



EXAMINING THE VALUE OF LEADERSHIP IN NURSE PRECEPTORS FOR THE CLINICAL EXPERIENCES OF UNDERGRADUATE NURSING STUDENTS

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Abstract:

The significance of leadership in nurse preceptors on the practical experiences of undergraduate nursing students is examined in this study. Currently, students are supervised by registered nurses (RNs), but many RNs are neither prepared or willing to take on this responsibility. For novice nurses, inconsistent supervision exacerbates the theory-practice divide and fosters a toxic learning environment.

The study looks into how students think a nurse preceptor should be able to lead. Results show that students respect preceptors who are encouraging, helpful, and have effective communication skills. Effective clinical leadership is synonymous with these attributes.

Keywords: theory-practice gap, clinical experience, nursing education, leadership development, and nurse preceptorship

Introduction:

According to the study, in order to provide students the tools they need to become leaders in the future, leadership training ought to be incorporated into undergraduate nursing programs. It also suggests continuing education and assistance for nurse preceptors. The study's drawbacks, such as its limited sample size, are noted. Still, the study offers insightful information for more research on leadership development in nursing education.

Professional degree preparation is currently a part of nursing education in Australia's higher education system (Daly, Speedy & Jackson 2000; Sellers & Deans 1999). The majority of the foundation for practical experience is an educational approach in which students are paired with registered nurses (RNs) for supervision and direction during clinical practice (Nurses Board of



Western Australia, 2004). Because so many nurses are untrained or unwilling to take on the role, this creates a dichotomy. This leads to a "pot luck" style of education that gives students inconsistent clinical experiences and has been linked to the theory-practice divide (White & Ewan 1991).

Prior studies have demonstrated that a student's impression of the field can be influenced by their early experiences in the field and their interactions with clinical supervisors (Lofmark & Wik-blad 2001). Undergraduate nursing students can benefit from a practical experience that exposes them to both positive and negative behaviors displayed by clinical staff, thereby reducing the "reality shock" of the clinical setting (Australian Universities Teaching Committee, 2002; Lockwood-Rayermann, 2003). The interactions that students have with medical personnel been demonstrated to 'make or break' the practice placement (Cahill 1996). By helping students with their professional growth and attending to their requirements, nurse preceptors can effectively carry out their responsibilities (Dunn & Hansford 1997).

obstacles include growing workloads and patient acuity, which are mostly caused by the nursing shortage (ANF 2005), reduce the amount of support that can be offered and have a detrimental effect on students' educational experiences (Geraghty 2005). Few studies have examined the needs and values of students in this type of educational arrangement, according to Cahill (1996), who claims that there is little evidence to support the effectiveness of preceptorship. Undergraduate nurses tend to establish early and enduring impressions of the nursing profession (Lockwood-Rayermann 2003; Myrick & Yonge 2002). This, coupled with the current state of industrial unrest and the worldwide nurse shortage, highlighted the necessity of investigating the ways in which students are supervised and guided.

Understanding Leadership in Nursing

The interconnectedness of individuals, their relationships, and their influence set leaders apart (De Pree 1990). It embraces the ideals and attitudes of the individual as well as the organization and includes concepts of influence, motivating achievement, and vision. To put it briefly, leadership is a process in which a single individual persuades others to achieve goals (Clark 1997). Leadership, according to Morrison, Jones, and Fuller (1997), is the capacity to inspire others to attain objectives. Using this description as a starting point, Vandevier (2006) suggests that leadership is a catalyst that turns promise into action and eventually reality. According to Mahoney (2001), leadership is a necessary talent for all nurses to possess and is part of their job description.

It is believed that transformational leadership (Burns 1978; Thyer 2003; Tichy & Devanna 1990) is a kind of leadership that inspires followers to reach "higher levels of morality and motivation." According to Bass (1985), transformational leaders bring about change in their

followers by making them more conscious of the values inherent in the work they carry out and by directing their attention away from personal interests and toward organizational objectives, which stimulates higher order demands. The field of transformational leadership in nursing has received extensive study in the literature. Lett (2002) investigated the idea of nursing leadership and came to the conclusion that better patient care is the outcome of competent leadership. After doing a thorough analysis of the literature on leadership in the nursing field, Sofarelli and Brown (1998) came to the conclusion that transformational leadership empowers nurses, which is a crucial step in bringing about organizational change. The foundation of transactional leadership is the idea that rewards and penalties serve as motivators for people. Clear expectations are established for the subordinate by the transactional leader, along with incentives for obeying commands (Changing Minds, 2006). Studies have indicated that nurses are driven to work when they get both internal and external rewards (Usher et al. 1999). However, none of the discovered literature reviews include punishment as a motivating factor, despite the fact that it is frequently cited as such.

cussing nurse leadership in the field. An expected service in a transactional partnership is performance. This could only refer to carrying out a task in exchange for pay. In industry, the idea of reward and punishment is strongly influenced by the concept of supply and demand (Changing Minds 2006). An emerging notion that aligns well with clinical leadership in the nursing field is congruent leadership. Congruent leadership is "where the activities, actions, and deeds of the leader are matched by and driven by their values and beliefs," according to Stanley (2005: 132). Similar to a transformational leader, a congruent leader embodies a quality of vision and is an outstanding communicator, inspiring those around them. According to Stanley (2005), the congruent leader frequently do not have official leadership responsibilities, do not necessarily occupy senior nursing positions, and are sincere caregivers with the capacity for critical thought and action prioritization (Stan-ley 2005).

People generally want to be inspired, according to the authentic leadership theory, which is another new idea of leadership. According to Bergeron (2002), people are drawn to businesses that appeal to both their souls and their intellects. This highlights the significance of authenticity and authentic leadership. Any obvious methods are used in the authentic leadership model as long as they align with values and beliefs that 'lead to positive action' (Bergeron 2002). According to Duignan and Bhindi (1997), a person must seriously examine themselves and have a keen awareness of their own values, attitudes, and beliefs in order to become an authentic leader. 23 pre-registration nursing students were sampled for this descriptive, two-phase, mixed-method study to learn about their perspectives on leadership in the context of clinical practice.

A Model for Interconnected Preceptorship, Leadership, and Patient Care:

This study's conceptual framework was developed by combining the synergy model for patient care (Kerfoot, 2002) and the synergy model of preceptorship (Alspach, 2006). A modified model is put out that views nursing preceptorship, leadership, and patient care as interconnected components that enhance the clinical experience of the learner. The core tenet of the modified model is that when a nurse preceptor exhibits the desirable qualities expected of a nurse preceptor, such as leadership, nursing students (preceptees) have a pleasant experience during clinical practice.

The Need for a Preceptorship Framework to Foster Positive Nurse-Student Relationships:

Higher learning quality is the outcome of the Edith Cowan University Human Ethics Subrelationship between instructors and students (Hekelman et al. 1995; Hilliard 2000; Vaughn & Baker 2004). Building a connection with one another and communicating clearly and respectfully are essential to the formation of a good working relationship between a student and nurse preceptor (Geraghty 2005; Stevenson, Randle & Grayling 2006). (Clay et al. 1999). ceptor. Early positive socialization experiences have been demonstrated to increase new nurse retention rates (Myrick & Yonge 2002), which is a critical concern in a time of worsening shortages of nurses across the board. Therefore, one explanation for the respondents' difficulty in forming connections within the intricate interactions of the nursing field may be the absence of a conceptual framework to govern preceptorship.

Continuity preceptor Building a cordial rapport with others is a time-consuming procedure, and a productive working connection is unlikely to be formed unless a student is exposed to the same preceptor for an extended length of time. Fourteen respondents (61%) emphasized the significance of preceptor continuity for successful preceptorship experiences. Eight respondents (35%) emphasized this further by describing the challenges of "being passed from nurse to nurse" and the resulting discrepancies that resulted from each nurse instructing and performing different jobs in a different way. Students who said that working with a new preceptor was like "starting over" seemed confused by the absence of continuity. Geraghty (2005) examined the efficacy of preceptorship in a perinatal hospital in Western Australia and highlighted the challenge preceptees face in establishing a rapport with a preceptor when they are assigned to collaborate with them only once. Anecdotally, most teaching hospitals in Western Australia have similar circumstances. The fact that a large number of nurses in Australia work part-time is one of the contributing elements to this predicament. In Australia, 50% of registered nurses worked fewer than 35 hours a week in 2003 (AIHW 2004). "Inspires confidence" (91%) and "supportive" (96%) were identified as extremely desirable traits in their nursing preceptors by the respondents. Responses to the open-ended questions highlighting a positive practical experience stemming from feeling confident and supported in clinical practice by the nurse prioritised these findings. February 2008, Volume 27, Issue 2, 202 Cy surroundings.

combining theory and application

Results showed that students saw their practicum as a chance to put their theoretical knowledge into context in a real-world scenario. Regarding an actual patient scenario, one respondent said she was 'able to consider that particular patient's condition and give knowledge of pertinent pathophysiology and pharmacology meaning within the setting'. Four respondents (17%) said that the practical experience embedded the theory and practice connection. Prior research by Ford, Brown, and Cocking (1999) demonstrated that learning that is applicable to a variety of situations helps students create a more adaptable representation of their knowledge, which enhances their capacity to apply it critically. One could argue that having this ability is crucial for registered nurses. competence

Self-assurance and psychomotor skills Results showed that students saw their practicum as a chance to hone and develop their clinical skills. Six respondents (or 26% of the sample) said that honing a skill increased their confidence in their capacity to execute it. The respondents' capacity to get the right direction and training from preceptors was impacted by constraints that exist in the nursing clinical setting, such as the frequently hectic pace and skill mix of the staff. 48% of respondents (n=11) cited this as a distracting element from a positive

encounter with learning in a medical setting. Prior studies conducted by Polofroni et al. (1995) shown that while preceptored assignments suggest supervised and directed practice, students may work up to 75% of the time without direct supervision. This provides a constrained area for growth and helpful feedback on the development of psychomotor skills. Findings from this study also support the notion that students are more likely to seek out learning opportunities when paired with a preceptor who shows interest and friendliness toward them (2004). Students are more likely to ask questions and seek out learning opportunities when they feel secure with their preceptor and supported in their practice. This improves their confidence and competence in addition to their experience.

The results of this study have corroborated those of earlier studies (Cahill 1996; Dunn & Hansford 1997; Lofmark & Wikblad 2001) that showed nurse preceptors had a major impact on undergraduate nursing students' practical experience during clinical placements. The results of this study also show that students generally concur that their nurse preceptors should be leaders and that successful nurse preceptors and clinical leaders share many traits. These results imply that, by definition of the position and the duties that go along with it, a competent nursing preceptor is a clinical leader. In conclusion, research indicated that while clinical competence and a wide range of knowledge were considered characteristics of good clinical leaders, so too were effective interpersonal skills. Effective communication, empathy, and encouraging dispositions are a few of the leadership qualities that can be developed from the start of an undergraduate program. Giving nursing students the fundamental abilities they need to think and act like leaders from the start may help prevent the issues of apathy and anger that arise when

people are forced into leadership roles against their will. If attitudes and values can be formed throughout the college years, then that behavior becomes the standard and the natural behavior that the following generation is taught to emulate.

At all levels, appropriate leadership training integrated within the undergraduate nursing education may be beneficial. The leadership development model that is chosen needs to be tailored to the needs of the nursing field and include techniques that early nursing education students can really implement and incorporate into their growing skill set. The theory-practice divide is an obstacle that lence for employers and recent graduates. Continuity of preceptor during undergraduate clinical placements is one factor that has been demonstrated to overcome the theory-practice gap. Even though the makeup of the workforce today does not support continuity, there is a need to find ways to address the inconsistent experiences that students with multiple nurse preceptors have. Apart from preparing students for their preceptorship, healthcare organizations and postsecondary education institutions should also work together to provide continuous support and preparation for nurse preceptors. A sobering fact of life in many nursing environments, both clinical and educational, is the significant staff turnover rate. Preceptor roles and practical qualities should therefore be reflected in education. The researcher suggests that all nurses should be required to complete preceptor training, especially because many nursing regulatory and professional organizations list it as a registered nurse's responsibility (Australian Nursing and Midwifery Council 2005; NBWA 2004). LIMITATIONS The tiny sample size of the study had an impact on how broadly the findings could be applied. Nonetheless, the study's themes and tendencies provide guidance for further investigation into this hitherto understudied field. Despite the fact that the study's purposive sample was limited to a single postsecondary institution, demographic data indicated that the sample was generally reflective of the profile of student nurses in the area and throughout Australia.

The study's instrument was recently created, therefore it still has to be refined and put through more thorough testing to determine its validity, reliability, clarity, and parent internal consistency. The results suggest that it would have been beneficial to add a question asking respondents to define the word "pre-ceptor." The study's methodology revealed a great deal of inconsistency in the definition and application of the term "preceptor" and its synonyms, including "practice partner," "buddy nurse," "facilitator," and even some inappropriate ones like "men- tor." It could have been helpful to extract the meanings that students gave to the terms in order to understand how they understand and define the role.

summary:

The purpose of this study was to find out what undergraduate nursing students thought their nurse preceptors should be like in terms of leadership. Nursing shortages are a global issue that are exacerbated by the aging of the current workforce, challenges in recruiting and retaining

qualified candidates, and program attrition from pre-registration education. Unquestionably, there will always be a demand for nurses, and with them, a need for top-notch nursing education. It is obvious that it is crucial to address the issue of how to develop and train the clinical nurse leaders of the future for their position in the unstable environment we currently find ourselves in.

The development of nurse leaders could benefit greatly from longitudinal studies tracking nursing students' experiences with leadership development and their entry into the industry as graduates and preceptors. These studies could also have an impact on undergraduate nursing curricula. All parties involved in the nursing profession must work together to implement the new direction in nursing education. To enhance pre-registration kids' academic performance, the fundamental driving force behind improvement must be the conviction that change is possible. The establishment of a critical mass of people prepared to accept and assume leadership roles within the profession can help to actualize this.

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