

Virtual Preceptorship: An Alternative Model for Graduate Leadership Practicums

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Background/Significance

Given the growing complexity and demands of the healthcare environment, the development of future nurse leaders in business, management and education specialties remains increasingly important. Ensuring emergent leaders have the tools and opportunities to translate education into the practicum setting is well-documented (Dyess, Sherman, Pratt & Chiang-Hanisko, 2016). Providing meaningful leadership practicum experiences with academic and healthcare professionals is challenging given these demands of frontline leadership roles, distance learning placements, legal agreement barriers and student work-life integration. Student-centered, virtual preceptorships are a possible solution to such challenges.

Barriers to Traditional Model

Typical barriers in negotiating practicum clinical agreements for student placements include:

1. Conflict of State Law
2. Arbitration of Disputes
3. Insurance - Amount and Type of Liability Coverage
4. HIPAA Business Associate Agreements
5. Criminal Background Check Requirements
6. Termination Protection for Students

Approach/Methods

A pilot study was designed with the main goal to assess the feasibility of successfully precepting leadership and management students using a virtual preceptorship model. The Virtual Preceptorship Model consists of a doctoral-prepared Faculty Preceptor, Graduate Leadership Student and masters-prepared Onsite Liaison working as a team to coordinate the practicum while mentoring and guiding students through their educational experience and career progression. This model was developed using the AACN Essentials, AONL Competencies and CCNE guidelines with a student-centered structure. Participants were enrolled in the University of Maryland School of Nursing, Health Services Leadership & Management (HSLM) specialty. The Graduate Leadership Student was required to log 120-practicum hours, participate in weekly discussions with the Faculty Preceptor, collaborate with the Onsite Liaison and complete an organizational project along with the course assignments. These study participants evaluated the model using an online tool with five open-ended questions.

Leadership Practicum Goals

- **Function effectively in advanced practice roles in healthcare settings.**
- **Engage in professional and personal development.**
- **Broaden career mobility and opportunities in nursing.**

Virtual Preceptorship Model



Roles and Responsibilities

Faculty Preceptor: UMSON Faculty Member; Doctoral prepared; Development of relevant Leadership Practicum objectives, Learning experiences and assignments for this graduate student and healthcare organization.

Graduate Leadership Student: Enrolled in business, leadership or education graduate specialty; Meet 120-hour practicum requirement; Participate in weekly discussions with Faculty Preceptor; Collaborate with Onsite Liaison; Complete an organizational project; Final class in curriculum.

Onsite Liaison: Advanced Degree; RN not a requirement; 2-years experience in current management area; Oversee organizational project; Support student collaboratively with Faculty Preceptor through student life-cycle.

Pilot Practicum Results

Four Health Services Leadership & Management students who resided in four distant states participated in this pilot study during the 2019 Spring and Fall semesters. HSLM faculty members and participants evaluated the Virtual Preceptorship Model. Three themes emerged from both evaluations – flexibility, creativity and mutual relationships. The students identified their ability to work within interdisciplinary teams as a main contributor to their success. Students indicated that their one-on-one relationships with the Faculty Preceptors provided invaluable proximity to leadership. From a deliverable perspective, students found the coursework prescriptive with suggestions for a general framework along with collaboration expectations between the Faculty Preceptor, Graduate Leadership Student and Onsite Liaison. The feedback from the HSLM faculty assisted in curriculum adaptation to include: adjusting Faculty Preceptor workload to deliverables, individualizing curricular experiences based on the specialty and establishing an orientation processes for virtual practicum students.

Conclusion

The pilot study was essential to demonstrating the feasibility of a Virtual Preceptorship. The implementation of the pilot established that concerns regarding out-of-state preceptorships can be addressed using a Virtual Model, increasing school capacity to serve non-traditional students and students in an online format. Additionally, feedback from faculty, students and liaisons provided a chance to improve the overall design of the HSLM curriculum.

References

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HSLM specialty partners with Maryland Higher Education Commission (MHEC) and Health Services Cost Review Commission (HSCRC) in an Academic-Service Partnership supporting preparation of nurse leaders.