



Arizona State Board of Nursing

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OPINION: Preceptorship for basic students in a professional nursing program

APPROVED: 6/5/02

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**ORIGINATING COMMITTEE:
Education Committee**

ADVISORY OPINION PRECEPTORSHIP FOR PRE-LICENSURE STUDENTS IN A PROFESSIONAL NURSING PROGRAM

Goal of a Preceptorship: The goal of a preceptorship is to allow a student to integrate the knowledge and skills learned in a registered nursing program with the actual experience of functioning as a registered nurse.

Definition of Preceptor: A preceptor is an RN who, while employed by a clinical facility, is assigned to directly supervise a student's clinical education for the duration of a formal course designed to prepare the student to transition to registered nursing practice.

Statement of Scope

It is within the scope of practice of a registered nurse to serve as a preceptor to a pre-licensure student in an approved registered nursing program. It is consistent with the Nurse Practice Act for programs to offer preceptorships as part of student clinical learning.

It is recommended that a formal preceptorship as outlined in this advisory opinion be limited to a capstone course in the final session of a nursing program. Registered nurses, not in a preceptor role, may assist in the education and supervision of students under the direct or indirect supervision of program faculty.

General Requirements

A. Faculty Responsibilities:

1. Verify that the student in a preceptorship has demonstrated competencies for the level of progression in the nursing program.
2. Verify student understanding of the preceptorship experience including: responsibilities, evaluation criteria, learning goals, assignments, the nature of the preceptorship, and that students are not reimbursed for activities performed while working with a preceptor.
3. Select preceptors according to established criteria collaboratively with clinical agency personnel.
4. Provide an orientation for the preceptor as specified below.

5. Maintain written documentation of the preceptor selection process and orientation.
6. Retain final responsibility for approving student learning objectives/contracts within the framework of the course in which the preceptorship occurs.
7. Meet with students and preceptors before and throughout the precepted experience to clarify roles, learning goals, and the evaluation of student learning and progress.
8. Verify that the preceptor holds an unencumbered active RN license or multistate privilege to practice nursing in Arizona
9. Adhere to faculty-to-student ratios of 1 faculty member for every 10 precepted students during the times students are involved in the care of patients, (A.A.C. R4-19-204(C)).
10. Engage precepted students in faculty-led activities at least once per week to facilitate synthesis of the experience, critical thinking and reflective practice.
11. Maintain accountability for student education and evaluation.
12. Collaborate with the preceptor to evaluate student clinical competence.
13. Provide feedback to the preceptor on the effectiveness of the learning experience and their performance as a preceptor.
14. Provide the preceptor with an opportunity to evaluate relevant portions of the preceptorship experience.

B Preceptor Responsibilities:

1. Hold a current RN license to practice nursing in Arizona or a multi-state compact license that is active and in good standing.
2. Possess clinical expertise appropriate to accomplish the goals of the preceptorship and has at least one year of work experience at or above the level of licensure of the student's program.
3. Hold an academic degree at the level or higher than the student's program whenever possible.
4. Participate in orientation to the preceptorship.
5. Participate in faculty/preceptor conferences and communicate with faculty to clarify roles and the nature of the learning experience.
6. Provide an orientation for the student to the practice area and expectations of nursing care standards
7. Provide the student with ongoing constructive feedback that relates performance standards to student performance
8. Precept no more than 1 person per shift. Other students may work with the preceptor when a faculty member is in the facility supervising their activities.
9. Participate with the faculty and student in the evaluation of the student's clinical competence.

Preceptor Orientation

The orientation to a preceptorship includes, but is not limited to:

1. Mission, goals, and curricular outline of the program.
2. Student objectives, course objectives and course outline.
3. Role of the preceptor and faculty.
4. Performance expectations of the student.
5. Evaluation responsibilities and standards for the student, course, and preceptor.
6. Avenues of communication between the program, faculty, preceptor, facility, and student.
7. Student assignments related to the experience.
8. Expected initial level of knowledge, skills, and abilities of the student.

Rationale: A preceptorship in the final semesters of a pre-licensure nursing program allows the student to integrate the knowledge and skills learned in the program with the actual experience of being a professional nurse. The role transition to an area of nursing practice can be less traumatic and more effective for students through a supportive preceptor experience. Students gain increased confidence and

competence and an increased ability to problem solve. Preceptors can benefit from the opportunity to share knowledge and facilitate growth of an enthusiastic learner and may find that the role brings status, recognition of expert practice, increased job satisfaction, increased learning, and advancement of their practice. (Goldberg, 1987/8)

According to Myrick and Yonge (2005), providing a prelicensure preceptorship has become an accepted and valued practice in nursing education in the United States and around the world. The successful implementation of a prelicensure preceptorship requires that the faculty, student, and preceptor have a clear understanding of the expectations of their respective roles so that the public is ultimately protected. Communication between each of these participants must be maintained throughout the preceptorship to identify and correct any student practice that “is or might be harmful or dangerous to the health of a patient or the public” AR.S. § 32-1601 (16).

References

Goldberg, D. (1987/8). Preceptorship: A one-to-one relationship with a triple “P” rating (preceptor, preceptee, patient). *Nursing Forum*, 23 (1), 10-15.

Myrick, F. and Yonge, O. (2005). *Nursing preceptorship: Connecting practice and education*. Philadelphia: Lippincott Williams & Wilkins.

Oregon Health and Science University School of Nursing (1/27/2003). *Enriching our clinical learning experiences and performance: Guide for preceptors, students, and faculty*.