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# The Preceptors' Experiences in Precepting ELTDP Nursing Students in Surgical Clinical Placements

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<p>In Finland, statistics show that the number of students from diverse cultures is increasing every year. Nursing students who study under the English Language Degree Taught Program (ELTDP) spend nearly half of their study program in clinical placements for their internship according to the European Union and nursing schools' directives. These students need guidance and support from preceptors throughout their clinical placements.</p> <p>Our descriptive qualitative study was designed to explore the preceptors' experiences in precepting ELTDP nursing students in surgical clinical placements. We conducted semi-structured interviews with open-ended questions with four registered nurses from surgical wards within the Metropolitan region. Inductive content analysis was adapted in data analysis.</p> <p>Preceptors were aware of their role of precepting; teaching, motivating and supporting. Integrating ELTDP nursing students to the Finnish working culture and translation emerged as new roles for the preceptors. These were perceived to be confusing and time consuming due to the use of two languages simultaneously. In spite of that, preceptors were happy about meeting new people and the cultural enrichment that ELTDP nursing students brought with them. In addition, preceptors appreciated more support from nursing school teachers through consistent communication. They were of the opinion that they could get financial rewards for precepting and healthcare organizations (employers) could encourage all nurses to precept and allocate them time to attend the organized education sessions during their normal working time.</p> <p>In the future, the experiences of ELTDP nursing students' preceptors in Finnish healthcare organizations could be researched further.</p>	
Keywords	preceptors, preceptees, international students, multicultural preceptorship, English preceptorship in Finland.

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<p>Tilastot osoittavat vieraista kulttuureista tulevien opiskelijoiden määrän kasvavan vuosi vuodelta. Sairaanhoidon opiskelijat, jotka opiskelevat englanninkielisessä tutkinto-ohjelmassa, käyttävät sekä Euroopan Unionin että oppilaitosten asettamien säännösten mukaisesti miltei puolet opiskeluaikastaan kliinisessä opetuksessa. Nämä opiskelijat tarvitsevat ohjausta ja tukea ohjaajiltaan läpi kliinisten opetusjaksojen.</p> <p>Tässä tutkimuksessa omaksuttiin kuvaileva kvalitatiivinen tutkimusote, jonka tarkoituksena oli selvittää ohjaajien kokemuksia englanninkielisen tutkinto-ohjelman opiskelijoiden ohjaamisesta kliinisessä opetuksessa. Tutkimus tehtiin avoimin kysymyksiin toteutettuina semistrukturoituina haastatteluina. Tutkimuksessa haastateltiin neljää pääkaupunkiseudun sairaaloiden kirurgisilla osastoilla työskentelevää rekisteröityä sairaanhoitajaa. Haastattelussa saadun tiedon analysoinnissa käytettiin induktiivista sisältöanalyysia.</p> <p>Ohjaajat olivat tietoisia ohjaajan roolinsa perinteisestä sisällöstä: ohjaaminen on opettamista, motivointia ja tukemista. Tässä tutkimuksessa löydettyjä uusia ohjaajan rooleja olivat englanninkielisessä tutkinto-ohjelmassa opiskelevien sairaanhoidon opiskelijoiden integroiminen suomalaiseen työkuulttuuriin ja heidän kielellinen avustamisensa. Opiskelijoiden kielellinen avustaminen koettiin sekoittavana ja aikaavievänä kahden samanaikaisesti käytettävän kielen takia. Tästä huolimatta ohjaajat olivat iloisia englanninkielisen tutkinto-ohjelman kautta tavatuista uusista ihmisistä ja heidän mukanaan tuomasta kulttuurisesta rikastumisesta. Tutkimuksen havaintona oli lisäksi, että englanninkielisen tutkinto-ohjelman opiskelijoiden ohjaajat arvostaisivat johdonmukaisen viestinnän kautta saatua nykyistä suurempaa tukea oppilaitosten opettajilta. Ohjaajat olivat myös sitä mieltä, että ohjaamisesta voisi saada taloudellisen kannustimen ja että sairaanhoito-organisaatiot (työnantajat) voisivat kannustaa kaikkia sairaanhoitajia osallistumaan ohjaukseen. Ohjaajille tulisi heidän mielestään myös järjestää työajan sisäpuolista, johdettua ohjaamiskoulutusta.</p> <p>Mahdollinen jatkotutkimuksen aihe on entistä syvällisempi perehtyminen englanninkielisen tutkinto-ohjelman opiskelijoiden kliinisen opetuksen ohjaajien kokemuksiin ohjaamisesta.</p>	
Avainsanat	ohjaajat, harjoittelijat, ulkomaalainen opiskelijat, monikulttuurinen ohjaus, englanninkielinen kliinisten ohjaus suomessa

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# 1 Introduction

## 1.1 Background

In Finland, the rate of International nursing students is getting higher every year. According to AMKOTA database by the Ministry of Education and Culture (2011), the number of international students enrolled in the degree program in nursing in 2001 was 394 and by 2010 the number had increased to 512. Hence, there is a greater need from the part of experienced registered nurses to guide and teach international nursing students during their clinical placements.

Currently according to Study in Finland, ELTDP -English Language Taught Degree Program- of nursing is offered in 10 Finnish universities of applied sciences. The program follows the European parliament and the council of European Union's directive 2005/36/EC on the recognition of professional qualification. The directives indicate that the nursing education takes at least 3 years or 4 600hours of theory and clinical learning. Out of this, a third or more should be theory lessons and not less than half should be covered in clinical learning. (Keighley 2005:4.)

In the clinical placement, a student works alongside a designated professional nursing staff- a preceptor-. In Sloand, Feroli, Bearss, and Beecher, 1998 work as cited in Öhrling and Hallberg (2000:228), the preceptor's role is that of being a clinical teacher in a one to one relationship with the student while still performing other professional responsibilities of his/her position.

## 1.2 Environment

In Finland, health care services are offered by different organizations. The major organizations offering healthcare services in the metropolitan area include the public sector: health centres in each municipality, Helsinki university central hospital and the district hospitals belonging to the Helsinki-Uusimaa hospital (HUS). According to The

Finnish Nurses Association (2011), the main responsibilities of these health care organizations are to take an active role in the society by; promoting people's health and wellbeing, developing clinical nursing, education, management, and research, influence the governmental policy on social, health, educational, science and employment issues.

Finland is experiencing an increasing number of immigrants. The Finnish society needs to act to the same concern by providing enough places to educate this group. The Finnish National Board of Education (2011), has reacted to this and ensured that all immigrants, both children and adults, get unlimited opportunities to function as equal members of the society. More so they are helping them to integrate and support their cultural identity. It is important for the culturally diverse nursing students to be well prepared to work in different cultural settings than their own, while gaining insights to transcultural nursing which is essential for the present and future nursing care profession. (Leininger & McFarland 2006:4; Mashaba & Brink 1994:209-213.)

### 1.3 Problem

English language is increasingly being used in non-English-speaking countries. More and more of these countries are beginning to offer graduate programs taught in English language. (Grin 2010:2.) The clinical education part in nursing degree creates a unique condition for the students. When students have to practice their clinical skills in the hospitals within these countries, they are exposed to a multilingual factor. For instance, in Finland, hospital staff and of course local patients, who make up the highest percentage of patients, communicate in Finnish. It is therefore important to hear the experiences of ELTDP preceptors in a non-English speaking country. It is revealed that very little is known or researched on this subject through earlier studies.

## 1.4 Purpose and Study Question

The purpose of our study was to explore the preceptors' experiences in precepting ELTDP nursing students in surgical clinical placements.

The study question focused on 'what are the preceptors' experiences in precepting ELTDP nursing students, in surgical clinical placements?

## 2 The core concepts

### Preceptee

As defined in the preceptor handbook (2010-2011:7), a preceptee is a student who practices and is paired with a qualified registered nurse with the aim of achieving his/her set of learning goals and objectives during the clinical practice period. According to Gaberson and Oermann (2007:6), a preceptee has to be trusted and welcomed as part of the nursing team in order to get more room for a conducive learning environment. This will enhance the achievement of a positive learning experience of the student during the clinical placements.

### Preceptor

A preceptor has been defined as "an experienced and competent staff nurse who may have received formal training to function in this capacity and who may serve as a role model and resource person to newly employed staff nurses, student nurses or new graduate nurses. A preceptor merges his/her knowledge, skills, abilities and roles of teaching and guiding to help preceptees develop their clinical skills. (Swihart 2007:3).

### Precepting

Precepting is the act by which a student is assigned a qualified, experienced nurse (preceptor) to work with during clinical placements (Swihart 2007:5). The student is expected to follow the preceptor's working schedule throughout the placement period

and get feedback on a regular basis on the learning progress. In an ideal situation, a teacher from the nursing school visits the student at least twice during the whole clinical placement period to discuss together with the preceptor and preceptee about the learning development of the student. Clinical placements provide students with opportunities to obtain knowledge necessary for patient care, clinical judgement and critical thinking through the help of preceptors (Gaberson & Oermann 2006:60). Nursing education has evolved considerably compared to its origin and thus has the term preceptor in the current nursing environment.

### 3 Earlier studies

We conducted extensive literature research using electronic data bases: Ovid, Cinahl, Pubmed, Medline and manual search on goggle using keywords; preceptor, preceptee, Multicultural preceptorship, International students' preceptoring, English preceptorship in Finland. Publications between 1994 and 2011 were considered in the inclusion criteria.

#### 3.1 Role of preceptor

Preceptor are regarded as role models who sets examples of the nursing profession, educators who guide students throughout their clinical placements and social supporters who help the students in their transition and linking theoretical knowledge and the realistic working environment (Letizia & Jennrich 1998:215). Preceptors help in bridging the gap between what preceptees learn in school and what actually happens in practice at the clinical placements. They support preceptees in obtaining clinical confidence and competence needed in providing the best possible care to patients. (Oermann & Heinrich cited in Rose 2008:106.)

Preceptors facilitate students' learning through the development of mutual trust during the preceptoring relationship. The preceptors should view preceptees as people with capabilities and interests in becoming competent nurses, with vulnerabilities during learning (Öhrling et al. 2000: 236). The perception of preceptees by preceptors in this manner creates conducive learning environment for them. At the beginning of precep-



torship, preceptor should take time to familiarize themselves with the preceptees' level of knowledge, competence and responsibility (Öhrling et al. 2000: 232).

ELTDP nursing students in clinical placements usually struggle to find their place in the new clinical environments. To help them overcome this challenging time, they need a preceptor to help and guide them throughout their clinical placements (Mattila, Pitkälä and Eriksson 2010:156.) Benner (2009:9-18) points out that nurses are grouped into different categories according to their level of expertise namely; novice, advanced beginner, competent, proficient and expert. The best group of nurses to become preceptors are the proficient nurses who have not yet reached the stage of being grouped as experts because expert nurses work intuitively and often, they are not able to explain why they usually act in a certain manner and or how they handle a situation the way they do (Benner 2009:18).

### 3.2 Ideal preceptor

Beres (2006: 144) states that a preceptor should be knowledgeable and competent in the clinical field to enable them offer better guidance to the preceptees, facilitating their education and ability to transfer knowledge into practice. According to Öhrling et al. (2000:232), the preceptor should be able to pay attention to the preceptee in addition to their normal nursing role and the safety of the patient. Thus, the preceptor should also be aware of practices that are not optimal and may be unsafe in the clinical placements. Stokes and Kost cited by Gaberson and Oermann (2007:78) brings forth more qualities of an ideal preceptor as having skills to facilitate and support preceptees' learning activities through planned assignment, promoting preceptees independence and asking and answering question.

Qualities of an ideal preceptor includes sound knowledge base, organizational and decision making ability, concerns for students, effective teaching and communication skills and commitment to the preceptor role ( Myrick & Barrett 1994:195). Emphasis on communication skills is essential when it comes to precepting students using a second language. For communication to be successful, a common language from between preceptor-preceptee is necessary. Lack of a common language can lead to barriers to successful learning (Johnston & Mohide 2009:344).

The precepting process should be as effective as possible. Effective precepting can be achieved through the analysis of preceptees' evaluation of their preceptors and preceptorship process (Rose 2008:107). Their feedbacks can be used to identify weaknesses and work on means of strengthening them. The Clinical Learning Environment Scale (CLES) tool developed by Saarikoski and Leino-Kilpi (2002:266), has been useful for preceptorship evaluation purpose. The tool is recommendable due to its consideration of transcultural and or international studies. It has been widely used in Finland to evaluate the quality of clinical learning environment and preceptorship. Results from Saarikoski, Leino-Kilpi and Warne (2002:347) study shows that the tool has been useful in collecting data relevant to the organization in relation to preceptorship development.

### 3.3 Preceptorship preparation

Preceptorship plays a significant role in the education process of nursing students. Placing proper emphasis on the preparation of preceptors is essential for optimal results from the clinical learning (Altmann 2006:1; Baltimore 2004:133; Kemper 2007:10). Despite the weight on the importance of proper preceptors' preparation for this role, enough is not being done to ensure preceptors are well prepared for this role (Yonge & Myrick 2004:296).

Preceptorship happens on a one-to-one relationship between the preceptor and preceptee in the clinical environment. The healthcare organizations providing the clinical placements should aim at continuously improving the preceptorship experiences. (Letizia & Jennrich 1998:213). Lockerwood-Rayerman (2003: 32, 37) work emphasizes the importance of the healthcare organizations' need to support preceptors by providing them with the necessary guidance due to the impact preceptors have on preceptees. Preceptors are also entitled to information regarding their roles and characteristics, preceptor-preceptee matching and orientation resources.

Preceptors' capability to achieve their role should be a concern to the healthcare organizations. The findings of Häggman-Laitila., Eriksson., Meretoja., Sillanpää. and Rekola (2006:381-391) indicate that clinical supervision is an effective method of recruiting personnel and increasing preceptees' satisfaction and their wish to return to

the ward after their graduation. In addition to this, preceptorship influences the choice regarding the student's field of nursing or a specific ward in the future. For this reason, healthcare organizations should put effort in ensuring that the preceptors are well prepared to deliver their role.

Although preparing preceptors is value adding, it is wise to plan the education sessions prior to providing them. A productive education session ensures the information provided is not overwhelming and materials are of utmost relevance, practical and application while precepting. Vital components in preceptorship should entail: "socialization, skills building techniques, critical thinking facilitation and assignment management. Within assignment management, organization, prioritization, delegation and confidence building should be incorporated." (Baltimore 2004:133.)

In brief, the education should consist of formal and informal preparation for the preceptors to perform effectively in their role and should be based on communication, teaching techniques and methods, adult learning principle, conflict resolution and evaluation (Baltimore 2004:133; Letizia & Jennrich 1998:213). Baltimore (2004:139) points out interactive strategy as an effective teaching strategy which includes name tents, voicing and documenting learning needs of participants, video role playing, brainstorming and sharing.

### 3.4 Reward for preceptors

Motivating the preceptors to continue precepting is essential. Appreciation of the preceptors for their value and contribution is a good means of keeping them motivated and attract prospective preceptors to the role. The appreciation can be shown by both the nursing schools and the healthcare organizations. The preceptors' contribution towards the nursing education is of great significance and should not go unrecognized. (Recognizing and rewarding nurse preceptors in critical care 2003:16.)

Earlier studies show that preceptors express the desires to receive some form of rewards for their contribution (Stone & Rowles 2002:165). Preceptors identified rewards as being positive and negative. The most favoured positive rewards, as stressed in various literature, were money, educational benefits, career advancement, paid com-

pensatory time and preference in scheduling and/or holidays (Kemper 2007:12; Recognizing and rewarding nurse preceptors in critical care 2003:16; Stones et al. 2002: 165.) In addition to these, other rewards illuminated in literature were: Preceptor of the year award, recommendation letter, contract with organization to reduce workload for preceptor/sufficient time to do a good job as a preceptor, allowing co-precepting (2 preceptors) for an preceptee, feedback, recognition and encouragement meeting with other preceptors, nursing teachers and the healthcare organization employers, gifts from students, preceptor recognition in nursing schools "wall of fame", journal subscriptions, meals and /or transport reimbursement, having preceptee follow preceptor work schedule, wearing a distinctive nametag, respect and recognition from others (especially peers and managers).(Recognizing and rewarding nurse preceptors in critical care 2003:16; Stone et al. 2002:163). Negative rewards, according to the Recognizing and rewarding nurse preceptors in critical care (2003:16), are guilt trips, increased nurse patient ratio (when preceptees are viewed as extra workers), lack of independency due to precepting, extra documentation, unrealistic goals and objectives, short preceptor rotation due to staff insufficiency.

### 3.5 Support for preceptors

Support from nursing schools and healthcare organizations to preceptors are important for successful preceptorship. The work of Yonge, Trojan and Haase (2002b: 75) shows that preceptors have a reduced will to accept preceptorship after they have experienced feelings of being overworked. Overload of work is a result of the additional role of precepting, which is considered time consuming onto the normal workload of nurses (Lockwood-Royermann 2003:36). The overload has been stressful to many preceptors due to insufficient support and recognition from the nursing schools and healthcare organizations. Preceptors have found themselves with a guilt feeling. This happens when they do not have enough time to meet the preceptees' needs due to overwhelming amount of work (Öhring 2000: 232). For this reason the healthcare organizations should recognize the added roles preceptors have, in addition to their normal nursing roles.

Employers in the healthcare organizations play a significant role in matching the preceptor and preceptee. Lockwood-Rayermann (2003:36) coins this by stating that it is the healthcare organization employer's responsibility to match the preceptor and preceptee. Proper preceptor-preceptee match according to Yonge et al. (2002a:24), relieves stress in preceptorship. Further more appropriately matching the two, potentially contributes to preceptees' professional satisfaction, positivity towards their future nursing career and on their views about the organization. In turn, this would provide the preceptors with the feelings of achievement on their precepting role. Results of preceptors' satisfaction would increase their willingness to precept in the future. (Lockwood-Rayermann 2003:36.)

The findings of Atkins and William (1995:1012), provides an overview on what support colleagues can offer to preceptors. The support includes understanding of precepting and not assuming that preceptor and preceptee should be allocated double work. Preceptors do appreciate when colleagues offer a listening ear and a person to share issues related to precepting when working with preceptees.

Nursing teachers' support for preceptors is essential. Yonge et al. (2002b: 77) reported that support for preceptors from nursing teachers through feedback and open communication was essential. Feedback would help in relieving some of the stress preceptors may face during the precepting process. Yonge et al. (2002b: 77) continues and states that nursing teachers should evaluate their preceptees properly on theoretical knowledge, motivation and language skills with any deficit being corrected before preceptees are sent out into clinical placements. It should also be ensured that preceptors are assigned preceptees with a genuine interest in learning and they should be aware of what is expected of them (Kemper 2002:10).

## 4 Methodology

Qualitative research focuses on the way people view their experiences. This type of research mainly aims at understanding, describing and interpreting social occurrences as perceived by individuals and groups. (Holloway & Wheeler 2010:3.) The scientific orientation of qualitative research is holistic, and the purpose of qualitative research is to examine the whole rather than the parts (Burns & Grove 2005:9). Our study purpose and focus was on preceptor experiences in precepting ELTDP nursing students. It was hard to study their experiences as a part; therefore qualitative research was a more appropriate method of research for our study.

### Sample

The method of identifying participants for this study was purposive sampling. Purposive sampling refers to the selection of participants who are most beneficial for the study Polit et al. (2008: 517). Inclusion criteria for the samples were nurses working in surgical wards and had precepted ELTDP students within that setting. In addition they had to be nurses working within the Helsinki metropolitan area and they had to be able to speak English.

Nine preceptors in surgical wards known to the final project supervising teacher and ourselves were contacted and requested to participate in the study. Out of the nine prospective participants contacted, four accepted to participate in the interviews. They were from different backgrounds, two being Finns and two with an international background. The participants had precepted 1-5 ELTDP nursing students and had a minimum of three years work experience. A summary of the characteristics of the participants' sample is shown below in table 1.

Table 1. Sample Characteristics

Participant	Age	Background	Years of experience	Total No. of preceptees	No. of ELTDP students
1	28 yrs	Finnish	3.5	3	1
2	33 yrs	International	7	7	2
3	32 yrs	International	8	6-7	2
4	38 yrs	Finnish	15	10-15	5

## Data collection

Our data collection method was semi-structured interviews using open-ended questions. Polit et al. (2008:742) defines a semi-structured interview as an interview in which the researcher has a list of topics to cover rather than a specific series of questions to ask. We chose to use semi-structured interviews in our study because we could not foretell what the participants were going to answer to the questions. By allowing the participants to talk freely about their experiences in precepting ELTDP nursing students using open-ended questions, we tried to get as much information as possible about the study topic without distorting their views. Polit et al. (2008:537) continues and states that semi-structured interview method helps participants to talk freely about a subject; hence researchers have the opportunity to obtain all information required.

We used face-to-face interview approach in our study topic because we had open-ended questions and we wanted to obtain more information by encouraging participants to narrate their experiences freely. Polit et al. (2008:265) notes that "face-to-face interviews are regarded as the best method of collecting survey data because of the quality of information they yield". The interviews were tape recorded and before every interview the tape-recorders were tested to ensure they were working. We initially planned on noting participants' physical expressions during the interviews but this only happened during the first interview. It seemed to destruct the participant and therefore was not done during the rest of the interviews. During the interviews we followed Seldman's interview techniques. We ensured that we listened more and talked less and followed-up on what the participant were saying without interrupting them. In cases where the preceptor strayed from the topic, we kept the participants focused on the subject and asked for concrete details while avoiding leading questions with tones that implied an expectation. We also explored participants' laughter where necessary because according to Seldman, laughter can be a cry of pain and silence may be a shout. (Streubert-Speziale et al. 2003.) The interviews lasted 45 minutes. We sent out the consent form and questions to participants beforehand in order to familiarize themselves with our interview questions. See appendix 1 and 2 respectively.

The interviews took place in different places as per the participants' choice. All the interviews were conducted indoors in peaceful and quiet rooms. Doors and windows

were closed to ensure that privacy was maintained. The first interview was slightly disturbed due to a seagull which was by the window and it made loud noise for about 2 minutes.

## Data Analysis

We used inductive content analysis for the analysis of data. The main steps of inductive analysis were followed throughout the analysis. The steps helped us to interpret the collected data; firstly selecting the data, followed by the data categorization and finally creating conclusive concepts. (Miles & Huberman 1994:10-11.) To understand the participants' ideas, we both listened to each of the recorded interviews a number of times. The interviews were then transcribed verbatim using Microsoft word. To ensure that the transcripts were precise, we re-listened to the interviews and read through the transcripts. On the word document a wide margin was left on the right side of the transcript for the purpose of coding. The document was then printed out to ease the note making process. During the analysis process most relevant statement for the study were identified. After which they were grouped together in a table according to similarity creating codes. The table enabled us to have a clear picture of the codes and made it easier to understand the work. The codes were further grouped into sub-categories and finally grouped the sub-categories into categories. Through this approach we created a meaningful whole meeting the purpose of our study. Our process adapted DeSantis and Ugarriza (2000) sentiments that in this type of analysis useful statements that captures and unifies the nature or basis of the experience into a meaningful whole should be identified (cited in Polit et al. 2008:562).

## 5 Findings

The findings are based on interviews from ELTDP preceptors in surgical wards around the Metropolitan area. Six categories emerged from the data analysis. The main categories were the role of ELTDP preceptor, language, preceptorship preparation, rewards and support for preceptor as discussed below. Table 2 that follows shows the summary of our findings.



Table 2. Findings summary

Category	Subcategories	Codes
Role of ELTPD preceptor	Teaching, motivating, supporting  Formulating realistic goals  Evaluating and analyzing preceptees progress  Integrating preceptees into the Finnish working culture  Help preceptees cultivate a profession  Translating	...preceptor you have to be there to teach, guide, motivate and support the (student) preceptor  ...these students needed more support with these objectives  ...have discussion and analysis with the preceptee on regular basis  ...adjust to working with Finnish people and Finnish patients  ... you have helped someone to have a profession  ...translate it to the student
Language	Barrier to learn  Wrong attitude and fear of ELTDP students	...limits the student's possibility to learn  ...there are always this wrong attitudes
Preceptorship preparation	Education programs  Past experiences as preceptees	...we have like education days ... didn't have any like preparation  ...when I think of (past experience) ... when I'm tutoring I'm remembering
Rewards for preceptors	Positive:  Financial incentives  Meeting new people	...some financial reward to preceptors  ... get to meet new people
	Negative:  Ungrateful students  Precepting as an imposed role  Work overload	... the student is not just putting as much  ... responsibility which is demanded by the health care law  ...you are overwhelmed or a bit overworked

Support for preceptors	From nursing schools	...important for the students to be supported from the school as well ... nice if the student at least learnt some Finnish ... we didn't have enough information about the students' ability ... would be nice to ...see the programs they are being taught
	From healthcare organizations (employers)	... department needs to also encourage ... he does not have to give 100% in the work
	From colleagues	...when we are evaluating the student the whole ward always give their general experience with the student

### 5.1 Category: Role of ELTDP preceptor

Participants seemed to perceive that the preceptor's role was an important one. They had knowledge and understanding of what was expected of them as preceptors. The roles were teaching, motivating, supporting, integrating preceptees into the working culture, translating, evaluating and analyzing preceptees' progress and formulating realistic goals.

#### Teaching, motivating, supporting

The participants knew that it was their responsibility to teach the ELTDP nursing students during their clinical placements and motivating and supporting them to learn.

*Participant 1: "...It is a very important role, basically when I was thinking about the question as a...preceptor you have to be there to teach, guide, motivate and support the (student) preceptor."*

One participant felt that the students were looking at her as a "mother-figure" who was like a guardian and offered them support and advice.

*Participant 4: "...I was more like guarding...I was more of a mother figure sometimes especially for the boys."*

## Formulating realistic goals

In cases where students seemed to have ambiguous and broad goals, the participants stepped in and supported them to come up with more realistic objectives for the clinical placements.

*Participant 1: "...students can sometimes have quite ambitious goals and in practice they cannot achieve these goals.....and they (get) frustrated so it is our role to keep their feet on the ground"...*

*Participant 4: "...these students needed more support with these objectives..."*

## Evaluating and analyzing preceptees' progress

In order to know how the students were progressing during the clinical placements, the participants had regular feedback sessions with the students. They considered this an important part of the preceptorship role.

*Participant 1: "...it is important to have discussion and analysis with the preceptee on regular basis"*

## Integrating preceptees into the Finnish working culture

Precepting ELTDP nursing students meant that there were students from different cultural backgrounds. For this reason as well as teaching the students clinical skills, the participants felt that they had to also help them to integrate into the Finnish working culture.

*Participant 4: "...my role was to help preceptees to adjust to working with Finnish people and Finnish patients and how to co-operate with people...my role was to support and give room for different views."*

*Participant 3: "...it's my role to tell them ...this is how it is done here....if you want to work in a Finnish hospital then they have to know that this is the way some things are done."*

## Help preceptees cultivate a profession

Preceptees are in the clinical practices for learning purposes. The participants seemed to be aware of this to the point that they considered themselves professional cultivators. They seemed to be aware that they were helping future nurses mold their career. This was positive experience to them as it gave a feeling of being important.

*Participant 2: "...my first positive experience is that at least you have helped someone to have a profession."*

## Translating

Participants reported that the use of two languages while precepting ELTDP nursing students added an extra role to them. Communication between patients and preceptors was in Finnish and preceptors translated thereafter to preceptees in English, to ensure that the preceptees understood the conversations. Preceptors perceived this role to be confusing and time consuming.

*Participant 2: "...having to speak two languages almost at the same time is tiring and it's a challenge you get mixed up in the middle of it...I have to explain to the patient first what we are doing in Finnish and then translate it to the student."*

## 5.2 Category: Language

### **Barrier to learn**

Most of the participants pointed out that a lack of Finnish language limited the ELTDP students' learning ability. This was due to the fact that students could neither understand what the healthcare needs of patients were, nor could they communicate directly with the patients.

*Participant 1: "...and there is no patient with command of English so it's a bit of a minus for the student if there is no direct communication..."*

*Participant 2: "...one gets a better picture of what patients feel by talking to them...by listening when a doctor is having a conversation or during doctor's round when you hear it directly than when your preceptor tells you afterwards..."*

*Participant 4: "...lack of a common language limits the student's possibility to learn their interaction skills with patients..."*

Participants expressed a lot of concern when it came to students' language skills. They had the opinion that preceptees language skills hinder their options of clinical placements, learning and performance in the clinical placements.

*Participant 2: "...there are units in the hospital where if you don't speak Finnish they don't take you at all..."*

*Participant 4: "...we take students who can speak Finnish because there is no point for us to educate people who are not going to stay, work and speak Finnish...you prioritize the ones that can speak Finnish because then there is potential that you can actually hire them after they graduate..."*

## Wrong attitude and fear

Participants highlighted that their colleagues had wrong attitude and fear of their language skills. The wrong attitude and fear contributed to the preceptors' colleagues' unwillingness to precept ELTDP nursing students and this became a challenge during the preceptorship process. They mainly feared that their language skills were not perfect enough to precept ELTDP nursing students.

*Participant 1: "...most nurses are already shocked or afraid when they hear they are going to have an ELTDP student. ...the first reaction is a little bit negative..."*

*Participant 2: "...the biggest problem because people think that they have to speak fluent English to be able to tutor these students and we Finnish people are often very shy to speak a different language even if they could...it's the attitude that people think that its more demanding in a way and the language is the main problem."*

*Participant 4: "...that is very annoying for my colleagues to have that kind of behavior... they should be open minded and take the student irrespective if they know Finnish at that point because in future they learn Finnish....they are very shy and they really don't want to say anything because they just don't trust their own ability to speak English... you haven't been with different cultural backgrounds and stuff, there are always this wrong attitudes. The language is important. "*

One participant pointed out that students can be active and quick in learning despite the fact that they are not native Finnish speakers.

*Participant 2: "For my employers it would be better for them to create awareness amongst the nurses that it doesn't necessarily mean they have to speak Finnish for you to take them. ...they can be wonderful students even if they didn't speak the language."*

*Participant 3: "...probably if they could get more integrated with them, then they don't have to see them as foreigners in that sense that they just take them in as students..."*

### 5.3 Category: Preceptorship preparation

#### Education programs

Information to prepare preceptors for their precepting role seemed to be available. The healthcare organizations had appointed a clinical teacher who was responsible for retrieving information useful to participants. The clinical teacher in Finland acts as a coordinator in the preceptorship process, providing support to the preceptors and preceptees. Some wards seemed to have specific time set aside for the different information sharing including information relevant to preceptors.

*Participant 2: "...we have like education days where you have to go on your own...in addition ...the nurse who is responsible of mentoring student...gets material and information that she (shares) at the meetings in the ward so at least we get the current information and stuff like that...but in addition to that we have to sign in for the study days and go to learn more about it..."*

Despite the availability of preceptor orientation and education sessions, the participants found it a challenge to get time allocated for these sessions. Lack of time was due to shortage of personnel at the wards. . The shortage made it hard for their employers to release them from their normal tasks to attend the orientation or sessions. They were instead expected to attend these sessions at their on time.

*Participant 3: "...since I started being a mentor (preceptor) to this student...I didn't have any like preparation... I know they exist-(preceptorship preparation session)-but I've never been to any..."*

*Participant 4: "...Everywhere there is lack of personality, I mean personnel so sometimes maybe the bosses might not be that eager to let people go to different education. I get many emails about different courses I could attend, but it's just a matter of whether I have the time..."*

#### Past experiences as a preceptee

Participants reflected on their experiences of being a student and used it to relate to the students. Some participants said that their past experiences as students helped them cultivate more accommodating precepting characteristics. Ensuring the students feel well taken care of and recognized as part of the team.

*Participant 1: "...you know when I'm tutoring I'm remembering how it felt for me to be a student."*

*Participant 3: "...actually when I think of (past experience) that I feel like I would have to do my best to make this student as comfortable as possible because I wouldn't like to make them feel like they would have to go through what I went through...I would never forget that practice. I think it was a nightmare."*

#### 5.4 Category: Rewards for preceptors

Rewards were of concern to the participants. They had experiences of both positive and negative rewards this backed up by the survey related to, recognizing and rewarding nurse preceptors in critical care (2003:16). The positive rewards were such as appreciation for their role while negative ones were ungrateful students and precepting as an imposed role. Introducing financial incentives as a reward was suggested by the participants.

## Financial incentives

One participant suggested that preceptors should get individual financial rewards for the precepting role. This would motivate and boost their morale in precepting students.

*Participant 4: "...some financial reward to themselves so that they could use it for sought of supporting this people to have the energy to tutor students... people (preceptees) should get financial..."*

## Meet new people

With every preceptorship, the preceptor and preceptee met for the first time. The preceptorship process in that case creates an opportunity for the preceptors to interact with new people or even future colleagues. Preceptors considered this an advantage of preceptorship which enabled them enlarge their social circle while getting exposed to new cultures.

*Participant 2: "...you also get to meet new people. So I have liked it (precepting).  
Participant 4: "...as a tutor (preceptor) I also gained a lot. It's really interesting to meet people from different parts of the world...also the cultural background."*

## Ungrateful students

Participants were familiar with the extra effort they needed to put in precepting students. They expected the students to show some kind of appreciation for that effort. However, this was not always the case. One participant instead reported that students had been mean to their preceptors.

*Participant 4: "...There has also been cases where the students have been very really mean to the mentors (preceptor)."*

Students perceive some units as not challenging. Lack of challenges makes the clinical placements less interesting. Students therefore do not put enough effort into the clinical placements. This in turn creates frustration for the participants as they do not view their effort as being appreciated.

*Participant 2: "...the most difficult thing that has been for the nurses (preceptors)...if your giving your best and the student is not just putting as much you don't see them interested then it is very frustrating."  
Participant 1: "...sometimes the students might not be interested their interest might be in like OR, and they are doing pediatric practice and they are not interested in that area and they don't have motivation."*

## Preceptorship as an imposed role

Participants of our study were employees of healthcare organizations which are also teaching hospitals. As part of the work contract they are required to be precept students during clinical periods.

*Participant 2: "...it's as responsibility actually which is demanded by the health care law that we have to mentor students..."*

*Participant 3: "...but then it's part of the whole responsibility..."*

## Work overload

There was a perception that precepting created an additional duty to the participants' normal workload. The participants did not really view this positively.

*Participant 2: "...you are overloaded because you have to do your own duty and also have to take care of the student."*

*Participant 3: "...at some point you feel like you are overwhelmed or a bit over-worked ..."*

## 5.5 Category: Support for preceptors

This theme deals with the participants' views on what kind of support they find useful. They suggested that the nursing schools, healthcare organizations and colleagues which form the subcategories under this theme, should be more involved in the preceptorship process.

### From nursing schools

The participants felt that more was needed from the nursing schools in effecting the preceptorship process. The schools' support for the students during the clinical placement was one suggestion. They also suggested that schools should take more effort in enriching the students' Finnish language skills.

*Participant 1: "...I think it is also very important for the students to be supported from the school as well."*

*Participant 2: "...I would say to the institute it would be nice at least if the student knew some Finnish or at least learnt some Finnish."*



Participants seemed to value consistent communication with nursing school teachers. Receiving information from them prior to the clinical placements of what is expected of them and the preceptees capabilities was of great significance.

*Participant 3: "...teacher who is in charge can kind of share something...if some of the teacher would know some of this kind of case. It would prepare us beforehand. They are not going to talk about anything just know how you have to behave with this kind of sensitive cases."*

*Participant 4: "...I think the problem is that we didn't have enough information about the students' ability to speak whatever language."*

One preceptor mentioned that it would be nice if the nursing schools could send clear instructions of what is expected of them as preceptors. The schools could also assist the students to come up with clear goals. Having skills preparation courses prior to the clinical placements or sending a curriculum of what the students have covered in theory lessons would be a good thing.

*Participant 2: "...do they have skills preparation courses...it would be nice to ...see the programs they are being taught(the preceptees), know like what are the goals of this student basically like the main goals know what is expected of you...because what we get when they come,...what the school has sent...are so complicated...it would be kind of nice to have a clear picture not to just get the student with some paper thing that you read and read and you are like ok I don't understand this."*

From healthcare organization

The ward managers are responsible of appointing preceptors in their wards. Some participants suggested that encouraging all nurses to precept ELTDP students would be appreciated instead of appointing only English speakers.

*Participant 3: "...our department needs to also encourage not just we who are English speakers but also the other Finnish colleagues who speak English that they can also be motivated to tutor."*

As was discussed under the personal experiences category, the extra role of precepting increases the participants' normal workload. The healthcare organizations, according to the participants, could support them by reducing the normal workload when one is precepting.

*Participant 1: "...I think it is very important that time is allocated from his or her (preceptor) work schedule so that he/she can concentrate on the student (preceptee)...like he does not have to give 100% in the work."*

## From colleagues

The participants' colleagues seemed to assist willingly whenever need arose. They were ready to assist with the students' precepting where participants found themselves in overwhelming situations. This is similar to Atkins and Williams finding (1995:1012). One participant narration shows that they could easily ask colleagues to help.

*Participant 3: "...sometimes if you... have too much to do maybe you'll have to ask you colleagues, could you just take him, let him come with you to...so that I can concentrate on...then that will be some kind of assistance otherwise it's the same responsibility."*

One preceptor reported that they also receive enough support from colleagues with students' evaluation. She also thought that this was a good thing as at times the preceptor is not able to see every aspect of the student.

*Participant 2: "...We get a lot of support...when we are evaluating the student (preceptee) the whole ward always give their general experience with the student because even if you're not the mentor (preceptor)...you see how the student carries themselves around and stuff like that."*

## Ethical Consideration

E-mails were sent to the participants with an attachment of the consent form, see appendix 1. Participation was voluntary, and as indicated in the consent form, the participants had the right to refuse to participate. Each participant was kept anonymous in order to protect their identity. Numbers were used instead to identify the participants. Names mentioned during the interviews by the participants were removed from the written transcripts. Our plan is to destroy the tape-recordings and the transcripts after a certain period of time.

## 6 Discussion

Our qualitative study explored preceptors' experiences in precepting ELTDP nursing students. The results of our study revealed 6 categories: role, language, preceptorship preparation, rewards and support for preceptors. Our study showed that little is known or researched on the preceptors' experiences in precepting ELTDP nursing students in the Finnish healthcare environment. However, preceptors were aware of their important role of precepting nursing students during clinical placements. In addition to teaching, motivating and supporting, the roles of integrating the ELTDP nursing students into the Finnish working culture and translating emerged as new roles for preceptors while precepting ELTDP nursing students. These were perceived to be time consuming and caused confusion to preceptors for using two languages simultaneously. Nevertheless, preceptors were grateful for being able to meet new people and the cultural enrichment brought to them while precepting ELTDP nursing students.

Language occurred to be a barrier to learning which is in accordance with Johnston and Mohide (2009:344). This was mainly due to lack of a common language between the doctor, patient and preceptee. Doctors and patients conversed in Finnish during doctors rounds. The ELTDP preceptees, in such cases had to wait until the rounds ended and their preceptors had time to translate. However, translations depended on how much the preceptors could remember from conversations. For this reason, preceptors recommended that the schools could assist preceptees improve their Finnish language skills.

Support for preceptors during the preceptorship period was crucial for them in accomplishing their roles efficiently. Participants appreciated and acknowledged support from all parties involved in the preceptorship process: nursing schools, healthcare organizations and colleagues, this is in agreements with Rose's work (2008:107). Participants identified support systems from the healthcare organizations to be that of encouraging all prospective preceptors to precept ELTDP students and not only the fluent English speakers. Reduction of workload was also considered a form of support from the healthcare organizations. From the nursing schools, they advocated for more support from teachers through consistent communication and information on students during and prior to the preceptorship. Colleagues seemed to be offering the support needed.

Earlier studies have shown that nurses are more positive towards the preceptorship role when there are associated rewards and support (Kemper 2007:12; Recognizing and rewarding nurse preceptors in critical care 2003:16; Stone et al. 2002:164,165). One participant mentioned financial incentives as motivational rewards and a form of recognition in support for the preceptors' role. The participant thought this form of reward should be introduced in the preceptorship program.

Participants in our study showed interest in proper precepting preparation. According to Altmann (2006:13) preceptors' abilities to understand the best ways to support student learning was through proper preparation. However, from our study it showed that healthcare organization employers were not providing the participants time to attend preceptor education sessions.

### Trustworthiness

According to Polit et al (2008:175) qualitative research uses trustworthiness which encompasses: credibility, dependability, conformability and transferability as criteria in evaluating study's quality. Dependability which refers to the constancy of data over time and condition had to be achieved before credibility was accomplished. However, our small sample size limited the dependability of our study. Nonetheless, the data collected from participants who did not know each other produced consistent findings thus achieving our data saturation. Credibility in our study was maintained by ensuring that the interviews were conducted using open-ended questions and the participants narrated their experiences. Their narrations were recorded and exact words of the recordings were transcribed, certifying that our findings were based on the participants' exact words. Confirmability refers to the researchers' objectivity in the whole process. We did our best to remain objective when collecting and analyzing data. No leading questions were used hence participants narrated their experiences freely. The aspect of transferability refers to the extent of which findings of a research could be transferable to other situation or group. This aspect was achieved in this study by using purposive sampling method to select participants who fitted the exact criteria of our study in order to get relevant data. Nevertheless, we had difficulties in identifying participants and the ones identified had little experiences in precepting ELTDP nursing stu-

dents. Despite this the information is useful in the probing of further studies on this topic.

## 7 Conclusion

Our study had a small sample size which might have limited our findings. Despite of this, our findings could be used for further studies on the experiences of ELTDP preceptors in non-English speaking countries. These findings might be useful in giving an insight on the preceptors' views to healthcare organizations and nursing schools in Helsinki area, where this study was done. Recommendations from our study is for healthcare organizations to encourage all nurses to precept ELTDP nursing students and allocate them time to attend arranged education sessions during their normal working hours, as well as reduce their normal workload during preceptorship period. Nursing schools on the other hand should ensure that their students are well prepared prior to their clinical placements and there is sufficient and consistent communication between teachers and preceptors. Financial incentives as rewards should also be introduced for preceptors.

## Acknowledgement

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## Consent form

Title of Project: Preceptors' Experiences in Precepting ELTDP Nursing Students in Surgical Clinical Placements.

### Purpose and significance of the study

The aim of the study question is to illuminate the preceptors' experiences in precepting ELTDP (English language taught degree program) nursing students in surgical clinical practices. Collecting views and information that can enhance clinical supervision and provide support for ELTDP nursing students and their preceptors.

### Publication

The study being a final year study project, it will be published as a thesis and made available for anyone with access to the Metropolia University of Applied Science library and website. The study and publication will be under the supervision Marianne Pitkälä.

Name of Interviewers: Stellah Ombati and Annesther Wachira

Please tick to confirm

- I confirm that I have read and understand the information above concerning the study.
- I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
- I understand that my participation is voluntary and I am free to withdraw at any time, without giving any reason.
- I understand that I am participating in this study as a private person, not as a representative of any organization.
- I agree to provide information for the study on the terms that the anonymity of the interviewee or the background organization will not be compromised at any stage, that data processing will be confidential.
- I agree to this interview being audio recorded

- I agree to take part in the above study.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Place

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Interviewers

\_\_\_\_\_  
Signature

## Prospective questions

- 1 Could you describe your professional role
  - Years of experience
  - Your duties at the ward
  - How many of those were ELTDP students
  - How many preceptee's you have had
- 2 What do you think is expected of you as an ELTDP students' preceptor?
- 3 What are your experiences of preceptoring ELTDP students?
  - Any concrete examples of pros and cons?
- 4 Are there any orientation programs for the preceptors in your unit? Examples
- 5 For the future of ELTDP students' precepting do you have any suggestions for the institutes that could improve the experience of a preceptor?
- 6 Are there are any common barriers to ELTDP students ability to learn?
- 7 Is there anything else you would like to say or add?