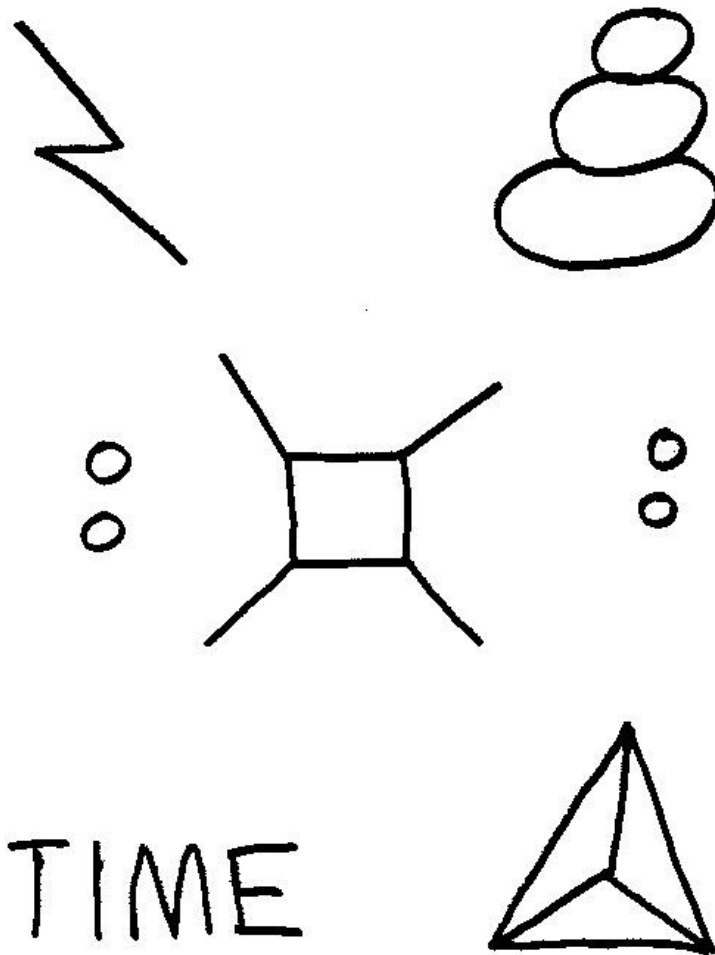
- Promotes effective communication.
 - Example:

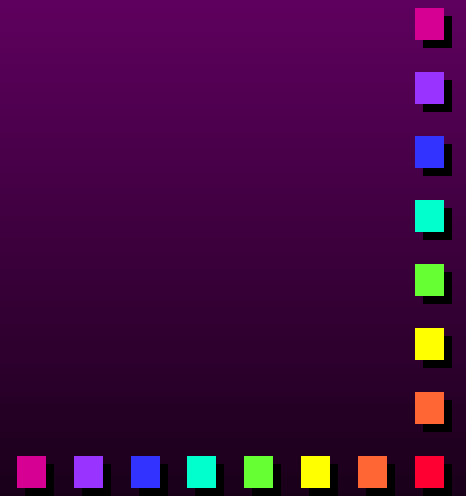
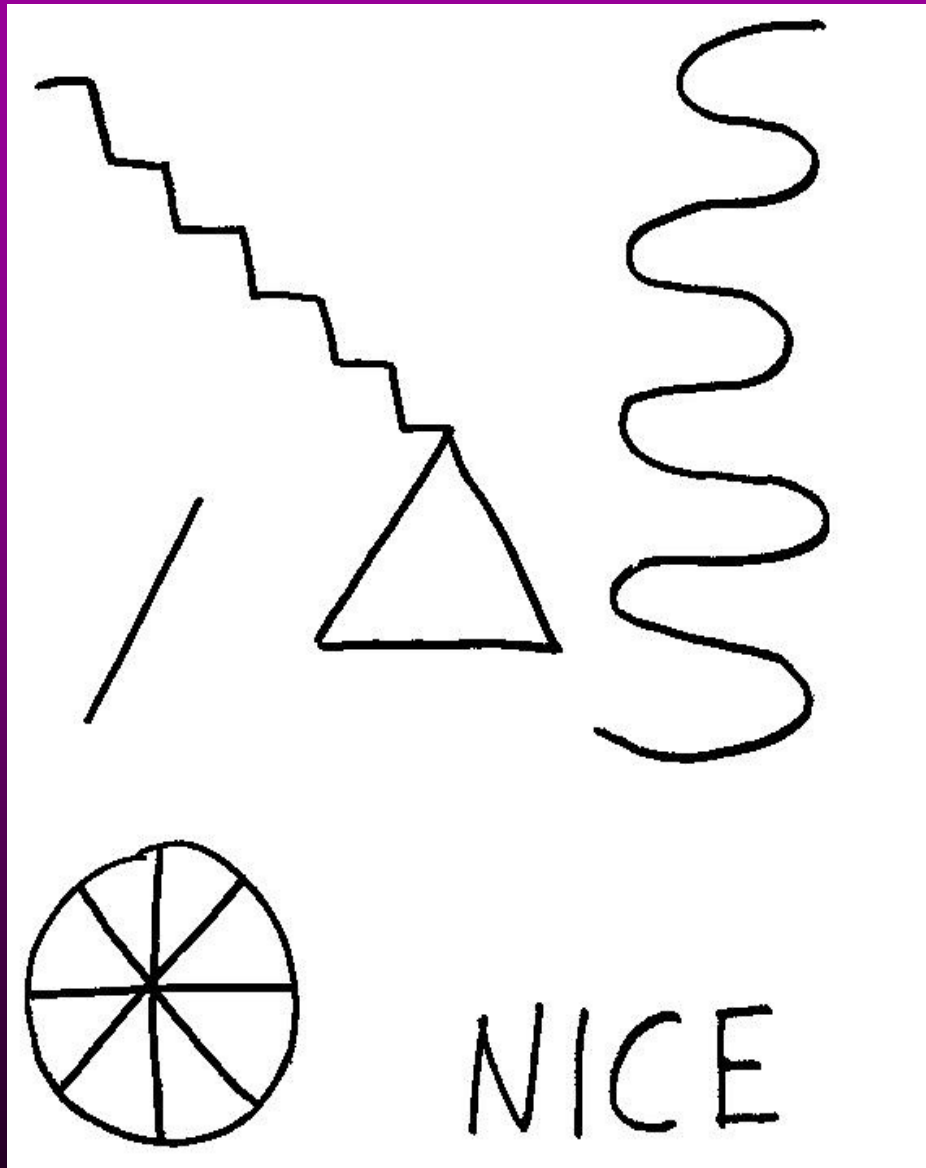


Activity

(drawing)

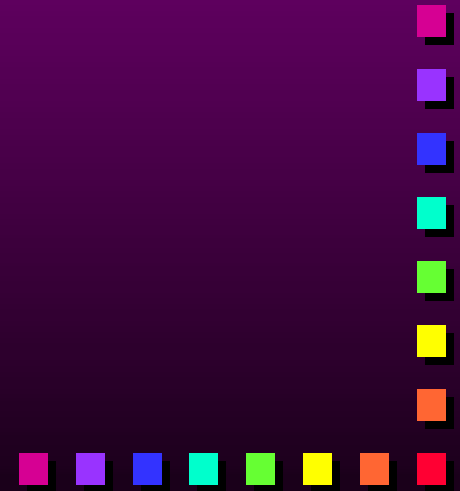






Role Modeling Communication

- Who
- What
- When
- Where
- How
- Why



Module Three

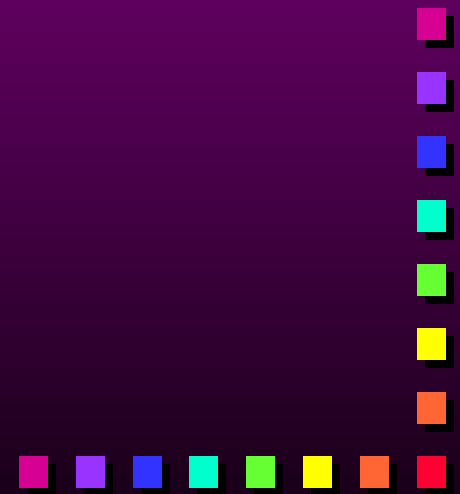
Educator



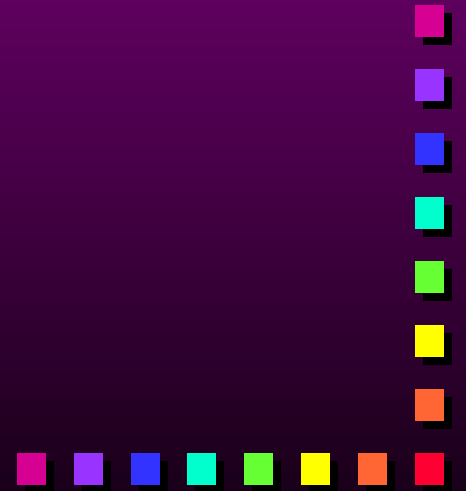
Learning:

A Higher Mental Process

- Differs from instinct
- Complex
- Lots of theories
- Still researching.....



What influences learning?



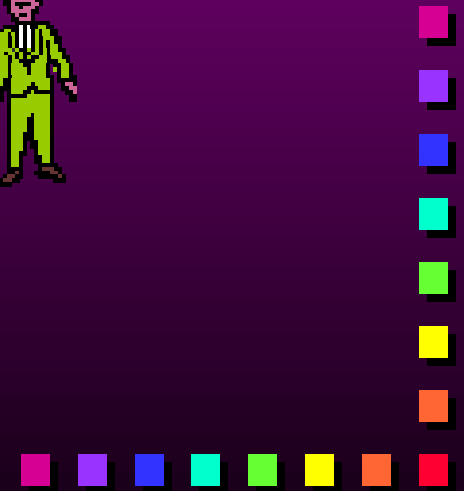
Environment

- Stress
- Noise
- Busyness

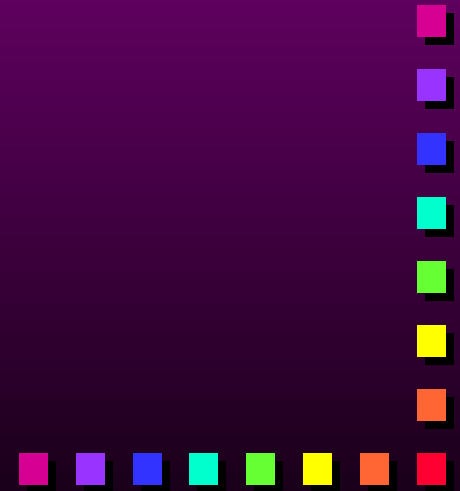
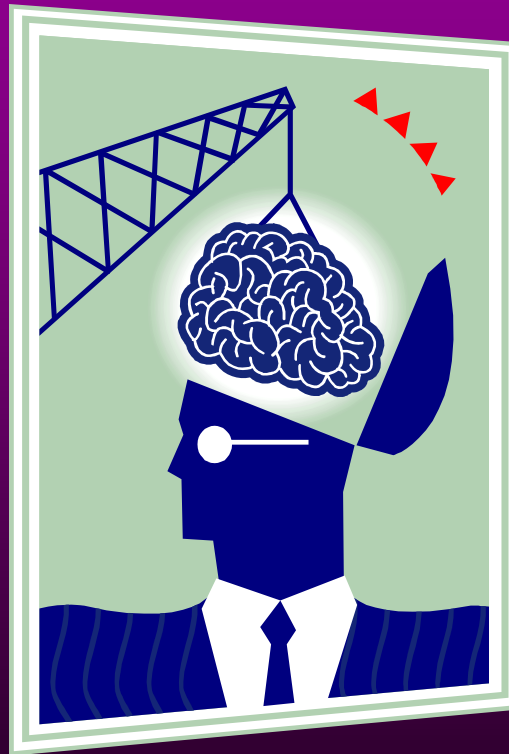


Culture

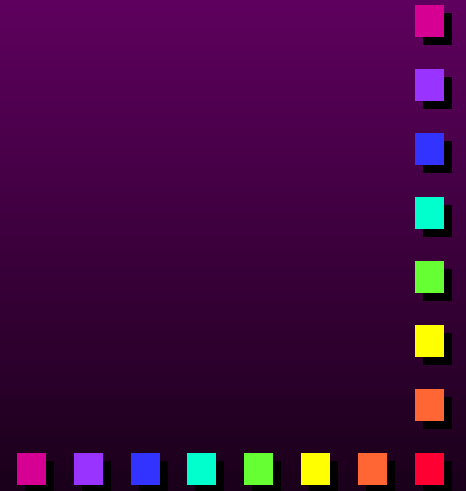
- Generational
- Ethnic
- Gender



Intellectual Ability



Primary Language



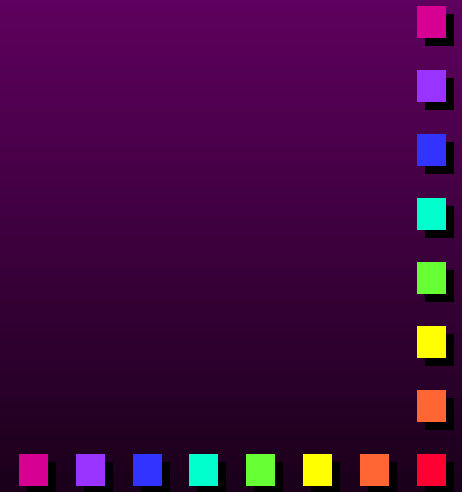
Philosophy of Education

- Liberal
- Progressive
- Behaviorist
- Humanistic
- Radical



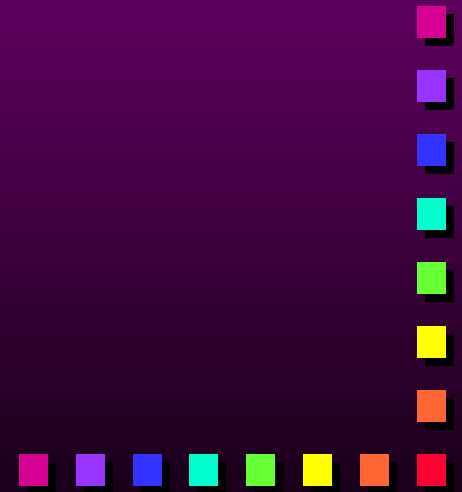
Memory

- Learning by association
- Learning through contextualism



Transfer of Learning

- Program participants
- Program design and delivery
- Program content
- Changes required to apply learning
 - Resistance to change
 - Activity
- Organizational context
- Community/Societal forces



Categories of Learning

- Knowledge
- Attitudes
- Skills



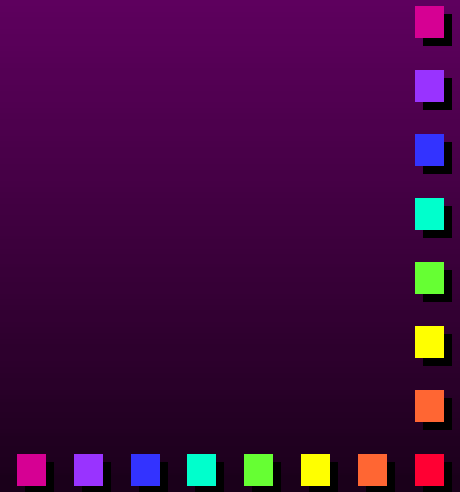
Kolb's Learning Style Inventory

- Keep sheet together
- Rate each question
- Don't try to read into the questions
- Go with your first response
- Don't go back
- Press hard to go through to back copy
- Follow directions for scoring

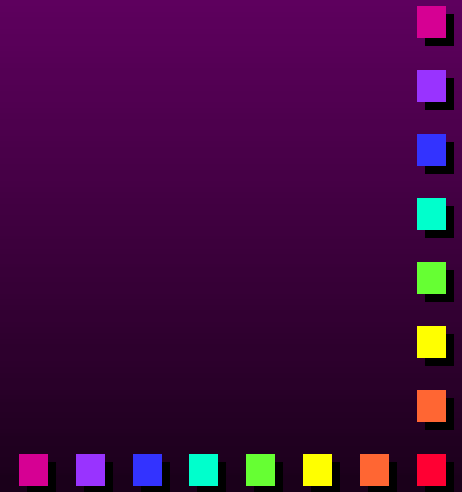
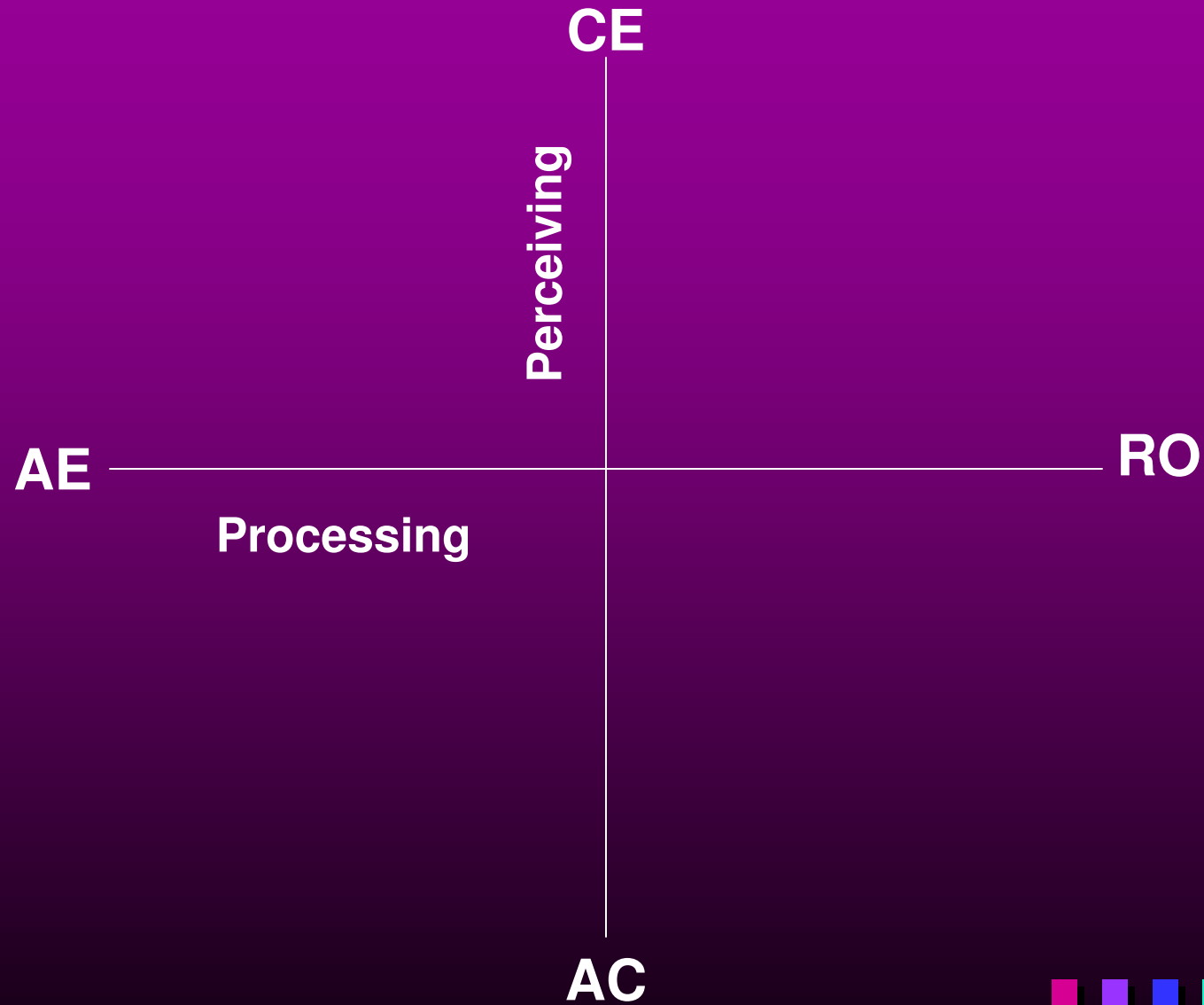


Ranking

- 4= most
- 1=least
- 3= next most
- 2= left over

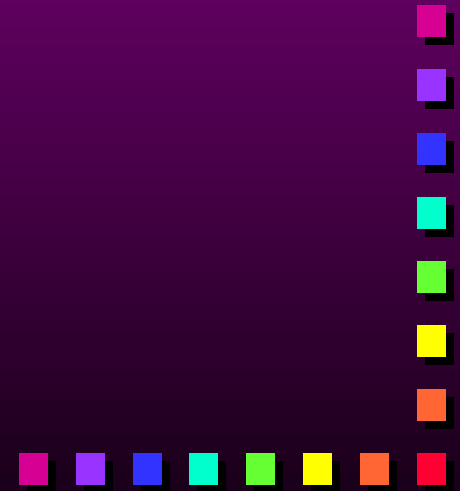


The Learning Process



Learning Styles

- Concrete Experience (CE)
- Reflective Observation (RO)
- Abstract Conceptualization (AC)
- Active Experimentation (AE)



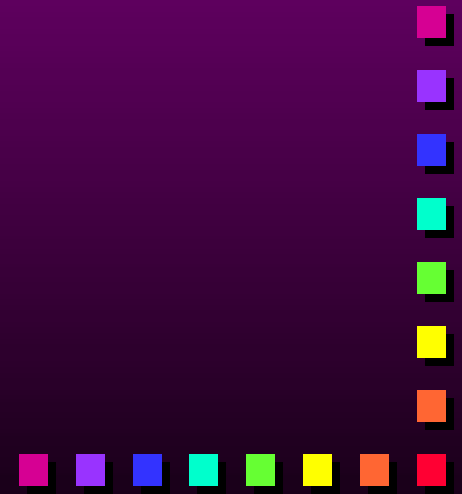
Concrete Experience

- Learning opportunity
- Personal meaning
- Why is this important to me?
- Feelings important



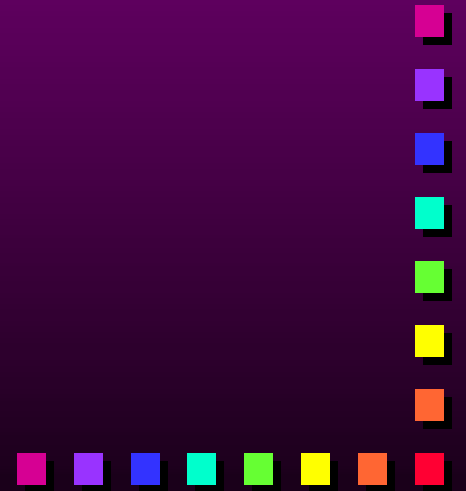
Abstract Conceptualization

- Logic & ideas
- Systematic planning
- Thirst for knowledge
- Feelings less important



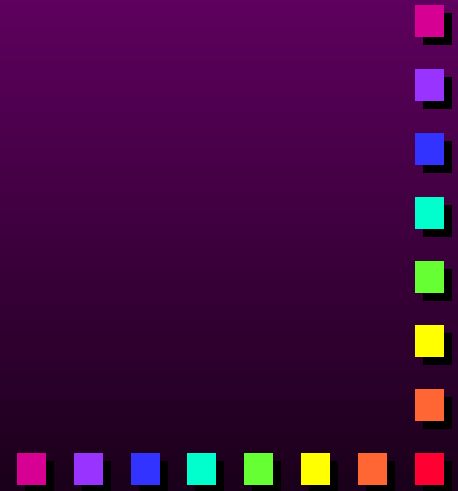
Reflective Observation

- Planning
- Mull it over
- Need time

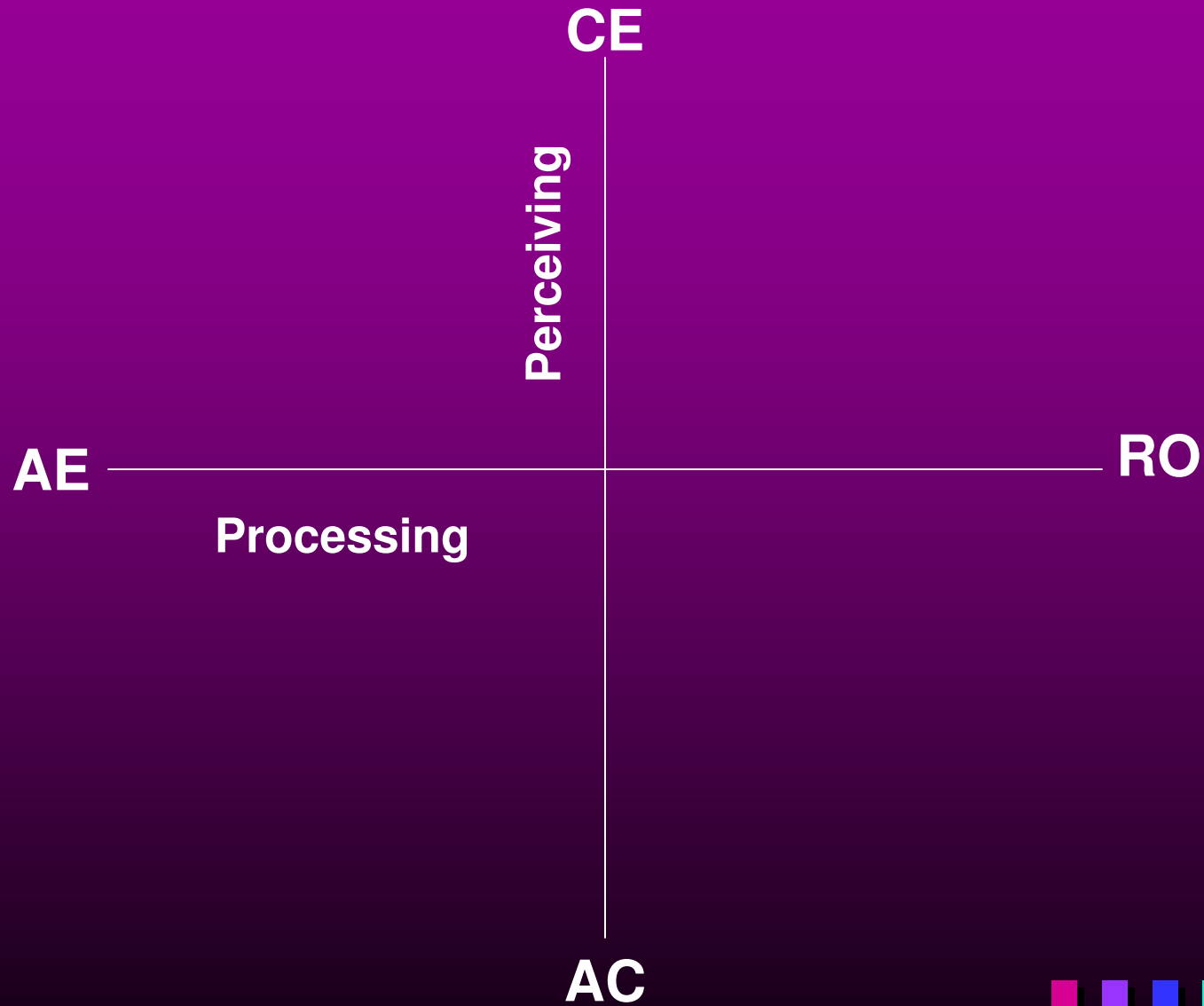


Active Experimentation

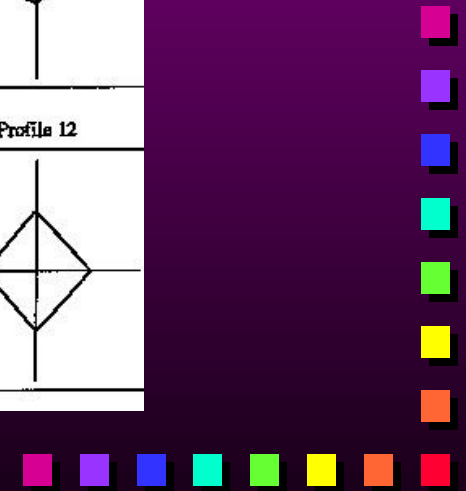
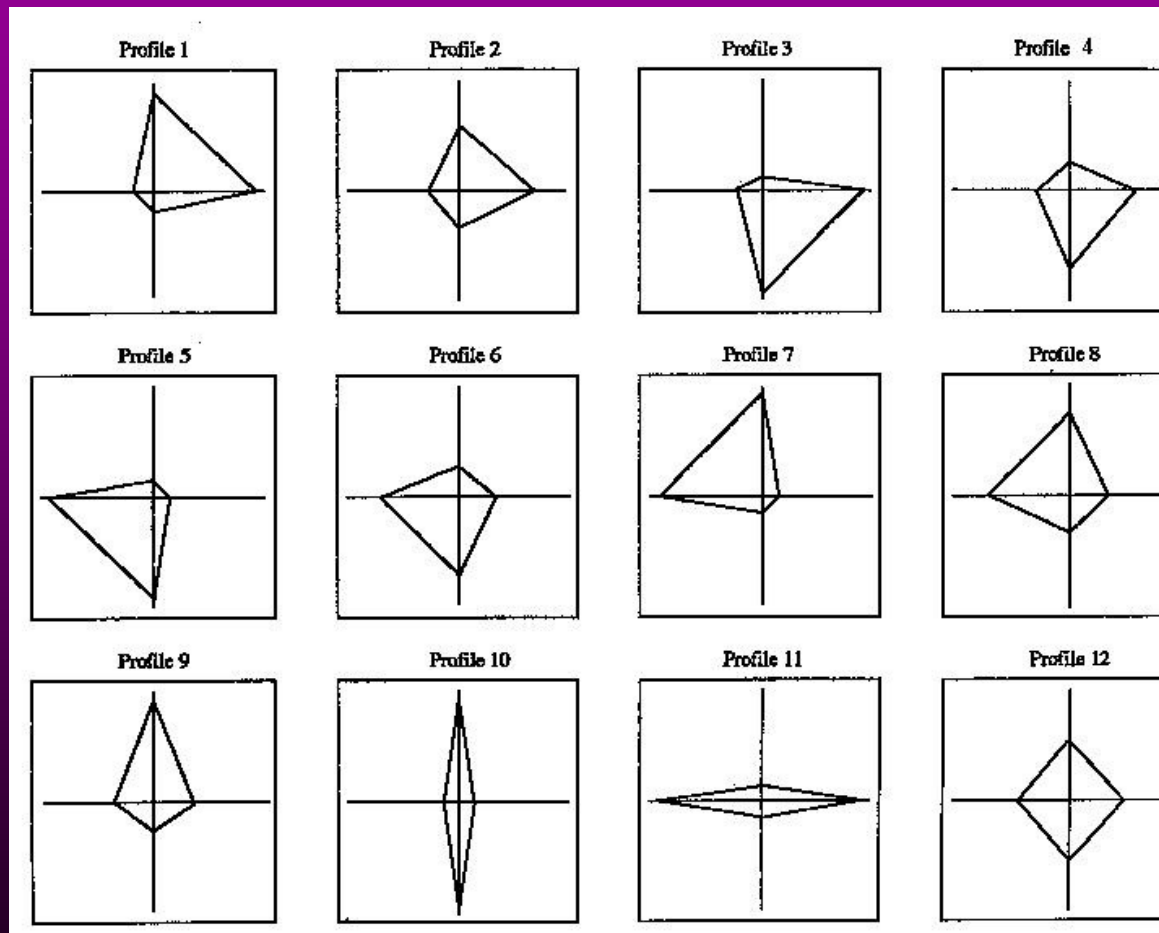
- Does this work?
- Practical
- Hands-on



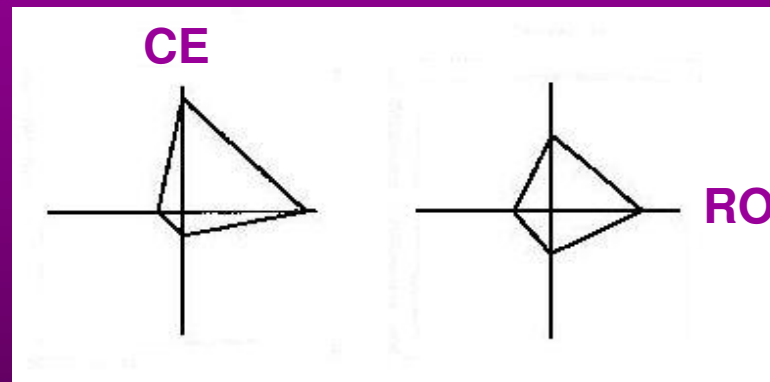
The Learning Process



Sample Learning Profiles



Profiles 1 and 2

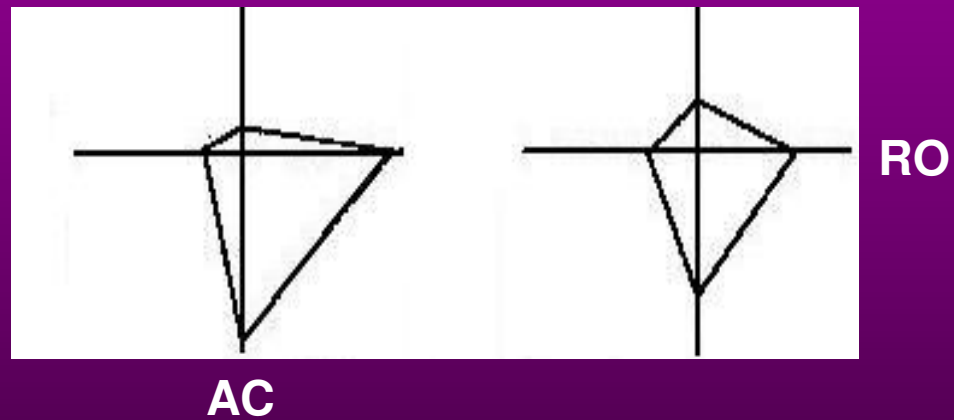


Concrete Experience and Reflective Observation

Reflectors



Profiles 3 and 4

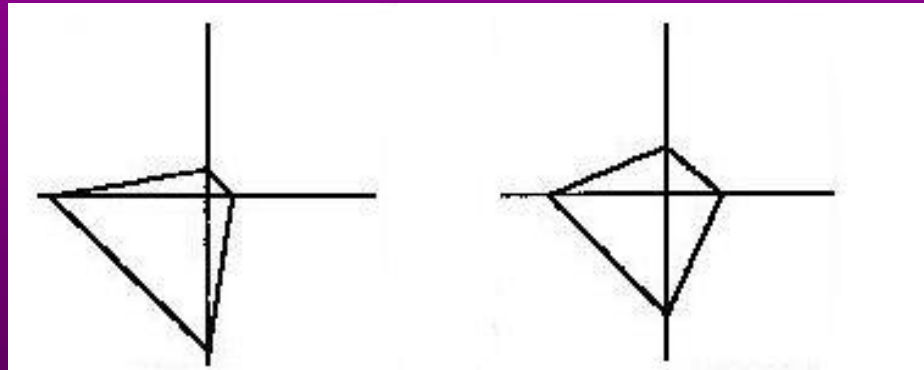


Abstract Conceptualization and Reflective Observation
Theorizers



Profiles 5 and 6

AE



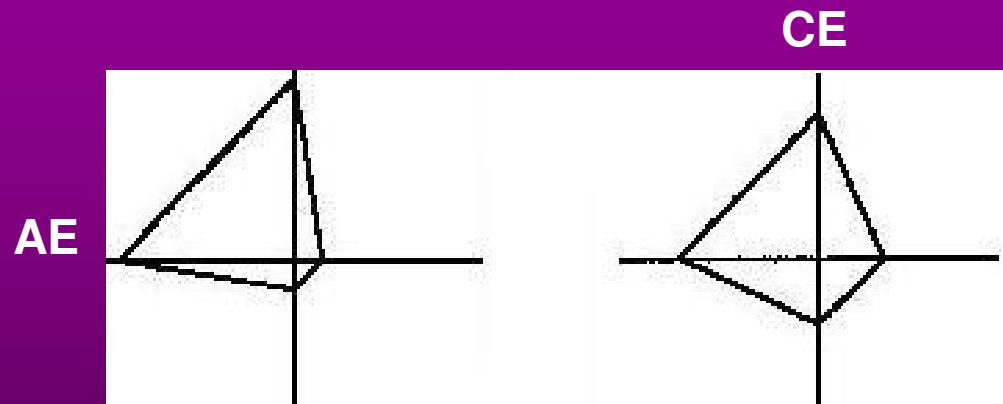
AC

Abstract Conceptualization and Active Experimentation

Pragmatists



Profiles 7 and 8

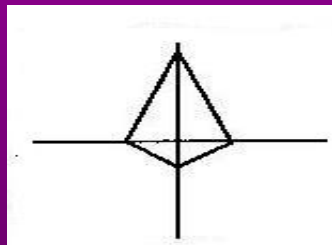


Active Experimentation and Concrete Experience
Activists

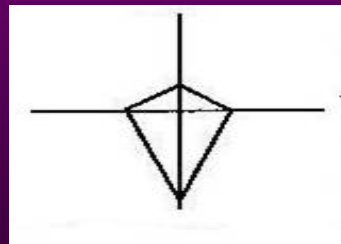
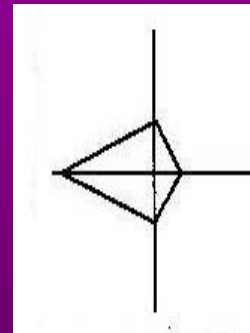


Profile 9

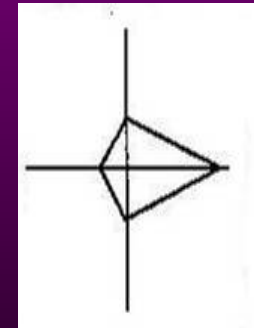
CE



AE



AC

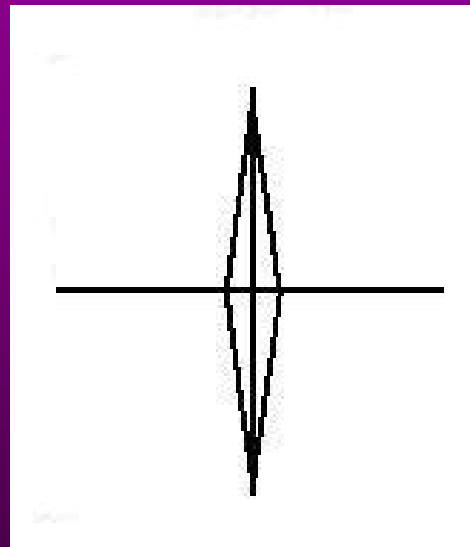


RO

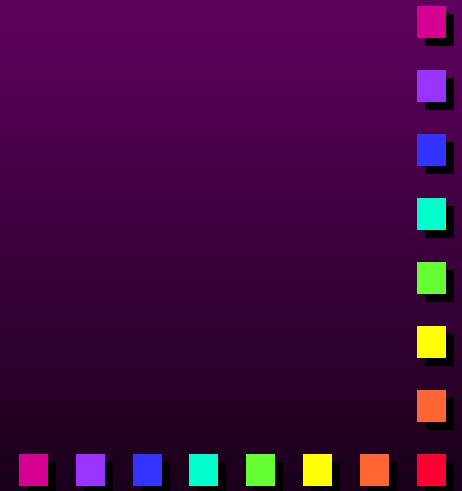


Profile 10

CE

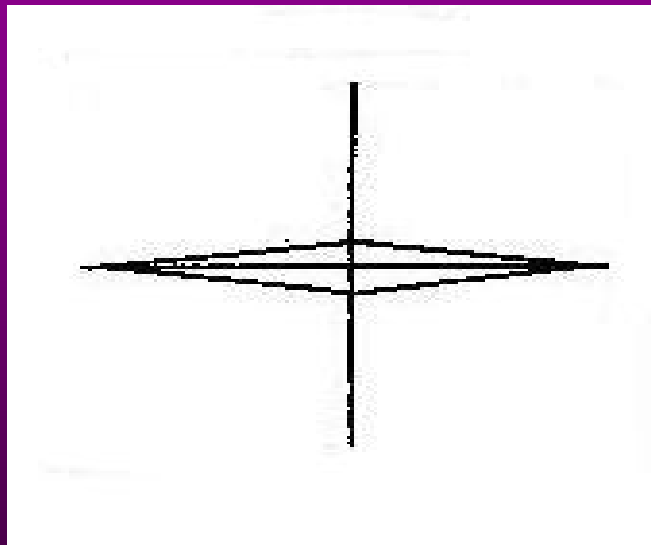


AC

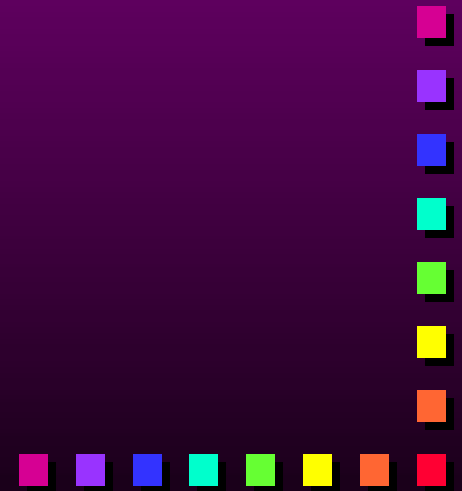


Profile 11

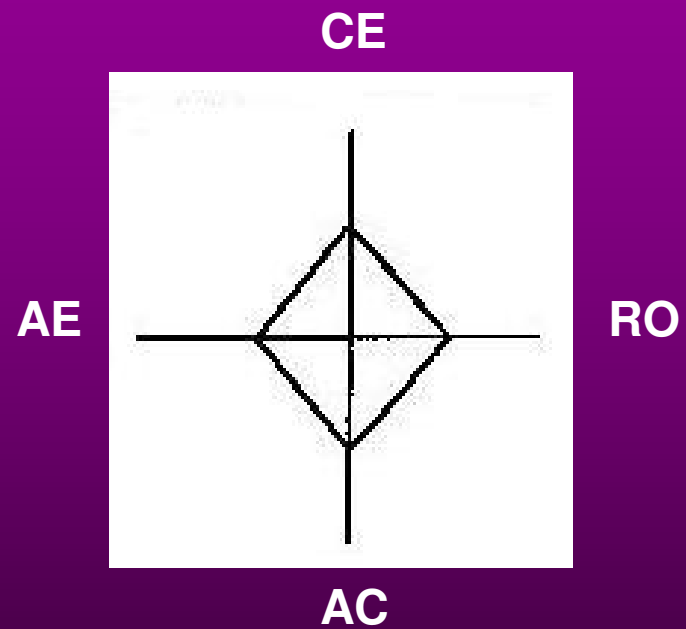
AE



RO

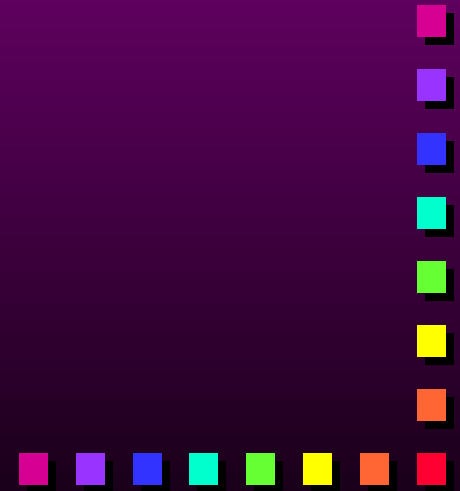


Profile 12

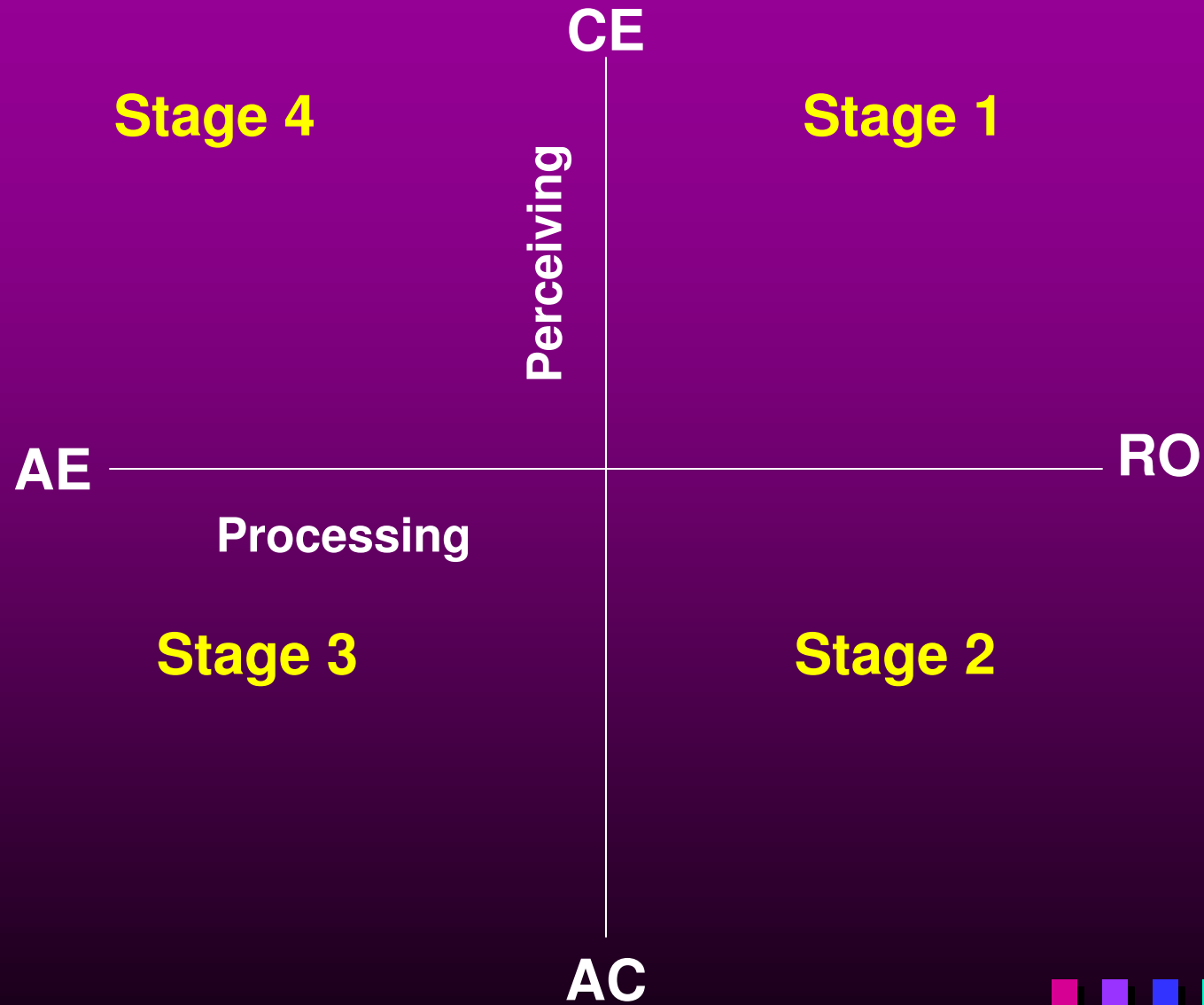


Comparing Learning Styles

- No good or bad, just different
- How you learn best
- Focus on improving other areas
- Respect the differences

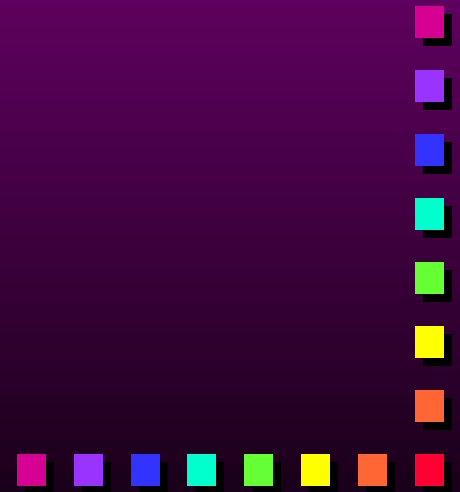


The Learning Process



Learning Activities

- Stage 1
 - Personal Interest
 - Reason for learning
 - Motivation
 - How does it relate to me



Learning Activities

- Stage 2
 - Gather important facts
 - Direct teaching



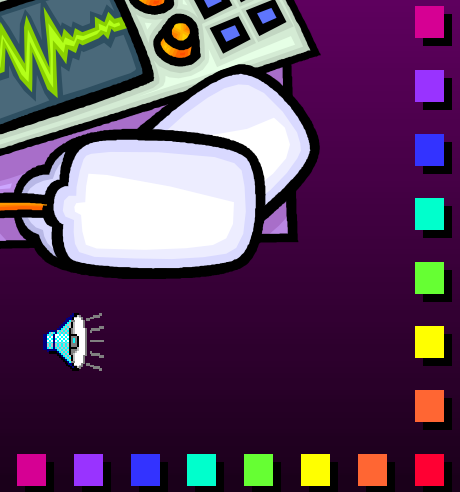
Learning Activities

- Stage 3
 - Using the material
 - Hands-on practice
 - Experimental
 - Action-oriented



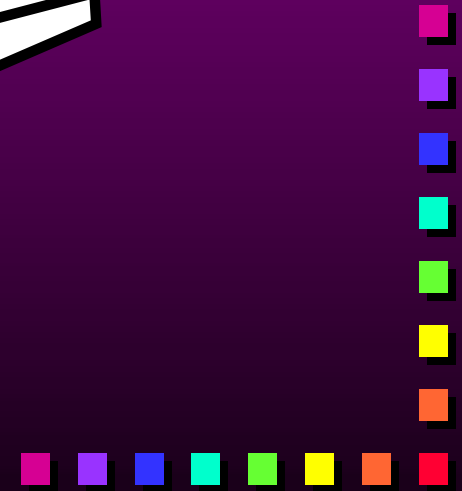
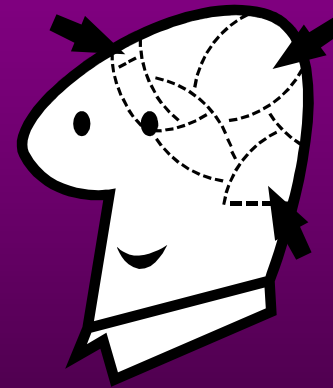
Learning Activities

- Stage 4
 - Integration into practice
 - Relate to information you already hold



Additional Learning Styles

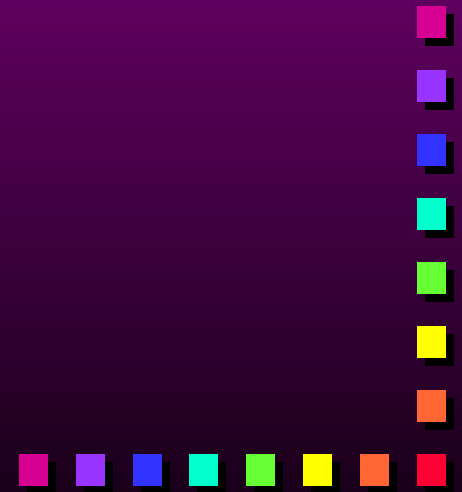
- Logical/mathematical
- Verbal/linguistic
- Intrapersonal
- Interpersonal
- Visual/spatial
- Body/kinesthetic
- Musical/rhythmic



Principles of Adult Learning

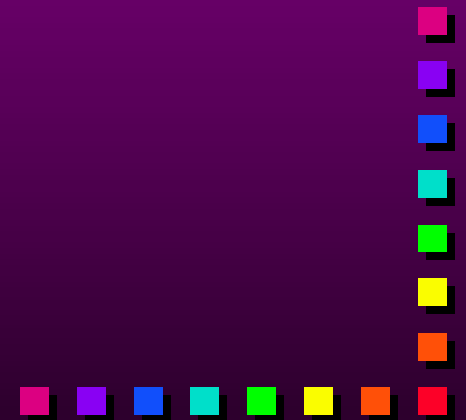
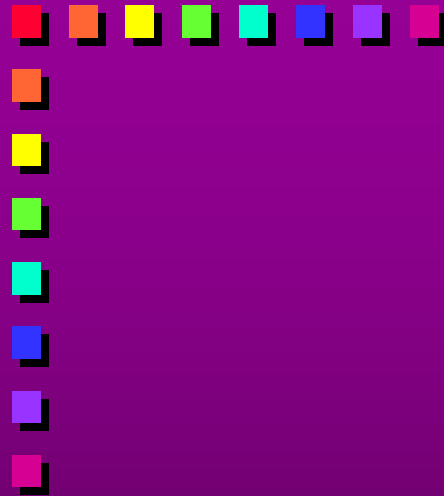
- Malcolm Knowles
- Learning retention
- Relationships to Kolb's work

AE	CE
AC	RO



Activity

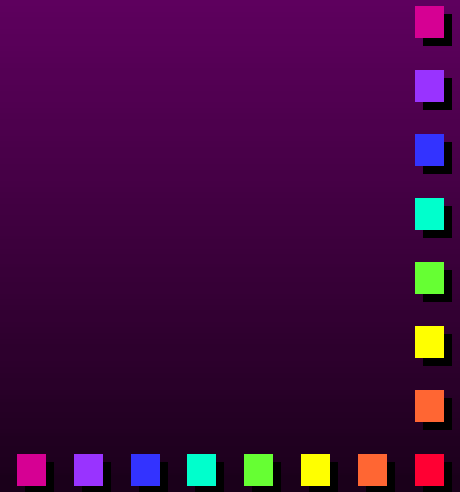
(napkins)



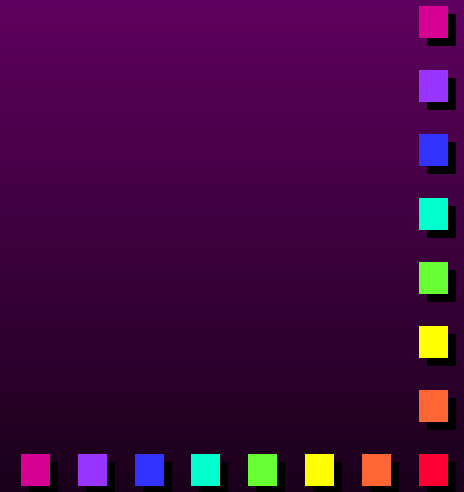
Teaching Psychomotor Skills

■ Steps

- Prepare
- Present
- Try-out
- Follow-up



Cycle of Teaching



Prepare

- Plan
- Assess
readiness
- Motivate



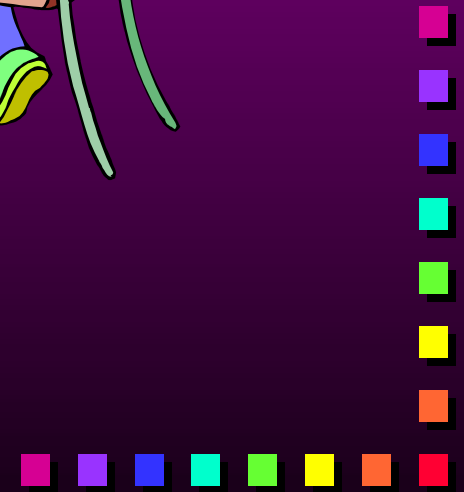
Present

- Demonstration
- Return demonstration



Try out

- Trial with cueing by instructor
- Behavior modeling
- Reinforce



Follow-up

- Encourage questions
- Feedback
- Model behavior
- Taper off
- Evaluate



Psychomotor Skills

- Effective methods in teaching
 - Be prepared
 - Motivate
 - Create safe learning environment
 - Develop a trusting relationship with preceptee



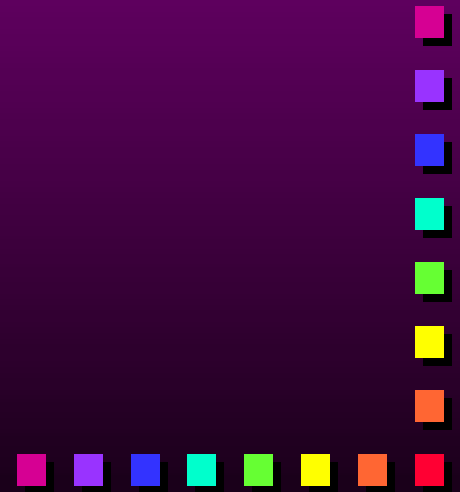
Determining Learning Needs

- Current level of performance
- Identify what needs to be learned
- Prioritize Needs
 - High risk/high frequency
 - Mandated
- Learning needs mutually agreed-upon



Levels of Competency

- Novice
- Advanced beginner
- Competent
- Proficient
- Expert



Selecting Teaching Methods

Knowledge



Skills



Attitudes

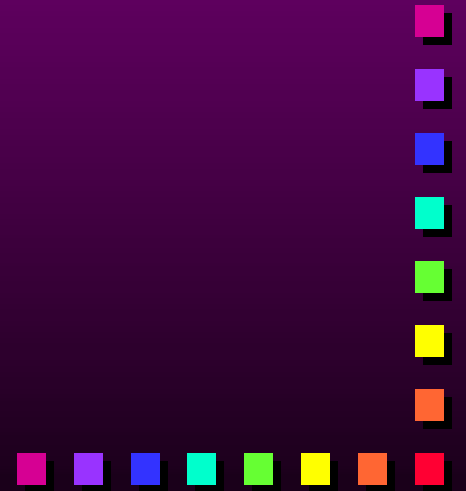


Knowledge	Attitudes	Skills	Kolb	Learning Activity
				Reading
				Role play
				Providing patient care
				Practice on Mannequins
				Asking questions



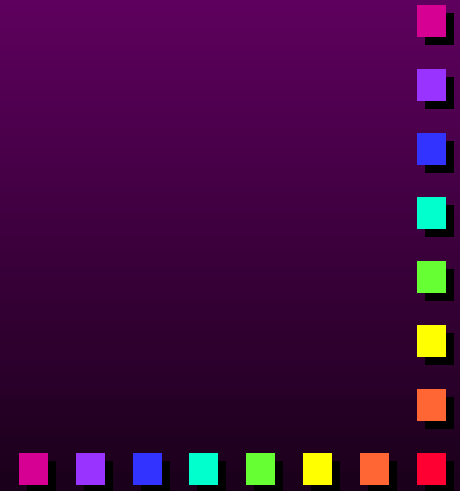
Creating a Learning Plan

- Who?
- What?
- When?
- Where?
- How?
- Why?



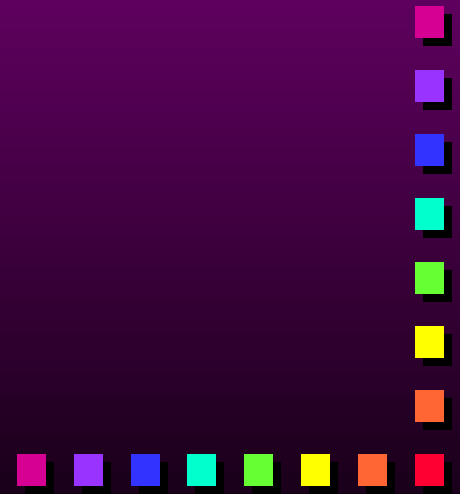
Goal Setting

- The most important thing about goals is having them.



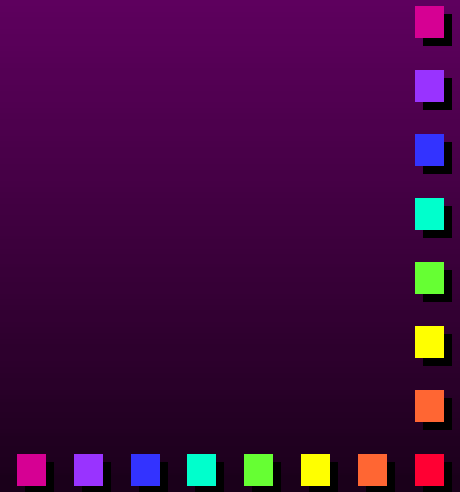
Goal Setting

- Purpose
- Benefits
- Barriers



Goal Characteristics


- Mutual
- Relevant
- Positive
- Realistic
- Measurable
- Written
- Specific





Activity

Write one positive, realistic, measurable, and obtainable goal you might set for a preceptee in your work setting.



Using Goals

- Meet with preceptee regularly
- Encourage preceptee to come prepared with a list and self-evaluation
- Limit number of goals
- Do not duplicate competency lists
- Share ideas
- Plan to reevaluate



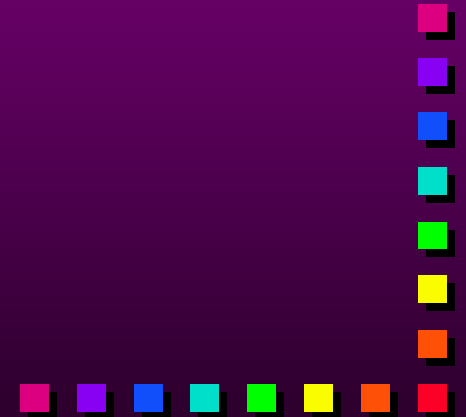
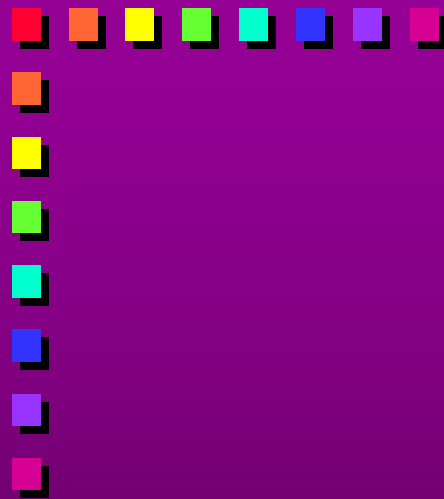
Model Goal Setting

- Long Term Goals
- If you want to do something better, you must do something different that requires a change.
- Letter to self



Day Two

Preceptor Workshop





Review Homework Assignments



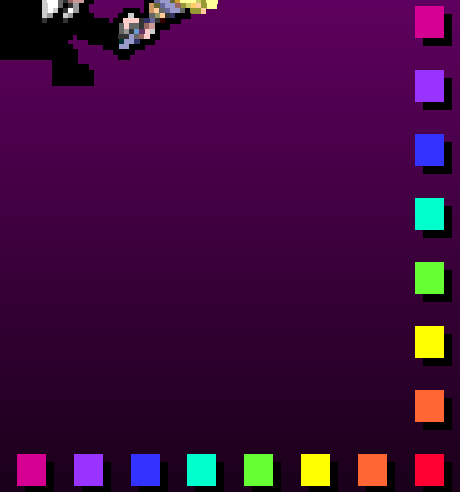
Module Four

Facilitator



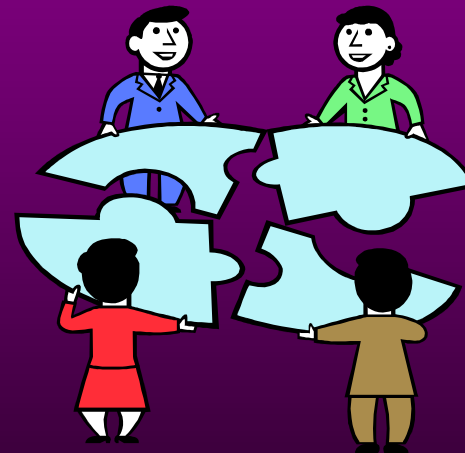
Facilitator

- Familiarize with physical environment
 - People tool
 - Scavenger hunt



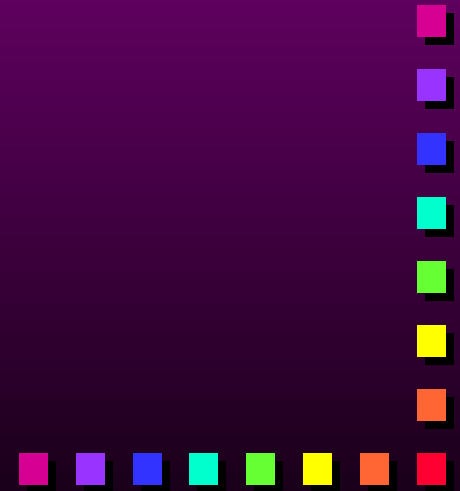
Facilitator

- Promote sense of belonging
 - Socializing to the unit
 - Unwritten rules



Facilitator


- Arranging the Clinical Experience
 - Choosing assignments
 - Negotiating with staff





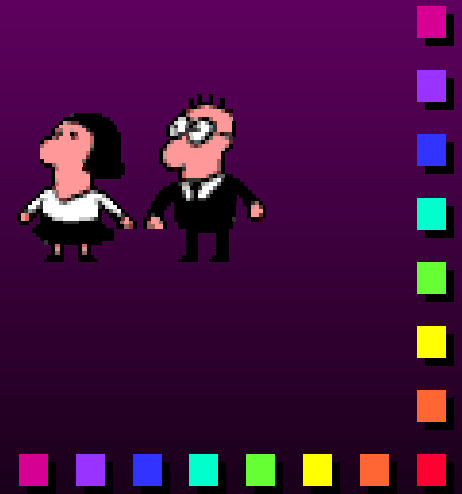
Video

A Peacock in the Land of Penguins



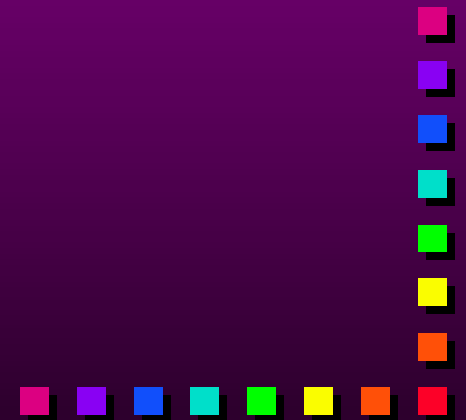
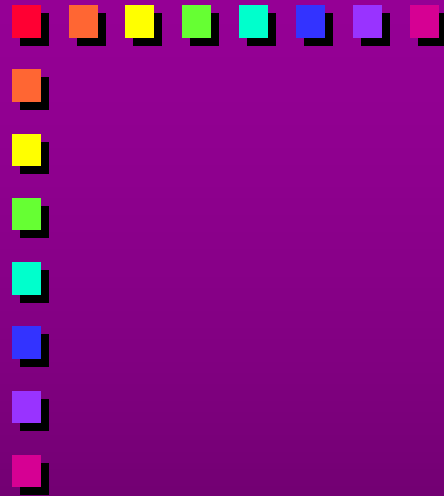
Facilitator

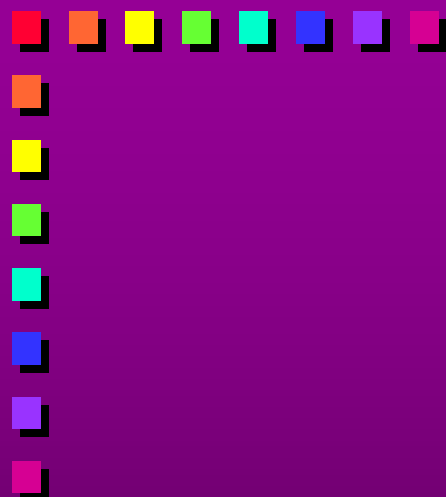
- Develop reflective thinkers
- Model a systematic approach to thinking and problem solving
- Foster critical thinking



Activity

(Brain teasers)

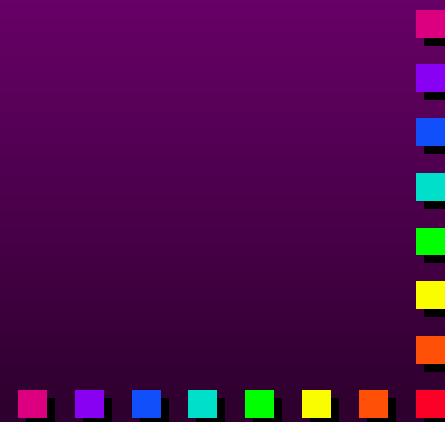




WORD HUNT

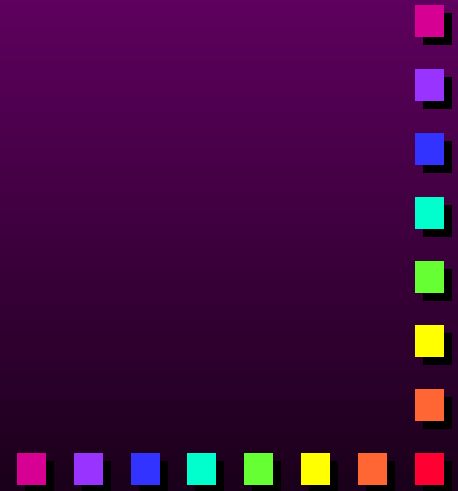
We've hidden four words in this word puzzle.
Can you find them?

D	U	C	K
D	U	C	K
D	U	C	K
D	U	C	K



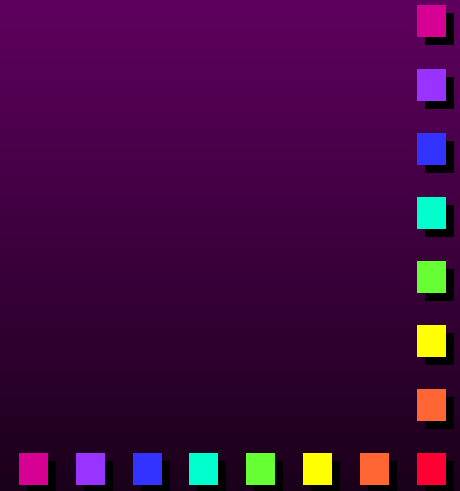
Critical Thinking People Are:

- Truth seeking
- Open-minded
- Analytical
- Systematic
- Self-Confident
- Inquisitive
- Mature



Decision Making

- A systematic sequential process of choosing among alternatives and putting the choice into action. (W. Lancaster & J. Lancaster, 1982)



Decision Making

- Analyzing alternative courses of action, their potential effects, and selecting the best course of action
- Implementing the selected action, monitoring the effects and reevaluating the decision in light of the effects



Problem Solving

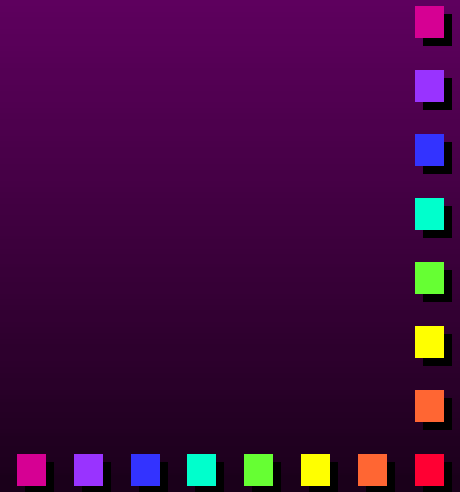
- Problem solving is cognitive processing directed at achieving a goal when no solution method is obvious to the problem solver.

(Mayer & Wittrock, 1996)



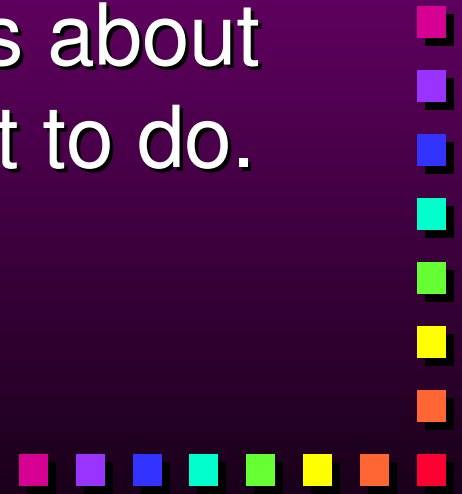
Problem Solving

- Rational, analytical thinking
- An investigative action
- Use of the nursing process
 - Assess
 - Plan
 - Implement
 - Evaluate



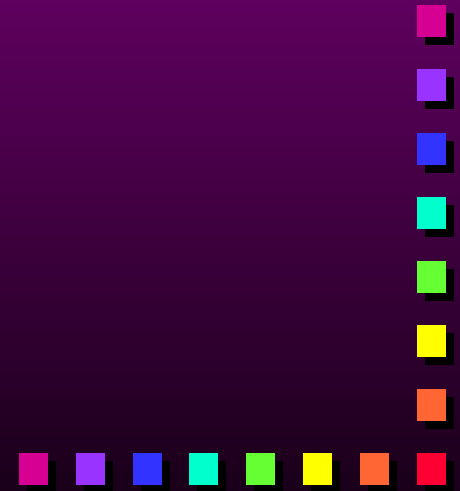
Critical Thinking

- A composite of the attitudes, knowledge, and skills. (Watson & Glaser, 1980)
- A process, the goal of which is to make reasonable decisions about what to believe in and what to do. (Ennis, 1996)



Paul, Binker, Adamson, and Martin (1989)

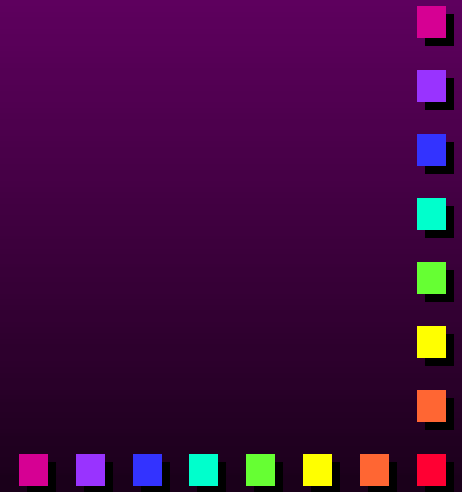
- The art of thinking about your thinking while you are thinking in order to make your thinking better: more clear, more accurate, or more defensible.



Critical Thinking Steps

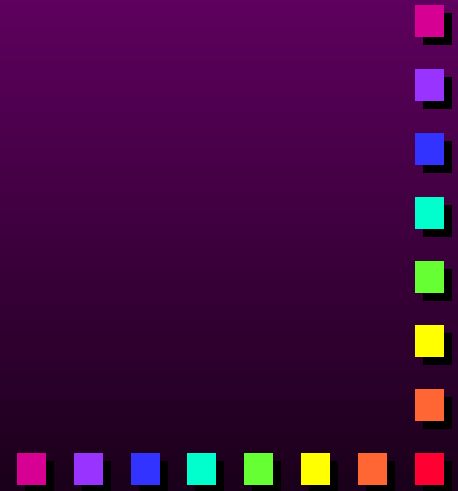
Peter Facione 1998

- Interpretation
- Analysis
- Inference
- Explanation
- Evaluation
- Self regulation



Interpretation

- Components
 - Categorizing
 - Decoding
 - Clarifying meaning



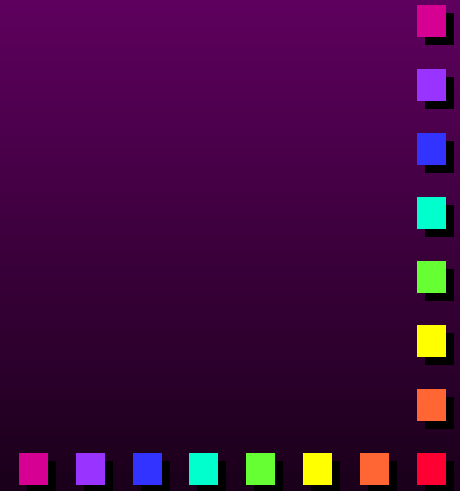
Interpretation

- Distinguish facts, assumptions, and inferences
- Knowledge component
- Interpret data



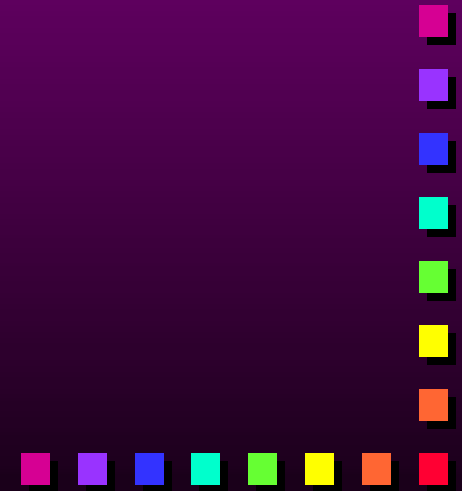
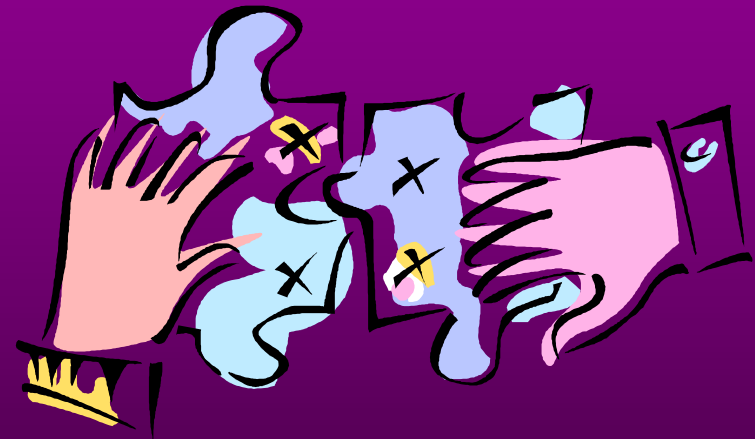
Interpretation

- BP 160/98
 - Reports elevated BP
- Question to ask
 - Tell me what you know about this drug, diagnosis, procedure, treatment?



Analysis

- Components
 - Prioritizing
 - Making relationships
 - Making connections
 - Defining various courses of action



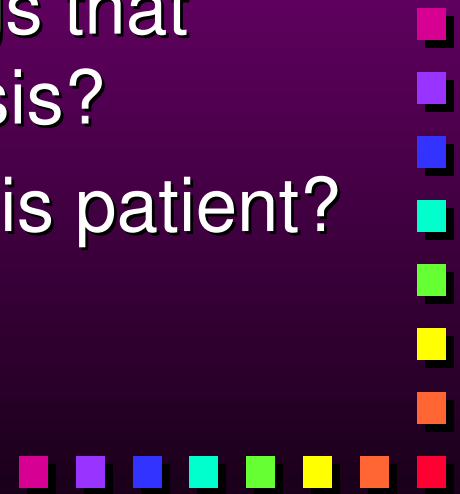
Analysis

- Recognize the existence of problems
- Distinguish between relevant and irrelevant information
- Begin to analyze nursing problems and define the possible courses of action



Analysis

- Questions to ask
 - What lab work would you want to monitor while the patient is on this drug?
 - What are the elements in the patient's admission assessment findings that relate to the admitting diagnosis?
 - What should you do first for this patient?



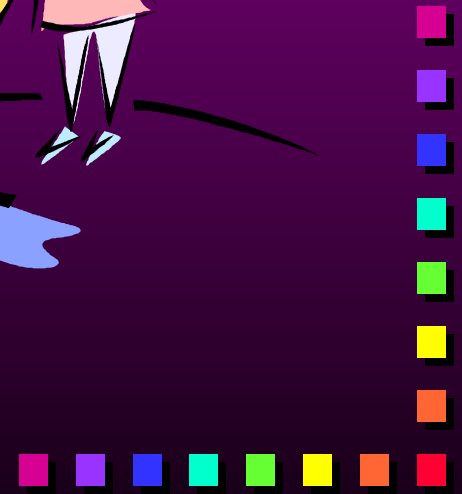
Case Study

- A MVA patient, age 13, had an open reduction of a right tibial fracture three days ago and is also in pelvic traction. She is complaining of pain in her right leg. She states that her pain level is an 8/10 and that it is worse than yesterday. The patient has Vicodin and MS ordered for pain. The preceptee prepares to medicate the patient with morphine.



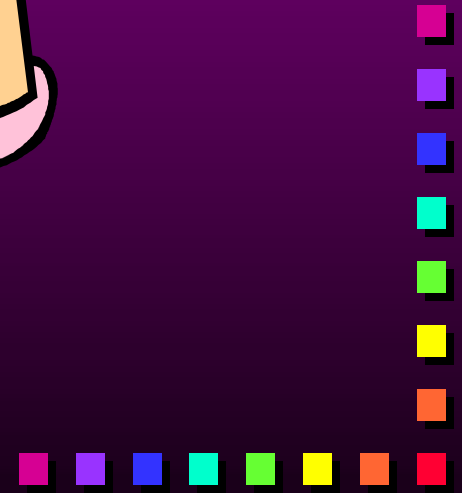
Inference

- Components
 - Drawing conclusions based on evidence/data
 - Comprehending the meaning of subjective and objective data



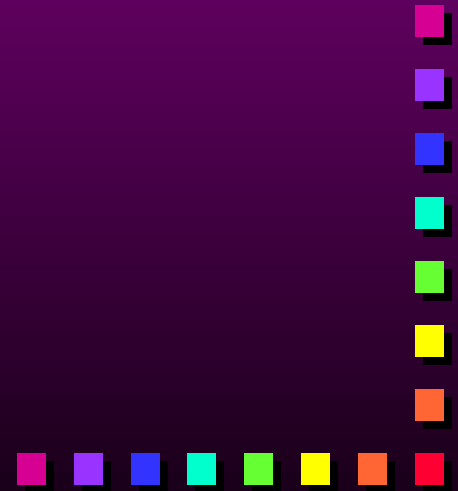
Inference

- Weighing risks and benefits of various courses of actions
- Identifying gaps in information
- Making sound decisions



Inference

- Based on these symptoms, what conclusions can you draw?
- New nurses have a tendency to go for the obvious.



Case Study

- A MVA patient, age 13, had an open reduction of a right tibial fracture three days ago and is also in pelvic traction. She is complaining of pain in her right leg. She states that her pain level is an 8/10 and that it is worse than yesterday. The patient has Vicodin and MS ordered for pain. The preceptee prepares to medicate the patient with morphine.



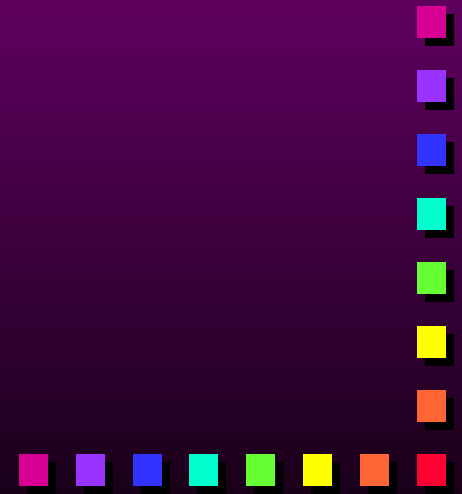
Explanation

- Components
 - Explaining
 - Providing rationales for conclusions



Explanation

- Explaining in verbal or written format, sound reasons for actions taken or conclusions drawn
- Explaining relationships between data



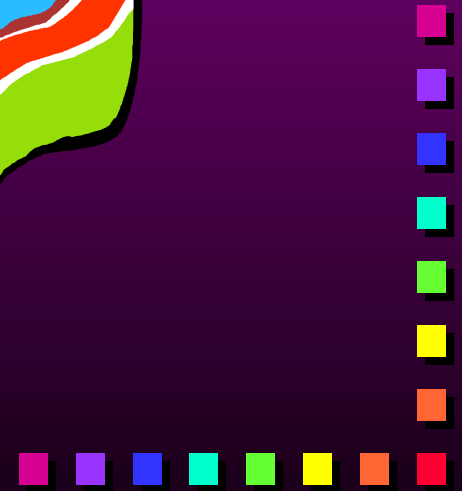
Explanation

- Questions to ask
 - Why would you want to do this treatment first?
 - Why is this drug not used for this patient when it was prescribed for a patient with the same diagnosis?
 - Why is the pain getting worse?



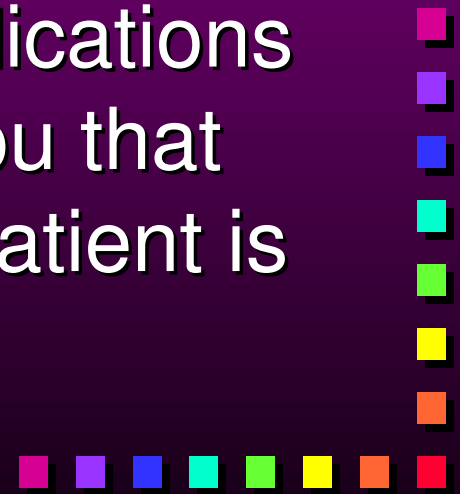
Explanation

- Why?
- So what?
- What if?
- What's next?



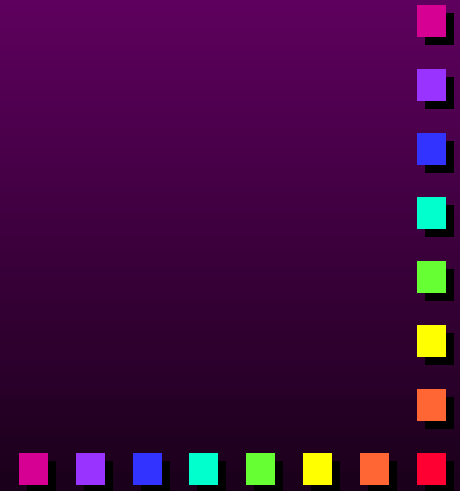
Case Study

- The patient is admitted for atrial fibrillation, has CHF and is on bed rest. The patient's medications include Heparin SQ bid and Digoxin daily.
- In discussing the patient's medications with the preceptee, she tells you that heparin is given because the patient is on bed rest.



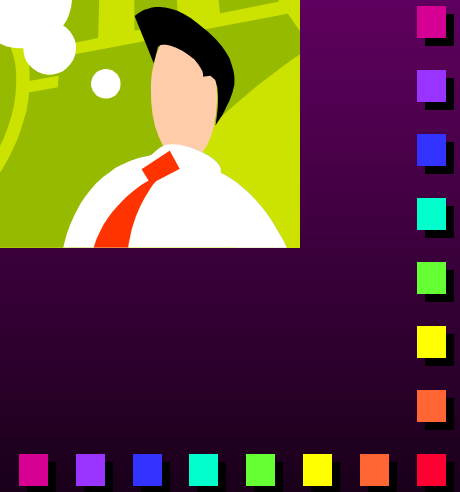
Evaluation

- Components
 - Continuously assessing the data for relevancy to the situation
 - Ensuring that the data supports the conclusion



Evaluation

- Questioning the data, signs and symptoms for relevancy
- Evaluating appropriateness of care
- Cost-effectiveness
- Anticipating, thinking ahead
- Looking at the big picture



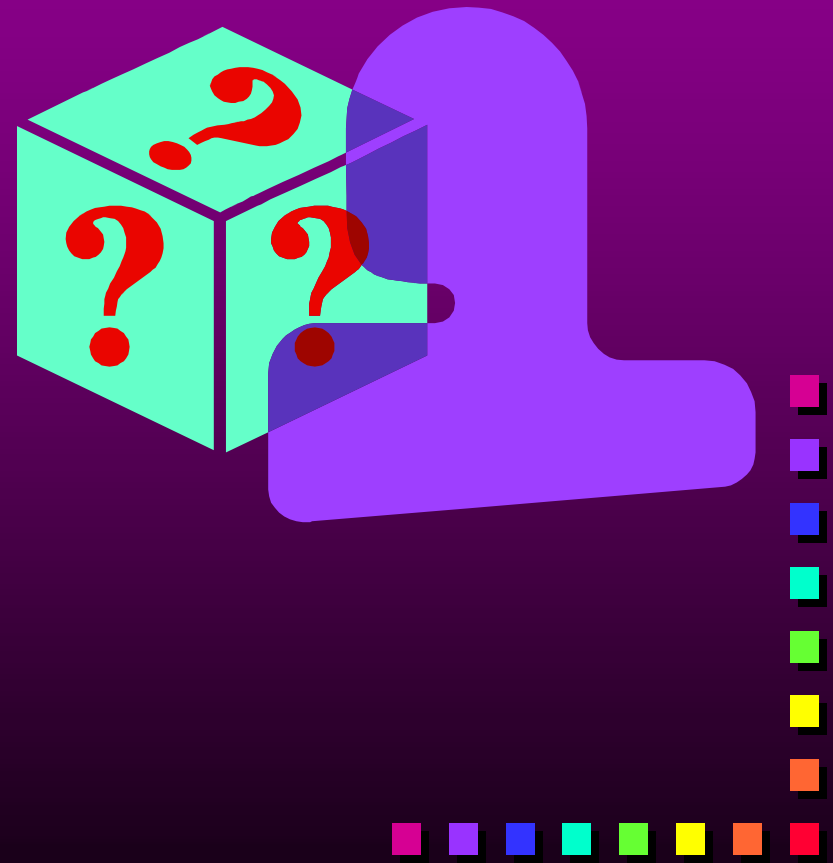
Evaluation

- Questions to ask
 - What would indicate to you that this medication has been effective?
 - If a patient is developing an infection, what symptoms would you expect to see?



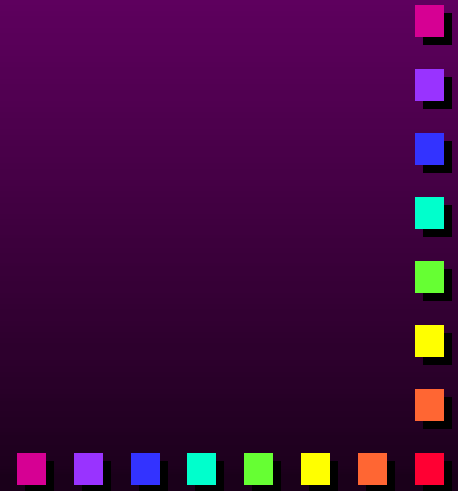
Self Regulation

- Components
 - Continuously questioning, examining and monitoring one's thinking for accuracy



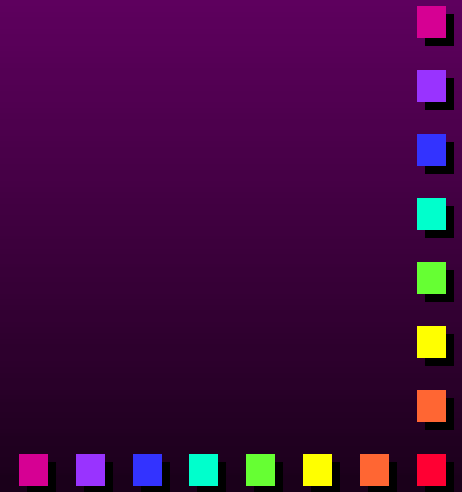
Self Regulation

- Asking questions
- Comparing and contrasting situations
- Seeking further data to support and validate conclusions



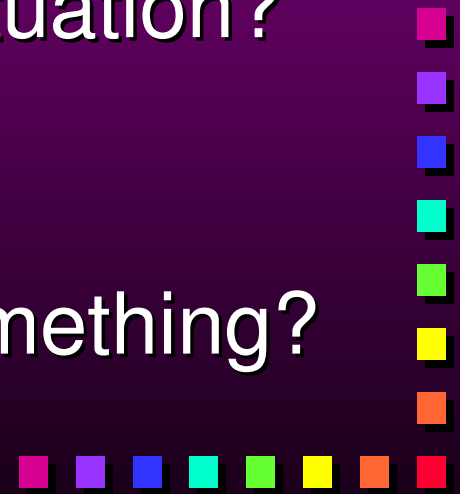
Self Regulation

- Last week you took care of a patient with a similar diagnosis.
 - What symptoms are the same?
 - What differences do you notice?



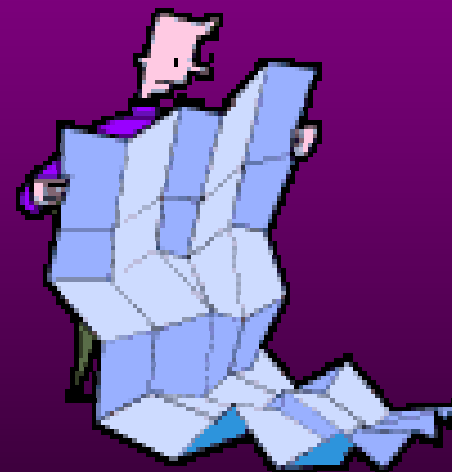
Self Regulation

- Questions to ask:
 - Did an attitude or perception influence my conclusion?
 - What is interfering or coloring the way I am looking at this situation?
 - Am I drawing the wrong conclusion?
 - Could I be overlooking something?



Self Regulation

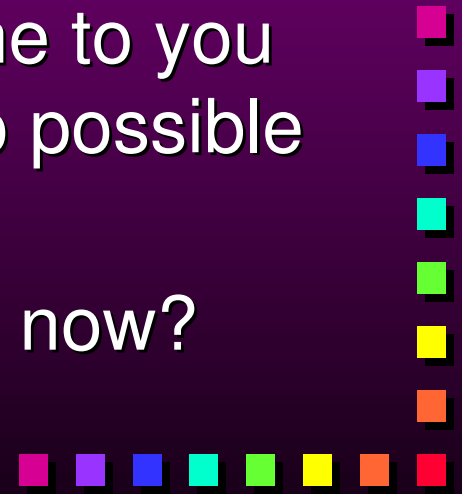
What am I missing?



Putting It Together

■ Frame the Question

- Use the critical thinking components.
- Pose questions that encourage problem solving.
- Encourage the preceptee to come to you with questions/problems but also possible solutions.
- Why? What if? So what? What now?



Use Case Scenarios

The physician leaves the following order for the patient who is one day post-op appendectomy:

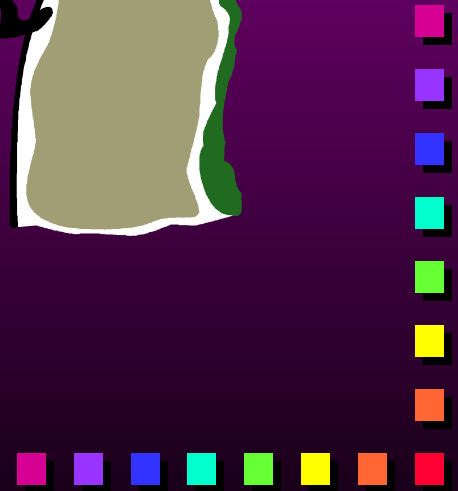
1. DAT
2. d/c IV fluids when taking fluids well

- What are the facts?
- What are the alternatives/choices?
- What other assessments should be made?
- What factors will influence the choice?
- How will know if I made the correct choice?
- What am I overlooking?



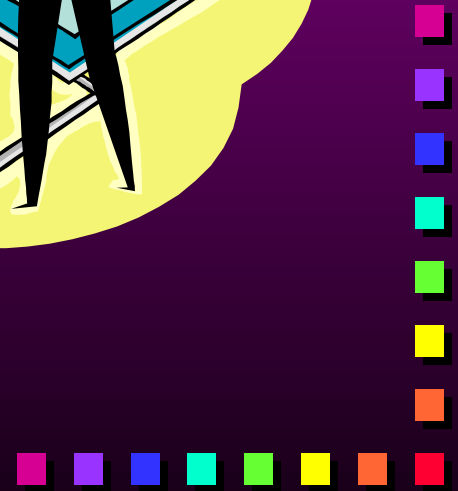
Build Confidence

- Give feedback that tells the preceptee that you trust their ability
- “I think you can handle this, but I am right here if you need me.”



Build Confidence

- Acknowledge when the preceptee has made an appropriate decision.
- “I would have done the same thing.”
- “I couldn’t have done it better.”



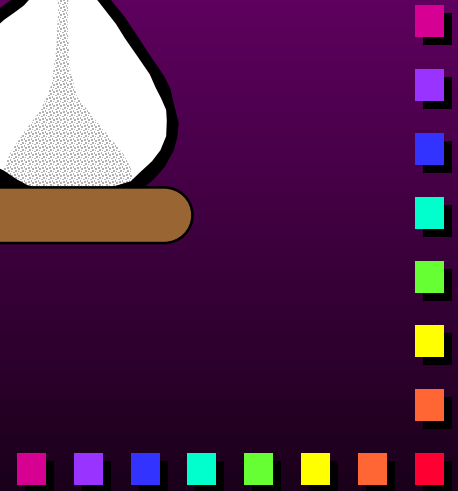
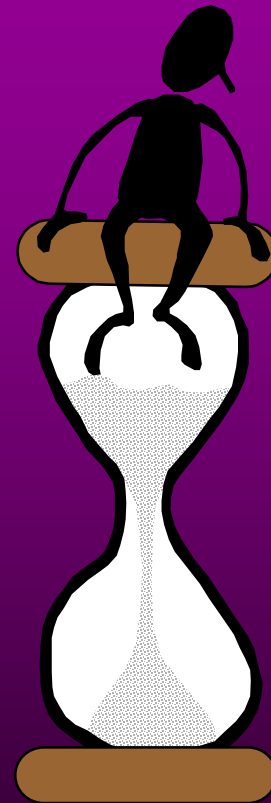
Build Confidence

- Validate the preceptee's assessments/findings/conclusions
- “That’s exactly what I heard in the lungs. ”



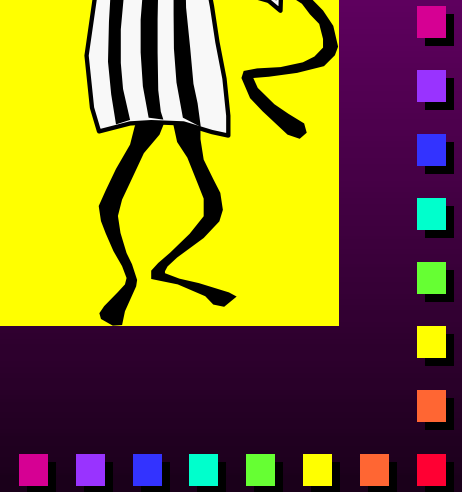
Build Confidence

- Collaborate with the preceptee in making out assignments.
- “Where do you think we should start today?”

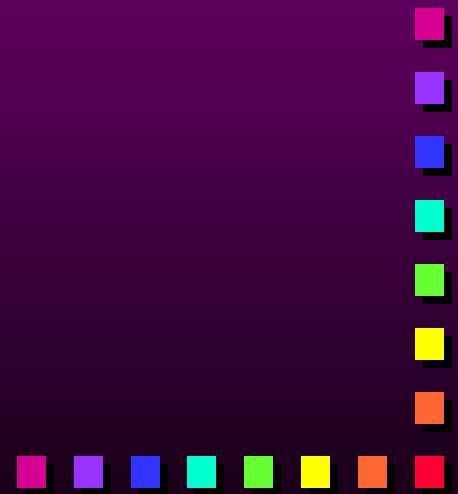


Build Confidence

- When setbacks or “bad” days occur, remind preceptee of their progress and successes.
- “Remember the first time you recorded a code how everyone complimented you.”



Practice Time



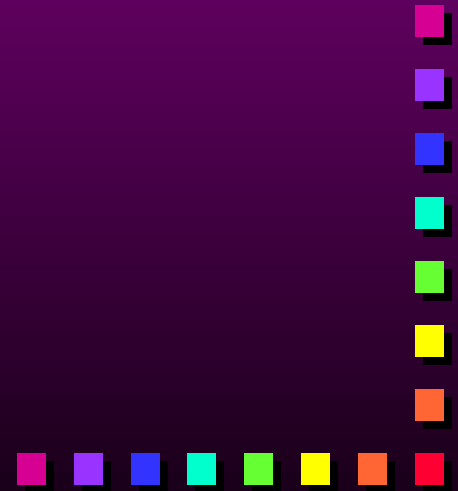
Conflict - Definition

- When what you have and what you want are different.
- A pattern of energy
- Nature's primary motivation for change



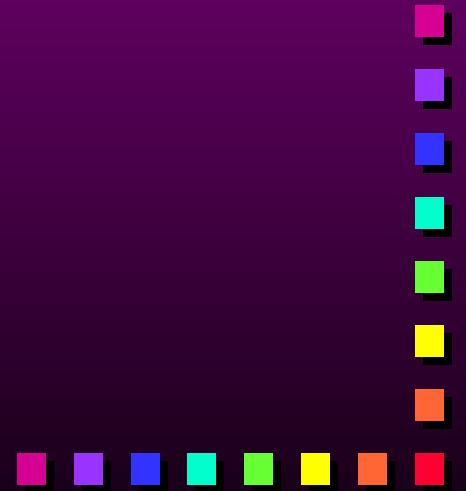
Conflict Management

- Conflicts for
 - Preceptee
 - Preceptor
 - Staff
 - Manager



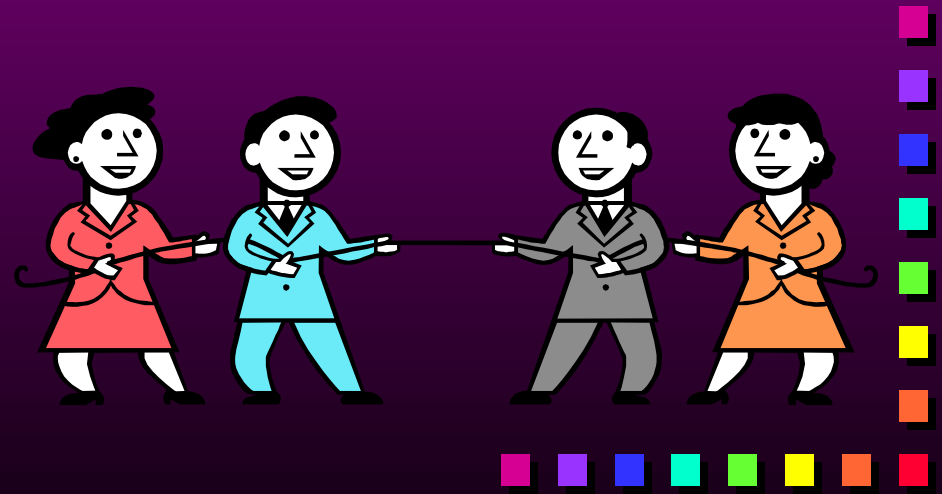
Causes of Conflict

- Personality differences
- Difference in values
- Difference in perspective
- Difference in goals
- Cultural differences



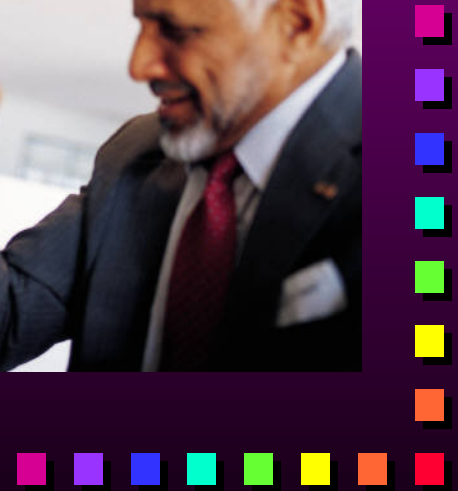
Conflict Myths

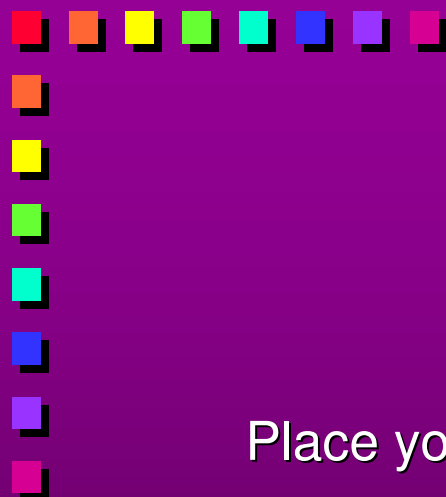
- Conflict is negative
- Conflict is a contest
- A sign of poor management



Conflict Myths (continued)

- If left alone, conflict will take care of itself
- Conflict must be resolved





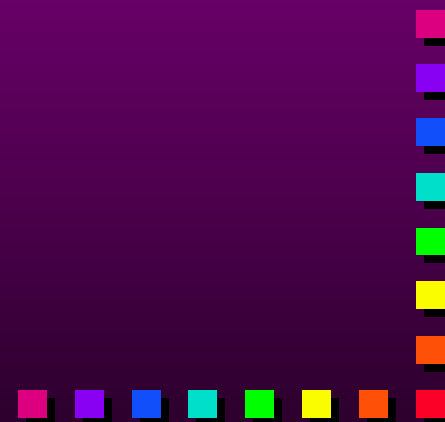
Activity

Face your partner.

Place your hands against the other person's hands.

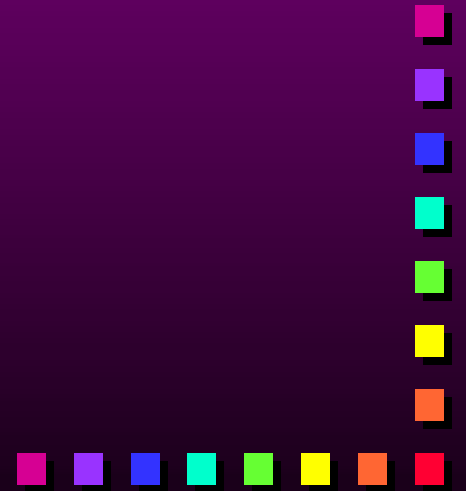
Person One face the screen.

Person Two face away from the screen.

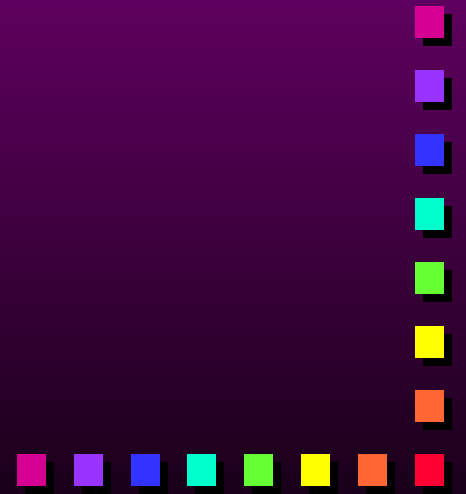


Person One

- When I say “go” push against your partner’s hands.



Change positions so Person Two is now facing the screen.



Person Two

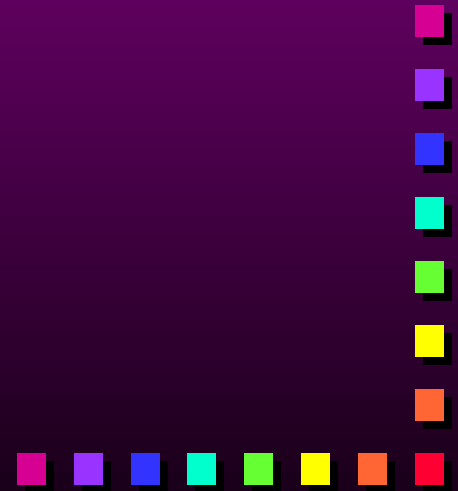
- When I say “Go”, push against your partner’s hands. Don’t back down.



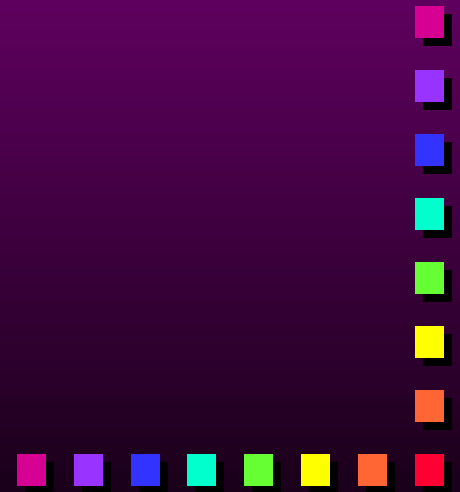
New Directions

Person Two

- When I say “go” push against your partner’s hands.

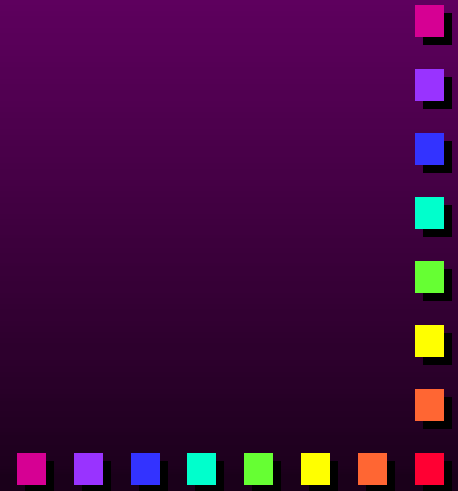


Change positions so Person One is now facing the screen.



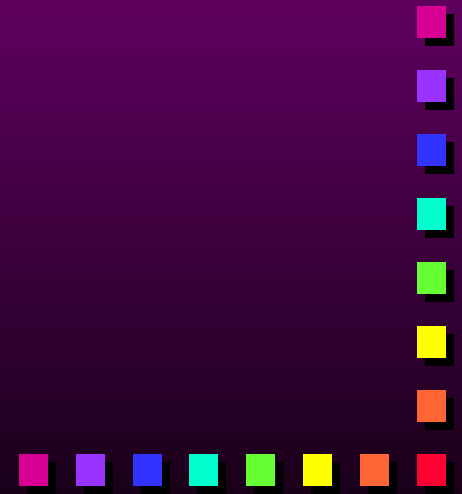
Person One

- When I say “Go”, give no resistance when your partner pushes your hands.



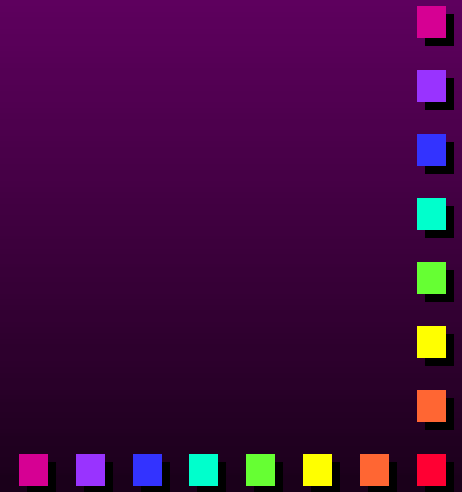
Conflict Mode Instrument

- Consider conflict situations.
- How do you usually respond?
- If neither response is typical, choose the one you would be more likely to use.



Conflict-Handling Modes

- Competing
- Collaborating
- Compromising
- Avoiding
- Accomodating



COMPETING

COLLABORATING

COMPROMISING

AVOIDING

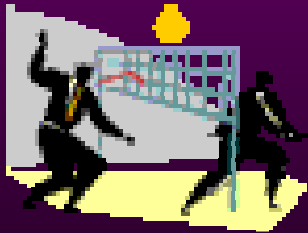
ACCOMODATING



Competing

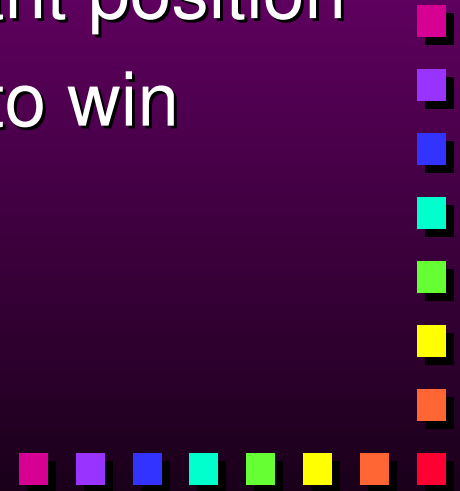
- Forcing

- Assertive and uncooperative
- Power-oriented



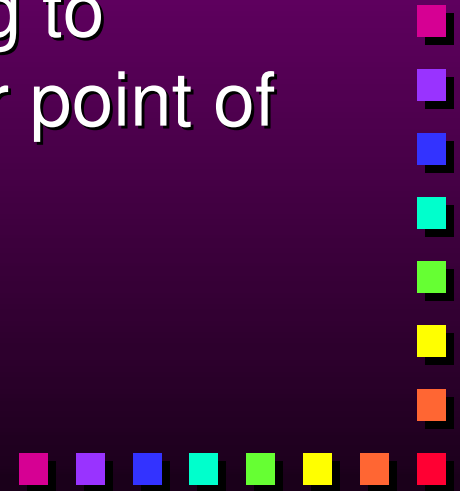
- Useful for:

- Standing up for rights
- Defending an important position
- Trying to win



Accommodating

- Smoothing
 - Unassertive and cooperative
 - Involves self-sacrifice
- Useful for:
 - Charitable causes/generosity
 - Obeying orders
 - Yielding to another point of view



Avoiding

- Withdrawing
 - Unassertive and uncooperative
 - Does not address conflict



- Useful for:
 - Diplomatic sidestepping
 - Avoiding until a better time
 - Withdrawing from a threatening situation

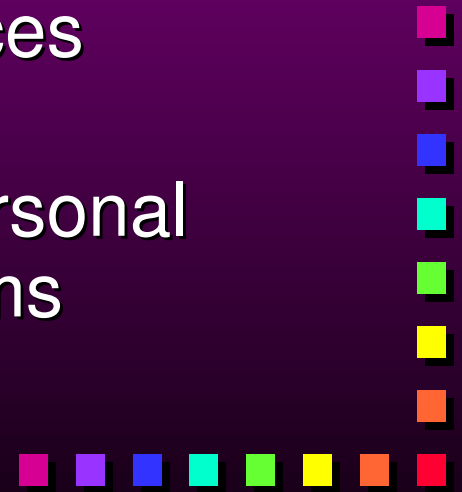


Collaborating

- Problem Solving
 - Assertive and cooperative
 - Seeks to satisfy both sides

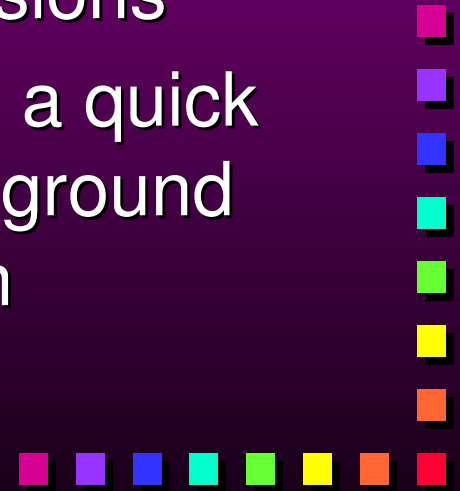


- Useful for:
 - Gaining additional insights
 - Avoiding negative competition for resources
 - Solving interpersonal problems



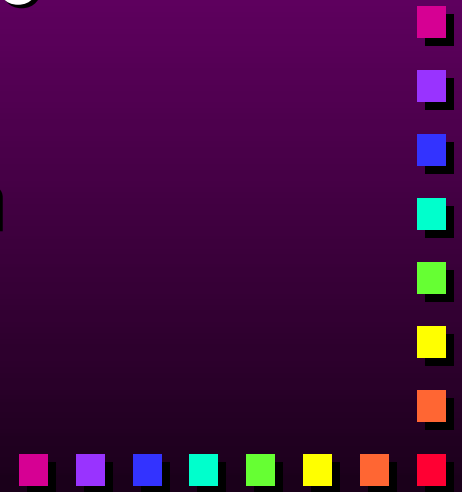
Compromising

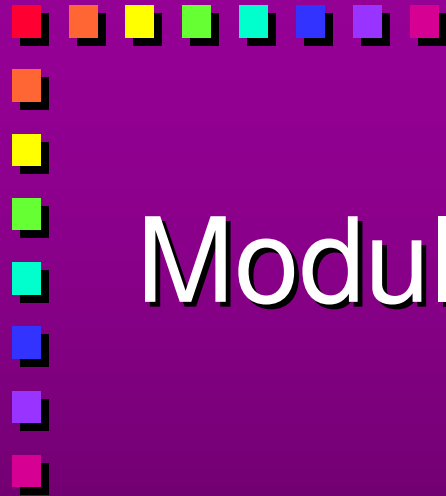
- Sharing
 - Somewhat assertive and somewhat cooperative
 - Solutions are mutually satisfying; acceptable to all
- Useful for:
 - Splitting the difference
 - Making concessions
 - Finding a quick middle-ground position



TKI Profile

- Were you surprised?
- Compare with others
- No wrong answers
- Are there strategies you want to explore?
- Which strategies work in which situations?





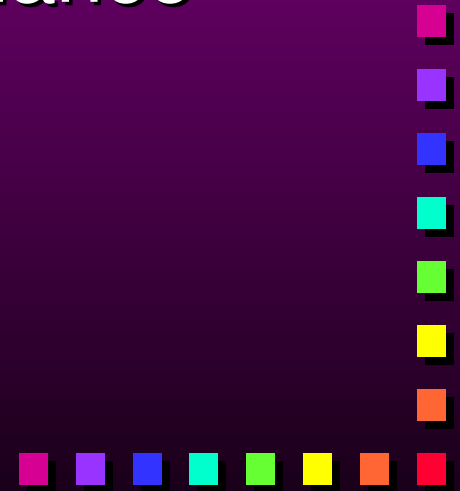
Module Five

Evaluator



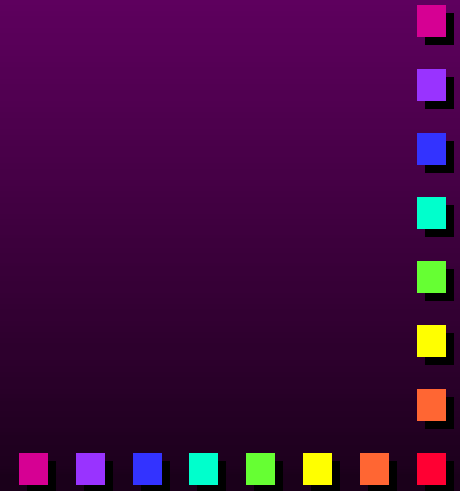
Evaluation

- Observable and measurable
- Learning can only be inferred
- Change in behavior
- Based on standards of performance



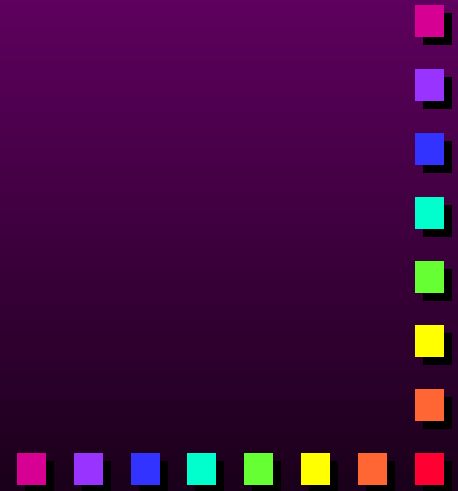
Evaluation Process

- Formative evaluation
- Summative evaluation
- Documentation Tools



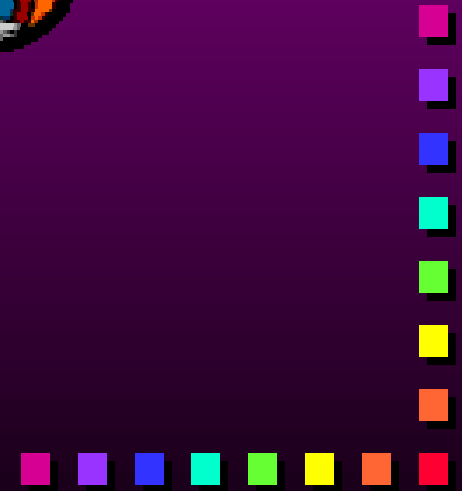
Performance Evaluation

- Participative
- Using Goals
- Long Term Goals



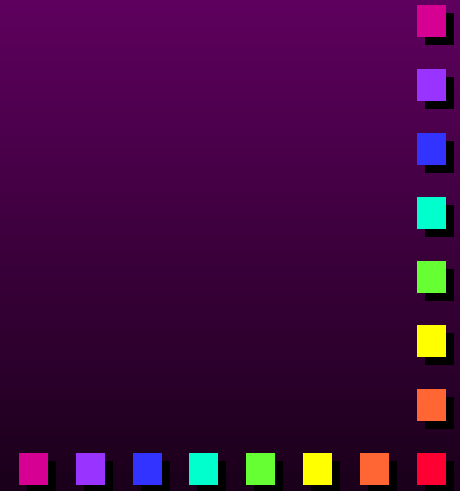
Communication is the Key

- Body Language
- Perceptions



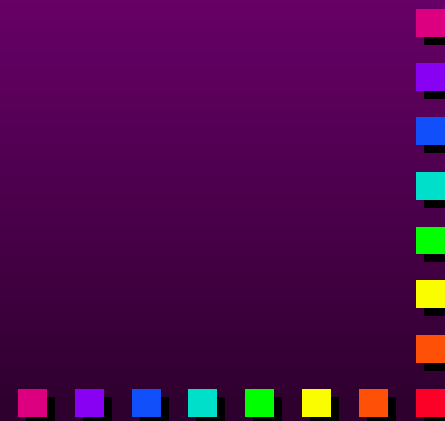
Effective Communication

- Who?
- What?
- When?
- Where?
- How?
- Why?



Activity

(Perceptions/Paying Attention)



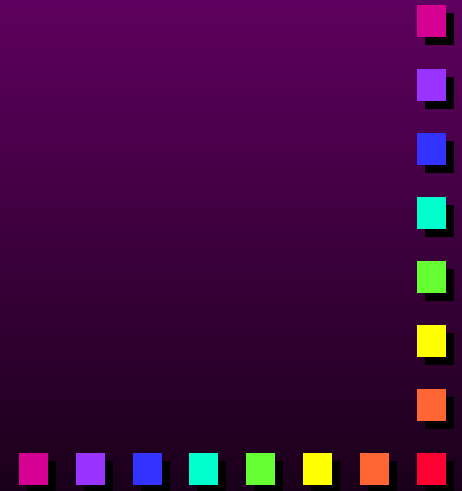


Old Woman...Or Young Girl?
hint: The old woman's nose is the
young girls
chin.





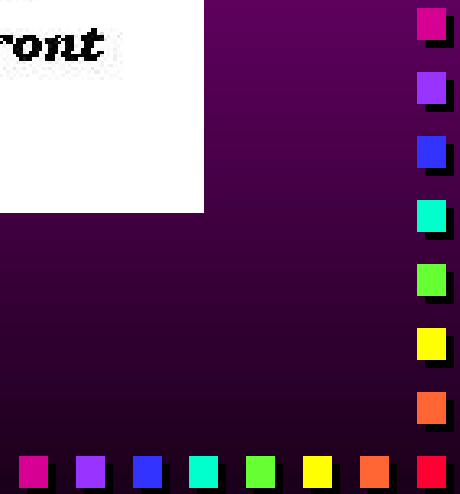
*A Face Of A Native
American... Or An Eskimo?*





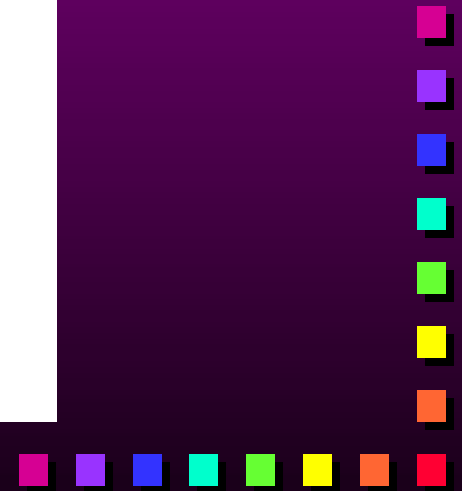
***Man Playing Horn... Or Woman
Silhouette?***

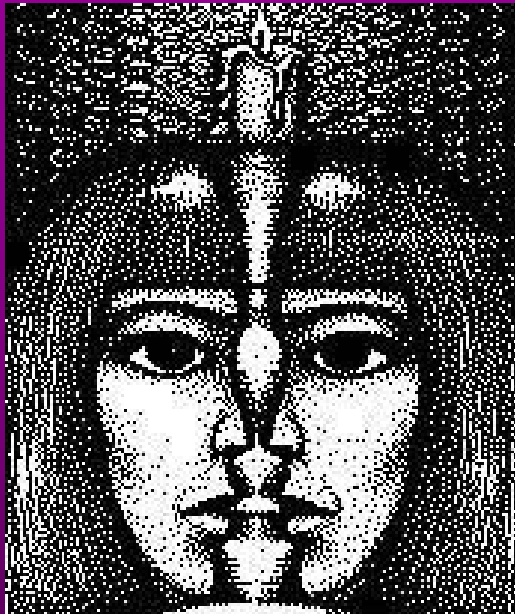
***(hint: woman's right
eye is the black speck in front
of horn handle)***





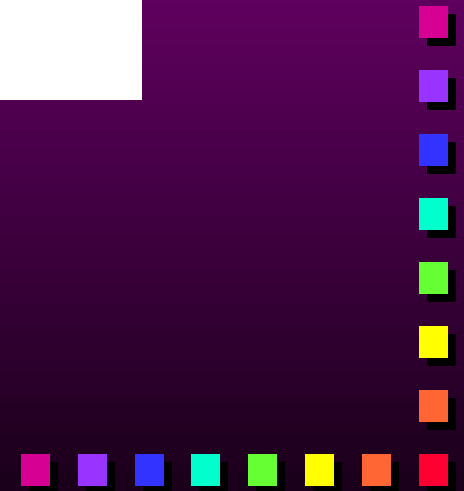
Woman In Vanity... Or Skull?
hint: move farther a bit from the screen and
blink to see the skull or the woman (looking at
the mirror)





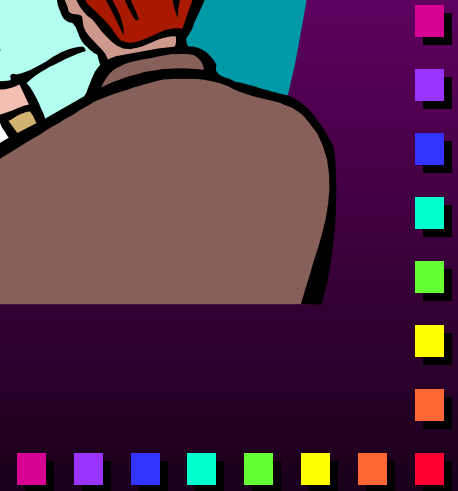
Two Faces... Or One?

***(hint: two faces side
profile…or one face
front view)***



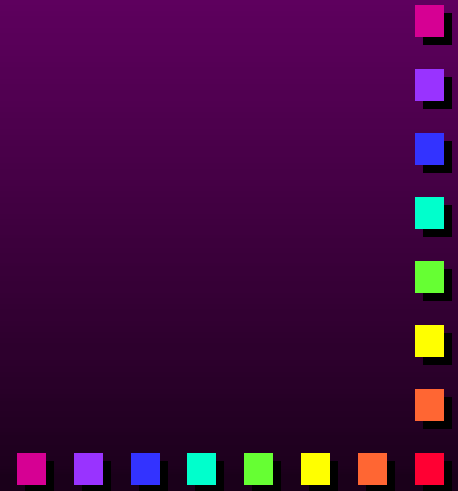
Assertive Communication

- Changing the message:
 - I think...
 - I feel...
 - I want...
 - I'm concerned that...



Coaching the Preceptee

- Definition
- Coaching Conversations
 - Feedback
 - Problem Solving
 - Developmental



Coaching the Preceptee

- Constructive Feedback
 - Provides information to improve performance.
 - Is a vehicle to promote constructive relationships.
 - Promotes an environment of openness and mutual respect.



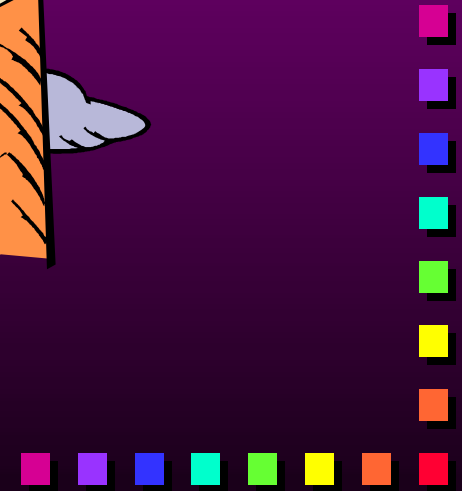
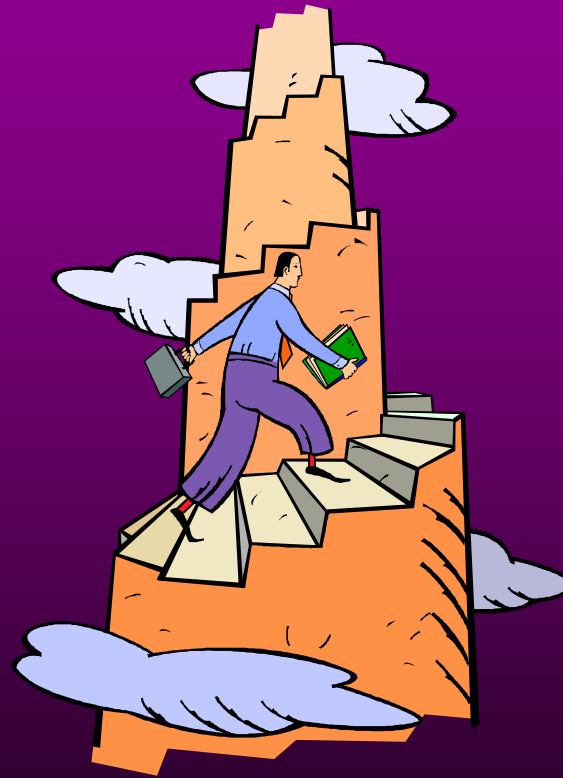
Constructive Feedback

- Provides a way to monitor how things are going.
- Creates a way for issues to come to the forefront before they become major problems.
- Keeps lines of communication open.
- Assists staff in owning problems and creating solutions.



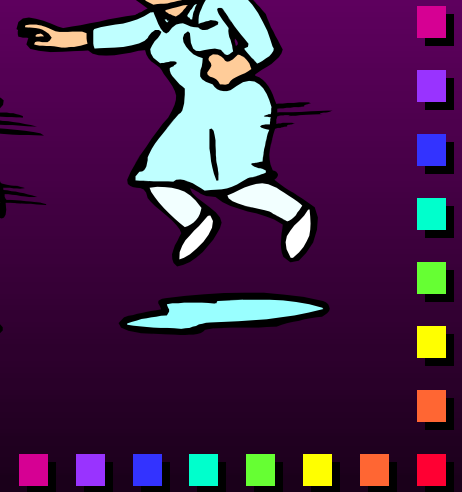
Constructive Feedback Steps

- Engage
- Empathize
- Educate
- Enlist



What to do when....

- Preceptees you might encounter
- Discussion
- Role play



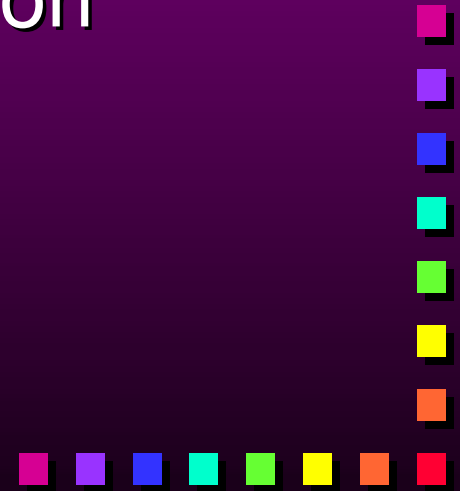
Evaluating Performance

- Satisfactory/Remediation
- Ongoing and written
- Criteria
 - Consistent demonstration
 - Demonstration with minimal prompt
 - Demonstration with repeated prompts



Formative Evaluation

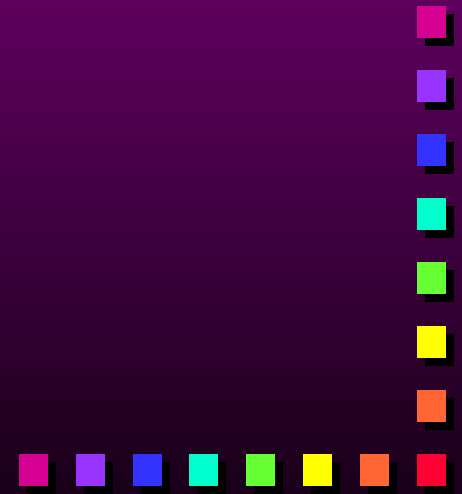
- Ongoing process and documentation
- Weekly updates with preceptee
- Multiple preceptors must communicate
- Written goals and follow-up
- No surprises at end of orientation



Summative Evaluation

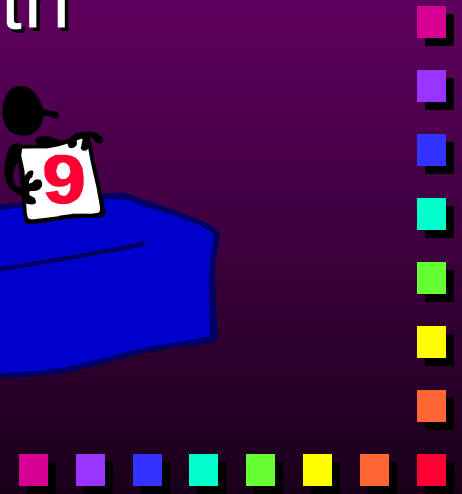
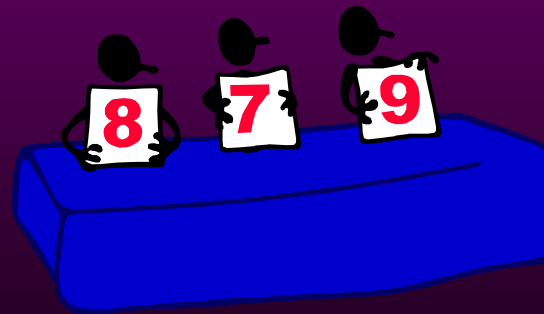
Collaboration with Manager

- Meet with manager before preceptorship begins
- Decide what data must be collected.
- Develop methods to collect the data.



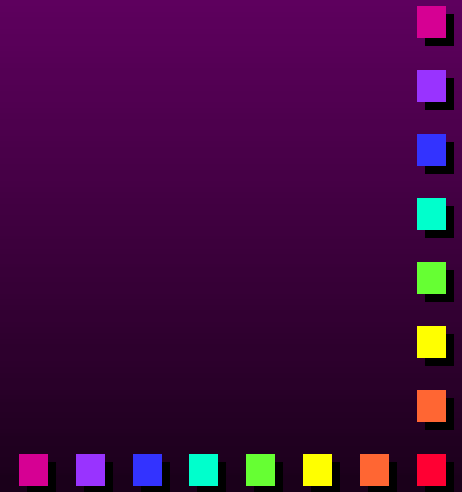
Final Evaluation

- Manager's responsibility
- Clarify preceptor role
- Analyze and interpret the data
- Write the evaluation report
- Share the evaluation results with preceptee



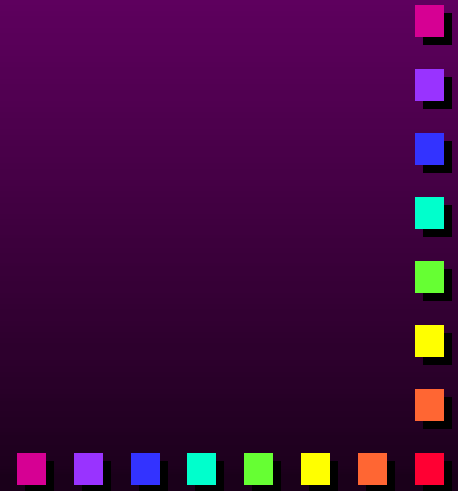
Putting it all together

- Tools
- Conducting the Program
 - Focus
 - Daily tasks (goals)
 - Evaluate
- Documentation



Preceptor Support

- Ideas for recognition, incentives, rewards
- Resources for preceptors
- Support Groups
- Advanced training



Beyond Preceptoring

- Letting go
- Mentoring
- Changing the relationship
- Support rather than judge



