

How to develop mentoring skills in nurse practitioner preceptors

By Linda Aveni Murray, DNP, CRNP-Ped

Simulation can help build confidence and improve communication skills.

NOVICE nurse practitioners (NPs), even those who are experienced RNs, need guidance and support as they transition into their new roles. The formal preceptor model, in which preceptors provide information, instruction, and feedback over a short period of time, is common for onboarding new NPs. Mentoring, which a preceptor program may or may not include, extends the preceptor role with coaching, teaching, advising, and empowering.

Research demonstrates that being mentored during

the first year of practice (as a new nurse or new NP), when transitioning to a new role, or when changing clinical focus can help build confidence, which increases productivity, job satisfaction, and career longevity. Other positive outcomes include increased provider and patient satisfaction and the rewarding effects reported by mentors.

Mentoring requires effective communication skills, patience, kindness, empathy, honesty, trustworthiness, and an ability to guide and motivate mentees with non-judgmental feedback. For preceptors to become effective mentors, they must receive formal training that includes time to practice their mentoring skills.

Simulation is one way to help new mentors learn effective communication skills and increase their perceived self-efficacy. This article reports the results of a simulation program designed to achieve those goals.



Simulation structure

The communication simulation focused on three difficult areas of preceptor communication with novice nurse practitioners (NPs):

- defensiveness
- disrespect
- incivility.

Four 2-hour simulation sessions were held, with a total of 15 participants:

- Within each group of four preceptors, two served as actors (preceptor and preceptee) for the 15- to 20-minute scenario while the other two observed.
- All of the preceptors participated in a 20-minute debriefing.
- The observing preceptors became the actors while the other two observed the same scenario.
- The preceptors participated in a second debriefing.

The plan

Results from a survey, in which NP preceptors completed the Advanced Practice Nurse Mentor Qualities Survey, indicated that they needed more education about mentoring communication. Using Rudolph's Debriefing with Good Judgment Model, I created a communication simulation to develop mentoring skills and enhance critical communication between preceptors and novice NPs. The simulation provided a framework and approach for handling important conversations and provided participants with time to practice. Participants used reflection to make sense of NPs' communication and behavior and determine how their internal thoughts and feelings influ-

enced the current situation. In all, 15 preceptors participated in the simulation experience. (See *Simulation structure*.)

The feedback

In addition to patience and providing support without evaluating and judging, participants noted several skills and techniques as key to mentoring success.

Frame of reference: Understanding the novice NP's thinking as it contributes to his or her behavior can help the preceptor lead the novice down the right path. In essence, the preceptor needs to remove his or her personal frame of reference and find the novice's.

Preparation: Preceptors prepare for crucial conversations by thinking through their own thoughts and perceptions and developing a plan for interacting with the NP. This preparation allows the preceptor to help the NP think through his or her behaviors and the precipitating factors without feeling judged.

Communication techniques: Using "pregnant pauses" allows novice NPs to expand on their perceptions, and open-ended questions help preceptors and NPs clarify ideas and "sense" emotions.

Culture of safety: Creating a culture of safety for disclosing feelings and ideas can aid in successfully changing behavior.

The results

The Advanced Practice Nurse Mentor Qualities Survey was administered before and after the simulation intervention (43 NP preceptors answered the presimulation survey, and 15 of those preceptors who participated in the simulation completed the postsimulation survey); the results supported the need for preceptor communication skills training. Both before and after the simulation, preceptors described their mentoring skills as skillful to very skillful. They rated teaching and collaboration levels as very skillful, which isn't a surprise since both skills are used by NP preceptors every day while caring for patients and families. In contrast, providing constructive feedback, open questioning, and guided supervision (all necessary for successful precepting and mentoring) were described as their lowest level of expertise. NP preceptors don't use these skills as often in their daily practice, which may have contributed to the lower self-assessment. (See *Perceived skill level*.)

Perceived skill level

Forty-three nurse practitioner preceptors completed a survey to rate their perceived mentoring skills. Fifteen preceptors then completed simulation training and rated their mentoring skills again.

Perceived skill level in mentoring skills before and after simulation training

Skill	All preceptors surveyed (n=43)	Postsimulation preceptors (n=15)
	Mean rating (STD)	Mean rating (STD)
Collaboration	4.0 (0.77)	4.2 (0.86)
Teaching	4.0 (0.75)	4.0 (0.65)
Open questioning	3.6 (0.82)	3.5 (0.83)
Constructive feedback	3.6 (0.98)	3.5 (0.74)
Guided supervision	3.5 (0.88)	3.5 (0.92)

Five-point Likert Scale (1 = no skill; 2 = some skill; 3 = skillful; 4 = very skillful; 5 = highly skillful)
STD = standard deviation

Perceived comfort level

Forty-three nurse practitioner preceptors completed a survey to rate their perceived comfort level with difficult situations. Fifteen preceptors then completed simulation training and rated their comfort levels again. The simulation focused on handling difficult communications involving defensiveness, incivility, and disrespect. These are the only areas (in bold) to show a trend in improvement.

Perceived comfort level in handling difficult situations with novice NPs before and after simulation training

Situation	All preceptors (n=43) Mean rating (STD)	Postsimulation preceptors (n=15) Mean rating (STD)
Low performance	3.1 (0.94)	3.0 (1.46)
Lack of teamwork	3.0 (1.11)	2.8 (1.37)
Crying	3.0 (1.09)	2.6 (1.24)
Lack of motivation	3.0 (1.06)	2.8 (1.21)
Lack of professionalism	3.0 (1.21)	2.9 (1.31)
Apathy	2.9 (1.03)	2.4 (1.16)
Defensiveness	2.7 (0.95)	2.9 (0.96)
Incivility	2.7 (1.30)	2.8 (1.42)
Disrespect	2.7 (1.17)	2.8 (1.32)
Anger	2.6 (0.93)	2.5 (0.99)
Arrogance	2.6 (1.12)	2.4 (1.09)
Bullying	2.4 (1.24)	2.4 (1.30)
Rage	2.1 (1.06)	2.1 (0.99)

Five-point Likert scale (1 = no comfort; 2 = some comfort; 3 = comfortable; 4 = very comfortable; 5 = extremely comfortable)
STD = standard deviation

Analyzing the survey results revealed only average levels of comfort among the preceptors in handling difficult communication situations with novice NPs. (See *Perceived comfort level*.) The strongest areas of comfort were in addressing low performance, lack of professionalism, and lack of teamwork—all common areas that preceptors encounter when orienting novice NPs. The communication simulation focused on handling difficult communications involving defensiveness, incivility, and disrespect. These three specific areas of comfort level were the only ones to demonstrate a trend in improvement in the mean rating before and after the simulation. All other areas demonstrated mean ratings after the simulation that were equal to or lower than before the simulation.

The trend in communication improvement, which was measured using the National League for Nursing Student Satisfaction and Self-Confidence Tool, lends

support to the premise that using simulation as an instructional method for learning communication skills increases perceived self-efficacy. The preceptors rated the simulation activity as an effective method in understanding the recommended articles on mentoring, developing skills, and increasing self-confidence.

Building skills, supporting transitions

Transitioning from an expert RN to a novice NP can be stressful. Mentoring can increase NPs' self-efficacy in this new advanced practice role. However, many NP preceptors lack the skills to enhance this process and require training to increase their self-confidence and communication skills. Simulation has demonstrated success in improving self-efficacy in communication skills and preparing NP preceptors as mentors who can ease the novice NP's transition and subsequently increase retention and satisfaction. ★

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