

## Policy: Nursing Midwifery Preceptorship

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### Purpose

The purpose of this policy is to provide all new/new-to-area nurses/midwives/students at CMDHB with a structured teaching and learning relationship and environment giving them:

- access to an experienced and competent role model
- a supportive teaching and learning relationship for a negotiated period of time
- a smooth transition to practice in a specific clinical setting
- an opportunity for new nurses/midwives to familiarise themselves with the work area and unique practice requirements
- ability to link theory to practice
- assist with the socialisation to the work area
- reflect on practice
- receive feedback.



**Note: This policy must be read in conjunction with the CMDHB Preceptor Handbook.**

### Scope

This policy is applicable to all nurses/midwives employed at CMDHB and nursing/midwifery students gaining clinical experience within CMDHB.



**Note: Nurses/ Midwives are responsible and accountable for their practice.**

### Policy

#### Principles

- Preceptorship is essential in facilitating the safe and effective integration of new staff and students to a clinical area.
- Robust preceptorship leads to improved recruitment and retention of nursing/midwifery staff, which in turn leads to improved patient outcomes.
- Orientation and preceptoring are not the sole responsibility of the preceptor, Person in Charge or Nurse/Midwife Educator. Every team member in the clinical area has a responsibility to ensure the successful

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of the orientation and retention of new staff. PRECEPTORSHIP IS A TEAM EFFORT.

- Roles and responsibilities of all the Preceptoring team members are outlined in the CMDHB Preceptor Handbook and must be adhered to.
- Each area/service must have a defined orientation programme.
- Each preceptor must complete a Preceptorship Training Programme.
- Liaison between the line manager, nurse/midwifery educator, graduate nurse coordinator (as required) and the preceptors should be undertaken to ensure a new staff member is with an appropriate preceptor. In the case of students liaison with the appropriate lecturer would be required.
- Competency of the preceptor will be evaluated in the annual performance process and can be utilised as part of the Professional Development and Recognition Programme (PDRP).
- The preceptee can formally feedback to the preceptor using the Preceptor Evaluation Form.
- The preceptee/ student shares a clinical workload with a preceptor for a negotiated period relative to their experience and identified learning needs. The shared clinical workload is defined as two nurses/midwives working together (normally within a preceptorship model), who share and are responsible for the care of a clinical client group.
- The preceptee mirrors the preceptor's shifts, following the supernumerary period, where possible, for a further negotiated period, allowing for on-going mentoring and feedback. Students will work rostered shifts which may differ from their allocated preceptor apart from their Transition placement when students will work the same shifts as their preceptor.
- The following six weeks involve a formal supportive educational partnership with regular feedback between the Preceptor and the Preceptee. Ongoing support and coaching is negotiated between the two individuals.
- Orientation to night shift (if appropriate) should occur with their preceptor or experienced night staff. Night shift will only be considered for Transition students.
- Workload allocation should be fair and consistent reflecting the additional responsibilities of the preceptor and the learning needs of the preceptee/ student. Effective preceptoring involves some degree of clinical slowdown in the area and this needs to be acknowledged by other staff members.

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- Time must be allocated for one-to-one preceptor/preceptee objective setting, planning, feedback and discussion.
- The line manager and nurse/midwife educator schedule regular meetings to review progress with the preceptor and preceptee. For students, the lecturer will be involved in these regular meetings.

**For Graduate Nurses:**

**Note: For graduate nurses involved in a NETP programme adherence to the preceptor specification outlined in the NETP framework must occur.**

- NETP specifications allow the preceptors and graduates to be released together from clinical practice for an equivalent of two 'development days' (16 hours) over the 12 month period of the programme.
- The preceptor is to be provided with relevant initial and continuing education for the equivalent of two days (16 hours) per year.
- This policy related to graduate nurses governs those in Primary Health Care and other community placements with graduates under the employment if CMDHB.

**Associated Documents**

Other documents relevant to this policy are listed below:

<b>NZ Legislation</b>	New Zealand Nursing Council Standards for Nursing Entry to Practice Programmes (2005). HPCA Act (2003)
<b>CMDHB Clinical Board Policies</b>	Learning & Development Policy. Recruitment policy. Framework for Educational Development. PDRP Policy.
<b>NZ Standards</b>	Nursing Council of New Zealand competencies for registered nurses. Midwifery Council of New Zealand.
<b>Organisational Procedures</b>	Preceptor Handbook (2006).

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<b>Other related documents</b>	<p>Preceptoring for Excellence National Framework for Nursing Preceptorship Programmes (2006).</p> <p>Nurse Entry to Practice (NETP) Learning Framework (2006)</p>
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### References (Evidence Based Practice)

Counties Manukau District Health Board. (2006). Nursing Preceptor Handbook.

New Zealand Nurse Educators (2006) *Preceptoring for Excellence National Framework for Nursing Preceptorship Programmes*. Report to the Nurse Executives of New Zealand from the New Zealand Nurse Educators Preceptorship Subgroup.

New Zealand Nursing Council (2005). *Standards for Nursing Entry to Practice Programmes*.

NETP Programme Steering Group (2006). *Nurse Entry to Practice (NETP) Learning Framework*.

Bay of Plenty District Health Board. (2006). Preceptorship Policy.

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Terms and abbreviations used in this document are described below:

<b>Term/Abbreviation</b>	<b>Description</b>
NETP	Nurse Entry to Practice- a programme aimed at providing recently graduated New Zealand trained nurses with a safe and well supported environment enabling them to develop skills to become confident in their practice.
PDRP	Professional Development and Recognition Programme.
Preceptorship.	a period of practical experience and training for a student, or new staff member, especially of medicine or nursing, which is supervised by an expert or specialist in a particular field
Preceptor:	An experienced nurse/midwife with excellent clinical skills (for their level) and has the ability to facilitate learning and build confidence in the learner. They should have completed an identified preceptor course.
Preceptee:	Nurse/midwife who requires precepting to an area and is usually a novice practitioner to that area. A novice practitioner can be a student nurse, a new graduate nurse, or an experienced nurse/midwife who is new to the particular area.

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