A Preceptor CD-ROM – A Resource with a difference

Effective clinical teaching: A contemporary approach

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Abstract: Central to the final year clinical experience for undergraduate Nursing students are the preceptors who facilitate a successful transition for students to become beginning practitioners. The preceptor though, requires sound preparation for this role and needs ongoing support from the university sector. The School of Nursing and Health Studies at central Queensland University has designed a CD Rom which provides a contemporary approach to effective clinical teaching. This unique multimedia resource is specifically aimed at supporting the preceptor in the clinical setting for Nursing, but can be applied to any clinical educator role. This paper discusses the planning, development and implementation of this innovative multimedia resource which assists in the preparation of the preceptor and thereby enhances a quality learning experience for the student.

A positive clinical experience is a crucial learning component of any undergraduate Nursing program. It is during the clinical experience that students develop their skills, apply scientific principles in the provision of health care and learn to make clinical judgments in real time and in real situations (Mahat, 1998). The clinical experience though, has also been identified as a source of significant stress for students. A number of studies have identified that clinical practicum is quite anxiety provoking, with some students attributing their stress and anxiety directly to the new clinical setting in which they are placed (Kleehammer, Hart & Keck, 1990; Meisendhelder, -1987; Selleck, 1982; Lewis, Gadd & O’Connor, 1987; Pagana, 1988, 1989, 1990; Beck, 1993). Given the implications for the student and their learning then, the clinical teacher plays a significant role in the student’s clinical experience. In fact, it is this educator who facilitates the learning process and identifies appropriate learning opportunities for students when in the clinical setting. O’Shea-O’Shea and Parson (1979) argued that the behaviours of an educator who promoted a positive learning environment included friendliness, being understanding, being supportive and being enthusiastic. Whilst effective clinical teachers can potentially allay student anxiety and fear, Mahat (1998), identified that the student-teacher relationship is also one of the greatest sources of stress among nursing students. White and Ewan (1991) stress that clinical teaching and learning is vital for the development of experiential nursing knowledge and to ignore the value of this would in-fact mean ignoring the student’s clinical learning. It is therefore important that faculty consider the value of clinical education and educators and provide appropriate training and support to ensure that they are prepared for this complex and diverse role. Beattie (1998) argued the importance of collaborative and proactive nursing education which develops effective clinical teaching strategies, which in turn contributes to a positive learning environment.

The model of clinical teaching used in undergraduate nursing programs throughout Australia varies. Within the School of Nursing and Health Studies at Central Queensland University (CQU), there are currently two models of clinical teaching being used. These are 1) the facilitator student model and 2) the preceptor student model. The preceptor student model involves the student working with an experienced clinical nurse in a one on one situation (Myrick, 1988, cited in Beattie, 1998). At CQU, this model is currently used for all clinical placements for third year students. This preceptor model is founded upon the notion that the student’s clinical learning experience is enhanced by the involvement of clinical nurse educators who are recognised as competent by their discipline peers within the clinical setting (Paterson, 1997). The credibility of such educators is measured in terms of their clinical competence (Lee, Cholowski & Williams, 2002). The effectiveness of the
is influenced by the individuals' theoretical and clinical knowledge, as well as their attitude toward their profession (Reilly & Oermann, 1992). Although this preceptor student model may appear ideal—the reality is that preceptors have to perform a dual role. They are required to continue with a patient load in an ever changing and complex clinical environment. The complexity of this role is due to its many components that include orientating, supporting, teaching and sharing of clinical experiences with the student (Bain, 1999). At times, the preceptor/student relationship can be less than ideal and can become quite strained as the preceptor tries to cope with the ever increasing demands and acuity within the clinical setting. In addition, the preceptor may not have had the opportunity to fully prepare for the role or to understand the change in “hat” they will be required to switch between. Beattie (1998) argues that these changing demands within the clinical setting have implications for the preceptor’s preparation. Faculty, who need the preceptor to be a positive part of the clinical experience, must assist in their role preparation and thus develop appropriate support programs and training opportunities. Concerns of nurse educators and nursing administration were identified by Neill et al (1998) with regard to the preparation of nurses in order that they function effectively in preceptor roles. Neill et al (1998) suggest that staff development educators are in an ideal position to promote collaborative efforts amongst the nurse preceptor, nursing faculty and nurse managers, so that a positive climate can be created that encourages participation in this important relationship. Neill et al (1998) argue the need for preceptors to be orientated to their roles is largely the responsibility of faculty. It is the preparation of preceptors that the School of Nursing and Health Studies at Central Queensland University takes seriously. However, a significant barrier that impacts on such preceptor preparation is the tyranny of distance.

CQU has traditionally utilised a model of preceptor preparation and support, which incorporates hard copy documents, the conducting of preceptor workshops (up to 30 per year) and the identification of an on-campus academic support person to liaise with the preceptor and student during the clinical practicum. Whilst this traditional model appears to have been successful for preceptors who are within the metropolitan regions of the CQU campuses, it has become increasingly evident that preceptors in rural and remote locations feel less prepared, unsupported and at times quite isolated. The diversity in locale of preceptors is significant and means that faculty cannot in all reality visit every healthcare agency prior to the commencement of the student’s practicum. Similarly, some preceptors find that attending workshops can also be difficult, and at times costly. These barriers can adversely impact on the level of preparation for some preceptors who agree to take on this important role. These preceptors may enter into preceptor/student relationships without optimal preparation, which can have a cascading effect on the outcomes of the clinical placement and whether the student is successful in achieving required competence.

In 1999, an idea was germinated by the Director of Clinical Learning, Ms Kerry Reid-Searl, for an innovative resource that preceptors in any area (remote, rural and metropolitan) could use. The notion was that a preceptor resource was required that was easily accessed, user friendly and in particular, educative in relation to the issues and concerns that preceptors experience. Many hours of brainstorming, reading, reviewing of existing resources, and feedback from preceptors led to a concept proposal for the development of an interactive CD ROM. The idea evolved with a view of incorporating links to CQU and other relevant professional bodies, as well as video and audio components, in order to portray different student/preceptor situations. The CD also had to be developed so as to enable the preceptor to be self directed and self-paced. The use of CD ROM’s for teaching purposes is not new. Interactive, multimedia technologies were successfully utilised as learning mediums by Jeffries (2001) and Jeffries, Woolf and Linde (2003) for teaching medication and electrocardiography skills. Jeffries (2001) identified that student’s using the CD-ROM’s demonstrated significant cognitive gains compared with a group who participated in lectures only. Shellenbarger (1999) also
highlighted the benefits of using both visual and auditory information sources. It should be noted that, however, up to this point in time, no research had been identified that specifically related to a design of a format to prepare preceptors for their roles.

The development of this contemporary education tool means that the preceptor can access the CD Rom according to their own level of readiness and that information can be retrieved at any time, as often as desired and necessary for effective learning. Such a model which incorporates the principles of adult learning is in stark contrast to having the same information delivered via a lecture, such as that which occurs in preceptor workshops, where the lecturer can make little provision for individualisation of the pace and rate of information delivery (Grobe 1984 cited in Saba, Reider & Pocklington, 1989). Without individualisation, which is frighteningly difficult in a classroom setting, the resultant effect can be frustration for the adult learner (Grobe 1984 cited in Saba, Reider & Pocklington, 1989).

Delivery of preceptor information via this CD Rom ensures consistency of information being presented to all preceptors. Unless the same trainer is used, this consistency is also difficult to ensure.

The design of the CD ROM thus began in earnest and the development team was established. The Director of the Office of Clinical Learning was an obvious choice to guide expert content, but input from multimedia design personnel was essential to ensure that the concepts worked effectively. The team also consisted of two multimedia producers, a multimedia developer, an application specialist and a video producer. A small seed was beginning to sprout into what was eventually going to be a very big tree. During the life of the project, these experts also took on additional "fun" roles as actors and voice-overs for various elements of the CD ROM. It was envisaged that the project would be time consuming and a two-year time frame was planned. As a key support mechanism for our students, this work was identified as complying with the criteria for full multimedia support from the Multimedia Design Centre at Central Queensland University. The cost of consumables was considered outside this brief and was supported by the School of Nursing and Health Studies. In evaluating the consumable costs associated with production of the print alternative, it was evident that the CD ROM option would in fact ultimately reduce expenses for the school. The development time, however, has equated to over 485 designer/developer hours (approximately $55,000 in labour costs).

In the initial development phase, ideas were written on many metres of butcher's paper. Ideas were refined after reviewing existing resources, seeking peer input, reviewing preceptor feedback and reviewing the literature on preceptor needs. After many months, a concept proposal was developed. This proved to be a time consuming process because it soon became apparent that much of the ideas for content was repetitive, irrelevant or needed further development. After feedback, further changes occurred to the site plan and the development phase began. This development phase involved a rewrite of the content from existing paper-based Preceptor Resources to suit the CD Medium. The final content headings and sub headings included:

- Prelude to Preceptorship
- Preceptorship defined
- Finding time
- Students' clinical hours
- A planned approach
- Sharing preceptorship
- Contacts for help and support
The next phase included the compilation of a storyboard and the identification of the multimedia elements. Print versions of content were developed screen by screen with significant editorial changes. Scripts were prepared for the audio and video elements, a component that took many months and included the capture of all audio and visual elements. In addition, the content links were established through identification of key words that would link to other platforms as well relevant Internet sites. These sites would provide further valuable information.

The authoring product, Flash Micro, was chosen due to its user-friendliness across all platforms and its support for all media elements. All elements of the CD ROM were compiled onto a prototype CD and the product-testing phase began. Quality checking, peer review and feedback was sought, with subsequent refinements being implemented. Again this proved to be a very lengthy and time-consuming process. The seed that was germinated in 1999 became a fully grown tree in May, 2003. A lot longer than the planned two-year time frame.

Whilst the project was exciting in all phases, there were several issues that emerged. It became apparent that working collaboratively has both strengths and limitations. When a team involves a number of players who are not necessarily in the same profession, it is imperative that roles are clarified as well identifying the avenues to address issues throughout the life of the project. Members need to be aware and respectful of each other’s expertise, as well as the timelines, which must be realistic. The clarification of roles and identification of who is expected to take on each aspect of the project must be clearly articulated and preferably documented at the outset of the project.

Summary

Without doubt, preceptors are a valuable asset to the healthcare organisation in which they work, and to the tertiary sector which is charged with the responsibility of registered nurse education. They are the role models and have a direct impact on the education of the future nursing workforce; a significant and responsible role. As such, ethically and legally, they deserve to be trained properly so that they can undertake this role with confidence and competence. The School of Nursing and Health Studies at Central
Queensland University accepts the preceptor/student relationship as fundamental to successful outcomes for student nurses. As such, a contemporary approach to effective clinical teaching was needed – hence the development of the preceptor CD ROM.

References


