EVALUATING THE EFFECTS OF PRECEPTORSHIP PROGRAMS ON NURSE JOB SATISFACTION

By

JOHN ROGERS

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To the Faculty of Washington State University:

The members of the committee appointed to examine the ICN research requirements and manuscript of JOHN A. ROGERS find it satisfactory and recommend that it be accepted.

Yvonne Schumann  
Chair

Cindy Corbett

Biene M. Steventon
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EVALUATING THE EFFECTS OF PRECEPTORSHIP PROGRAMS ON NURSE JOB SATISFACTION

By John Rogers
Washington State University
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Abstract

Background

The work environment across the U.S. has been evolving, and nowhere has this been any more apparent than in nursing. Today’s nurses have different expectations of what the work environment should entail. Most nurses today are seeking more personal time, rather than financial compensation. Nurses want to be active at both work and home, willing to relocate and work longer hours in order to have more personal time off. As this trend continues, employers are increasingly offering additional services to help reduce stress and allow for a balance of personal and professional management of time. Nurses view the workplace differently, preferring autonomy over bureaucracy. They are loyal to the profession, rather than the employer, thus becoming more mobile and working as traveling nurses and temporary agencies, rather than staying grounded.

Purpose

The purpose of this project is to explore the following question: are preceptorship programs evidence-based intervention to promote job satisfaction in preceptors and preceptees?
Methods

A comprehensive literary review was conducted. Various techniques were utilized such as: quantitative descriptive questionnaire, correlational descriptive design using quantitative data, quantitative longitudinal study, an educational article, qualitative with open-ended questions, and phenomenological methods to study graduate nurse preceptorship experiences.

Conclusions

Preceptorship programs do make an impact on nurse job satisfaction. By addressing the areas of achievement, recognition, responsibility, work itself, and personal growth, nurses are able to experience job satisfaction. Job satisfaction is essential for retention of nurses.
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CHAPTER 1

Introduction

Statement of Problem

Currently, the nation faces a critical nursing shortage. Job opportunities for registered nurses (RNs) are expected to grow by more than 21% over the next 10 years, and the number of nurses available to fill those jobs is projected to decline (Integrative Nursing Institute, 2001). Statistical research, reports that nurses are increasingly dissatisfied with their profession due to prolonged stress, burnout and the lack of "quality of life" in the workplace (Integrative Nursing Institute, 2001). Further impacting this crisis is the fact that the education, training, retention and ongoing professional development of nurses all require significant financial and energetic investments by the healthcare industry. Throughout the country, the average replacement cost of each nurse now runs between $30,000 and $55,000 (Integrative Nursing Institute, 2001). The cost of orienting a new graduate nurse is estimated to be $42,000 (Roach, Lamoureux, Teehan, 2004).

A National Problem

According to the Bureau of Labor and Statistics, employment for RNs is predicted to grow more rapidly than that of all other U.S. occupations through 2008 (Glennon, 2004). In the face of this accelerated demand for baccalaureate and graduate prepared nurses, the American Association of Colleges of Nursing has reported that bachelor's degree enrollments in nursing schools have experienced their fifth consecutive drop in as many years (Glennon, 2004). It is estimated that by the year 2015, there will be a vacancy for 114,000 jobs for full-time nurses (Glennon, 2004). According to the U.S. Department of Health and Human Services, there will be 635,000 nurses to fill 1.8 million positions. The
National Sample Survey of Registered Nurses reports that there are approximately 2.6 million RNs in the country and roughly 1.5 million of these nurses work full time. By the year 2005, it is projected that there will be a shortfall of approximately 43% RNs. A compounding factor to consider is that the average nurse is older than 45, and the average retirement age for nurses is 49 (Huston, 2003). Within the next five to 10 years, there is expected to be a large population exiting from the nursing profession, in a time where a 43% deficit in the nursing workforce already exists (Huston, 2003). While the nurse shortage problem is evident throughout the country, Washington State has been significantly impacted by this phenomena.

Washington State: A Growing Need for Nurses

An increasing elderly population. The population of Washington State has grown 42% between 1980 and 2000, and is projected to increase another 27% by the year 2020 (Briley & Huston, 2001). The overall population growth in Washington State does not match the ever-increasing population of elderly within the state. The elderly population (over 65) has grown by 59% between 1980 and 2000. Even more significant is that the population over age 65 is projected to grow another 93% by the year 2020 (Briley & Huston, 2001). According to the United States Department of Commerce, Bureau of the Census, the population over age 65 will grow at a rate 5 times that of those under age 65, during the next 25 years. The population over age 85 will grow even faster, making it the fastest growing segment of the population.

Currently 182,000 people in Washington are over the age of 80. This number is estimated to increase to 429,000 by the year 2030 (Briley & Hustson, 2001). Persons over the age of 65 are known to use twice the medical health care resources, as compared to those
under age 65 (Briley & Huston, 2001). One current concern is who is going to be providing health care for these people? Nurses comprise one of the largest groups of health care providers in Washington. Without an availability of nurses at the bedside, direct patient care will be compromised. With the widening gap between the numbers of people requiring health care and the availability of nurses to provide it, the workload demands increase the potential for job dissatisfaction among nurses.

*Vacancy rate.* A recent survey of Washington state hospitals shows the registered nurse vacancy rate for 2001 is 10%. The average registered nurse turnover rate is about 17%. In 2000, there were about 54,800 registered nurses in the state, but only 43,500 (or 79.4%) were employed in nursing. In 2020, the nationwide registered nurse supply will be 2,200,000, while the demand will be 2,500,000, resulting in a shortfall of about 300,000 registered nurses nationwide (Briley & Huston, 2004, p. 24).

To help alleviate this crisis, nurse leaders will need to be both creative and resourceful in the recruitment and retention of new graduate nurses. A nurse preceptorship program may be one way to address the problem. Preceptorship programs are designed as a means to pass knowledge and skills of an expert nurse onto a novice nurse. The preceptorship model provides opportunities for socialization into practice, while bridging gaps between theory and practice (Kersbergen & Hrobsky, 1996). With the current shortage of nurses, schools are increasing enrollment to address personnel demands. An influx of novice nurses enhances the need for preceptorship programs.

The work environment across the U.S. has been evolving, and nowhere has this been any more apparent than in nursing. Today’s nurses have different expectations of what the work environment should entail. Most nurses today are seeking more personal time, rather
than financial compensation. Nurses want to be active at both work and home, they are professionally driven, willing to relocate and work longer hours in order to have more personal time off (Hymowitz, 2000; Lancaster, 1999; Shellenbarger, 1999). As this trend continues, employers are increasingly offering additional services to help reduce stress and allow for a balance of personal and professional management of time. Services such as onsite child care, elder care, banking and yard care are being implemented as incentives to retain the brightest and best of nurses. Nurses view the work place differently, preferring autonomy over bureaucracy. They are loyal to the profession rather than the employer, thus becoming more mobile and working as traveling nurses or through temporary agencies rather than staying at one place of employment. Teamwork is the preferable environmental style desired by nurses, as control from the top down is discouraging for nurses (Hymowitz, 2000; Lancaster, 1999; Shellenbarger, 1999).

Purpose of the Project

The purpose of this project is to explore the following question: is a preceptorship program an evidence-based intervention that promotes job satisfaction in preceptors and preceptees?

Significance of the Project

Preceptorship programs are designed as a means to pass knowledge and skills of an expert nurse onto a novice nurse. The preceptorship model provides opportunities for socialization into practice, all the while bridging gaps between theory and practice (Kersbergen & Hrobsky, 1996).
Undergraduate, as well as graduate nursing students, profit from working and learning from professional nurses who are clinical experts, management experts, and role models. These expert practicing nurses are the behavior models needed by graduating students to make the transition to professional practitioners of the discipline of nursing (Swansburg, 1995, p. 389).

Job satisfaction is a significant factor that needs to be examined to determine the causative factors of declining recruitment and retention (NSW recruitment and Retention Taskforce, 1997). Researchers have been able to show that newly registered graduate nurses experience unstable levels of self-confidence, which are a strong contributing factor to the decision to continue or leave the nursing profession (Madjar, 1997). The “reaction of new graduates to their initial period of employment varies, but commonly includes physical and especially emotional exhaustion, a sense of inadequacy, frustration, loss of ideals and at the extreme, the abandonment of nursing as a career” (Madjar, 1997, p. 4).

Definition of Terms

For purposes of this manuscript definitions supplied by The American Heritage Dictionary of the English Language, Fourth Edition Copyright © 2000 by Houghton Mifflin Company will be used.

Definitions

Preceptorship. Preceptorship is a period of practical experience and training for a student, especially of medicine or nursing that is supervised by an expert or specialist in a particular field.
Preceptor. A preceptor is an expert or specialist, such as a physician, who gives practical experience and training to a student, especially of medicine or nursing.

Preceptee. A preceptee is a person who works for and studies under a preceptor.

Mentorship: a formal relationship between a student and a professional adult to further the student's knowledge, skills, or career.

Mentor. A mentor is a wise and trusted counselor or teacher.

Mentee. A mentee is one who is mentored.

Experience. Experience is the accumulation of knowledge or skill that results from direct participation in events or activities.

Preceptor Program. A preceptor program is an individualized teaching model in which a new or novice nurse is assigned to work with an experienced/expert nurse preceptor. A program is a series of steps to be carried out or goals to be accomplished.

Job Satisfaction. Job satisfaction is in regard to one's feelings or state-of-mind regarding the nature of their work. Job satisfaction can be influenced by a variety of factors, for example, the quality of one's relationship with their supervisor, the quality of the physical environment in which they work, and degree of fulfillment in their work.

For purposes of this paper the terms mentor, preceptor, preceptorship, mentorship, mentee, and preceptee will be used interchangeably because the research on the topic uses the terms interchangeably.
Background

Nursing Shortages

Nursing shortages are a multifaceted, long-term phenomenon of cyclical nature. In this country, the shortages tend to occur every eight to fifteen years for at least the past fifty years. Unfortunately, the current nursing shortage is more catastrophic and severe in scope and impact than any shortage experienced to date. This shortage is so severe that our potential ability to correct the problem is limited (Huston, 2003). From an economic perspective, the current shortage is being driven more by the lack of nurses rather than the demand for nurses. For this reason, it remains a more complex shortage, which has been shown to worsen over the next decade as more nurses retire or leave the profession.

Past solutions

Solutions that have helped alleviate the shortage in the past have included sign-on bonuses, relocation packages, or new premium packages. These solutions will not work to reduce the current shortage, since the process will only redistribute the supply of nurses, not increase it (Nevidjon & Erickson, 2001). In addition to recognizing the current shortage, it is imperative to identify the characteristics of the current work force and to identify factors influencing job retention and recruitment specific to nursing.

Approximately one third of the nursing work force is over 50 years of age, not to mention that the average age of full time nursing faculty is 49 years. A recent study published in the Journal of American Medical Association (JAMA) predicted that by the year 2010, 40% of all nurses will be 50 years old or older (Nevidjon & Erickson, 2001). For this reason, a future challenge is to redesign patient care delivery models so they are conducive to the practice of an older workforce is crucial. Nursing is a physically
challenging and demanding profession. New methods must be developed and addressed to support nurses such as offering flexibility in scheduling, increased time off and sabbaticals (Nevidjon & Erickson, 2001).

Herzberg theorized that in order to create job satisfaction, elements in the work place need to be changed. These include; achievement, recognition, responsibility, work itself, and personal growth. Job satisfaction is achieved by creating satisfaction by fulfilling individuals’ needs for meaning and personal growth. By offering sign-on bonuses and relocation coverage packages, there can only be minimization of dissatisfaction, and no personal growth or meaning.

Changing organizational perspective

Nurse retention and job satisfaction must begin with how an organization recognizes the value of their staff. Unfortunately, most health care organizations view staff as an expense rather than an asset (Nevidjon & Erickson, 2001). In current times of high patient needs and low reimbursement rates, healthcare facilities are finding the need to watch the personnel budget very closely. If healthcare leaders viewed staff as an asset rather than an expense, different decisions about the work environment could be implemented. Healthcare leaders need to learn to develop new skills to show employees that they are valued. Organizations that provide attention to the needs of the employee market, and have an understanding of what employees are seeking from the work environment, have a better chance at retention and recruitment (Nevidjon & Erickson, 2001). In the face of the current nurse shortage, registered nurses can make the difference of success for an organization by creating a positive image and providing a competitive edge or allowing an organization to fail entirely.
Job Satisfaction-The Key?

Job satisfaction is imperative to the retention and recruitment of nurses. New graduate nurses encounter a reality shock as they transition from theory to reality. It is this reality shock of finding the workplace too stressful and unsatisfying that can result in nurses leaving the profession (Brighid, 1998). Current literature presents evidence that suggests nurses' job satisfaction does indeed have a significant impact on professional and work-based factors such as nurse burnout, stress and attrition (Beeken, 1997; Dewe, 1987; Hacket & Bycio, 1996; Harvey & McMurray, 1997; Moore, Lindquist & Katz 1997). The relationship between nursing job satisfaction and staff turnover has been well established, and is a key factor that influences job satisfaction and retention of the nurses' self esteem (Blegen, 1993; Decker, 1997; Healy & McKay, 1999; Matrunola, 1996).

One of the most crucial factors affecting health care today is nurse job satisfaction, which is supported by empirical evidence showing a direct relationship between job satisfaction, staff turnover and absenteeism (Parsons, 1998). The evidence reveals that as a nurses' job satisfaction decreases, staff retention is impacted and consequently low, as well as staff turnover and absenteeism increase. (Parsons, 1998). Another compounding factor to consider is that being short-staffed may further lower job satisfaction, which in turn increases the difficulties of retaining staff.

Current Solutions

As there is no simple solution to the nursing shortage, state nursing leaders are being required to understand factors that contribute to the shortage, and to create programs to increase the supply of nurses in demand. Area Health Education Centers (AHEC) in North Carolina have been helping community hospitals implement mentorship programs. Such
programs consist of pairing new graduate nurses with experienced nurse leaders for a period of training. Mentoring programs have been shown to increase job satisfaction for mentors and first year nurses, as well as reduce turnover rates for first-year nurses (AHEC, 2003).

Preceptorship programs. The transition from student nurse to registered nurse can be frustrating. The preceptorship model is based on the concept that there will be a consistent one-on-one relationship between the preceptor and preceptee, which will provide the opportunity for socialization into practice and bridge the gap between theory and practice (Kersbergen & Hrobsky, 1996). The preceptorship model can be applied to new nurses entering into practice, as well as nurses who are entering new, unfamiliar areas of practice. While considered essential for senior level undergraduate students and graduate students in advanced practice, preceptorship programs are practical for all levels (Kersbergen & Hrobsky, 1996).

Perceived differences exist between the professional expectations of an experienced preceptor and a new graduate nurse. The perceived differences can lead to ineffective preceptorship programs, when new nurses and experienced nurses encounter conflicts. Preceptorship programs can enable graduate nurses to express readiness to assume the role of a proficient nurse and create job satisfaction. Preceptors have a challenging role to serve as professional role models for new nurses. There can be disadvantages to precepting due to the great deal of time placed on preceptors. Preceptors are not always willing participants, this may lead to some reluctance when it comes to providing the best learning opportunity for the preceptees. It is important for preceptors to be aware of their personal biases in order to not impose them on the preceptee (Swansburg, 1995). Imposing one’s biases may lead to
mistrust between the preceptor and preceptee. Preceptors need to be willing to accept that they may learn a great deal from the preceptees they are teaching (Swansburg, 1995).

While differences exist between preceptors and preceptees, the relationship should allow growth, development and job satisfaction. In one study graduates quickly realized the many differences between work and school, and were surrounded by feelings of stress, as they assumed the new role of registered nurse. For some, coping with death and dying was an emotionally difficult experience for which they felt unprepared. Finding a pattern of practice, brought graduates confidence and feelings of accomplishment, and self-reflection emerged as an important and integral part of the transition process. Despite the challenges and stress of orientation, graduates found great meaning in their work, and most expressed readiness to be on their own by the end of 12 weeks (Delaney, 2003, p. 437).

One of the most significant implications for preceptorship programs, is the ability to aid in successful transition from the academic role of student nurse, to the functional role of new graduate nurse. Successful transition enhances job satisfaction for new graduate nurses, reduces staff turnover, and prepares new graduate nurses to meet patient needs after completion of the preceptorship program.

Theoretical Framework

Preceptorship programs are geared towards moving novice nurses to more experienced nurses, while helping to improve employee and patient satisfaction, improve the quality of care, as well as overall productivity (Swansburg, 1995). Preceptorship programs also provide opportunity for the preceptor to be recognized as an expert caregiver, thus promoting a sense of accomplishment and satisfaction (Swansburg, 1995). A theory that
explains the relationship of motivational factors to job satisfaction is the theory developed in the late 1950s by Frederick Herzberg.

The Herzberg Dual Factor Job Satisfaction Theory

Herzberg (1959) sought out factors that led to satisfied or dissatisfied employees. His research process consisted of essentially two sets of questions:

1. Think of a time when you felt especially good about your job. Why did you feel this way?
2. Think of a time when you felt especially bad about your job. Why did you feel this way? (Syptak et al., 1999).

Motivation and hygiene. From these interview questions, Herzberg concluded that the two aspects of job satisfaction were motivation and hygiene. Hygiene topics are all issues related to the employee’s environment and include company policies, supervision, salary, interpersonal relations and working conditions. According to Herzberg, hygiene issues have the capability of minimizing dissatisfaction, but do not have the ability to motivate employees. Motivators work to create satisfaction by fulfilling individuals’ needs for meaning, personal and psychological growth, as well as development on the job. They include issues such as achievement, recognition, the work itself, responsibility and advancement. Once hygiene areas are addressed, the motivators will promote job satisfaction and encourage production (Spytak et al., 1999).

Herzberg’s theory of motivation suggests that meeting the needs of employees serves two purposes. Not only was individual personal growth ensured, but the organization also benefited from contented employees (on both motivator and hygiene levels) who were satisfied with their jobs and willing to continue working with the institution. Hygienes,
when applied effectively, can help to prevent dissatisfaction on the job. Unfortunately, if hygiene issues are poorly applied, the outcomes can be catastrophic resulting in negative feelings about the job. In order to motivate people and increase job satisfaction, one must be concerned with the job itself and not just the surroundings. Focusing attention on the individuals in the jobs, not the surroundings, facilitates motivation and job satisfaction. In order to stimulate growth and development, opportunities for achievement, recognition, responsibility and advancement must be attained.

There are many factors that contribute to job satisfaction. The factors influencing one’s feelings of what increases or decreases job satisfaction are as varied as, each individual’s perceptions. Herzberg’s motivation theory describes factors that are common to what constitutes areas of satisfaction, as well as areas of dissatisfaction.

For this reason Herzberg’s theory was chosen to be appropriate for the descriptive nature of this project. Motivation theory is able to evaluate a varying group of individuals that work within different employment situations. Herzberg’s theory is able to take different aspects of the job setting and classify it into a continuum, which has the ability to produce satisfaction or dissatisfaction. The conceptual diagram (figure 1) helps to show the relationships between motivators and hygiene factors and how they relate to job satisfaction and dissatisfaction.

By utilizing Herzberg’s motivation theory, the needs of novice and expert nurses can be met. Nurse job satisfaction affects many different aspects such as patient care, patient satisfaction, and overall productivity. Preceptorship programs may help fulfill both motivation and hygiene issues. However the question remains, are preceptorship programs evidence-based interventions that promote job satisfaction in preceptees?
Review of Literature

A comprehensive search of the Cumulative Index to Nursing and Allied Health Literature [CINAHL] provided very few evidenced-based research articles that directly addressed the relationship of preceptorship programs to nursing job satisfaction. While the information relating preceptorship programs and job satisfaction is scarce, several studies support the use of quality preceptor programs within the context of motivational theory.

*Preceptorship Programs as Satisfiers*

Finger and Pape (2002) evaluated effective characteristics of preceptors, as well as attitudes towards preceptors. The study was conducted using invitational theory as an educational framework in which to examine helping/learning relationships between preceptors and preceptees. Invitational theory is a collection of assumptions that seek to explain phenomena and provide a means of intentionally summoning people to realize their relatively boundless potential in all areas of worthwhile human endeavor.

Finger & Pape’s study was specific to perioperative nursing and has limited generalizability to other areas of nursing care. The results of the 57 useable surveys concluded that on the personally inviting commitment subscale, preceptees felt that the preceptors occasionally shared work experiences with them, and that the preceptors were sensitive to their needs, and encouraging. The researchers believed that preceptors made an effort to learn the names of the preceptees, showed respect and acted friendly towards them. The results also showed that preceptors chose appropriate activities for them, answered questions clearly, shared up-to-date knowledge, and presented understandable objectives to
preceptees. Preceptees also believed that the preceptors were accountable, used work time efficiently, and expected successful performance of them.

Study limitations included a small convenience sample (N=57) from a single setting, and use of a modified instrument that had not been previously validated in the perioperative setting (Finger & Pape, 2002). Of the 113 surveys mailed, only 58 (42%) were returned and one was discarded due to missing data.

By utilizing Herzberg’s theory to interpret the findings of this study, several hygiene issues (dissatisfiers) are important to the preceptorship experience: supervision, interpersonal relations and working conditions. The preceptors made an effort to know the preceptees, treat them with respect, and were knowledgeable and up-to-date in their practice. By addressing the hygiene issues first, Herzberg felt the motivators created satisfaction among employees. The motivators (satisfiers) led to satisfaction in the work itself, such as achievements by the preceptees, recognition of the preceptees by the preceptors, as well as the responsibilities and future advancement of the preceptees. Preceptors helped preceptees set and achieve goals, then recognized them for their achievements. Such motivating factors helped to enhance job satisfaction.

Barrett and Myrick (1998) studied relationships between preceptor and preceptee clinical performance and job satisfaction. Questionnaires were mailed out to 79 preceptors and 100 preceptees, with a 49.4% response rate for preceptors and 33% for preceptees. The study utilized three research questions: 1. What is the overall job satisfaction for preceptors and preceptees? 2. What is the preceptor/preceptee’s perception of preceptees clinical performance? and 3. Is there a relationship between preceptor/preceptee job satisfaction and preceptees’ clinical performance? The results indicated that preceptee job satisfaction
impacts preceptee clinical performance. There is an important correlation that exists between preceptee job satisfaction and clinical performance, as well as between teaching and collaboration, planning and evaluation and interpersonal relationships and communications. The findings support that preceptee job satisfaction does, in fact, impact upon preceptee clinical performance. Significant statistical differences were found between the preceptors and preceptees on two of the five variables (pay and supervision) described by the Job Description Index. The three remaining areas that did not meet statistical significance are job promotion, co-workers, and the job-in-general.

In correlating the pay and supervision scores to the standardized scores on the Job Description Index, the remaining preceptee scores when compared with the preceptor scores were found to indicate that preceptees scores indicated that working at the present job scored higher on satisfaction than the scores of the preceptors; lower in pay; higher in opportunity for promotion; similar in co-workers; higher in satisfaction related to their job in general, which attained statistical significance \( P<0.05 \) (Barrett & Myrick, p. 368 1998).

Limitations of the study included: a) a poor response rate limited to graduates of three baccalaureate schools of nursing in Atlantic, Canada, b) the Job Descriptive Index used to measure overall job satisfaction of nurses was used to evaluate the preceptees and was not designed for them and not modified for this particular study, and c) only the most or least satisfied may have returned the completed questionnaire.

By utilizing Hertzberg’s theory to interpret the findings of this study, the hygiene issues (dissatisfiers) of supervision and salary were identified. Preceptors promoted good interpersonal relationships, which helped to create an environment, where employee
satisfaction and motivation are possible. Dissatisfaction by the preceptors may be attributed to actual and perceived lack of opportunities for advancement, which is a major contributor to nurse job dissatisfaction.

Green and Puetzer (2002) studied the use of staff preceptors within a structured orientation program as a means to enhance diversity in skill, knowledge and development. This longitudinal study utilized the nursing process of planning, implementation, evaluation, and feedback as a template for the experience. The study protocol included clinical tracking forms, planning calendars, and feedback mechanisms to ensure the success in monitoring the program. For preceptorship programs to be successful, administrative support needs to be in place for relationship building. Support in the form of allowing for extra time commitment, variation in learning curves, and development of educational tasks need to be balanced with the resources available to achieve the goal of staff retention. Financial incentives, staffing and scheduling flexibility all need to be considered to help promote job satisfaction.

The results revealed a decrease in the number of novice staff terminations between preceptored and non-preceptored nurses. Limitations of this study consist of the lack of theoretical framework in which to guide the study. There is no mention of a specific number of participants followed, where the study took place, and there is no explanation of how the results were obtained. The study reported that only 5 nurses who terminated, had less than 18 months of experience from the inception of the program. Prior to the development of the formal preceptorship program 21 nurses had terminated their employment within 18 months of hire, with the data not adjusted for voluntary versus involuntary terminations. There is no clear delineation of whether this information is before or after the use of a preceptorship
program, or if is it comparing precepted versus non-precepted nurses. There is no mention of pre orientation program drop out rate, and what the change in drop out is with the preceptorship program.

Hygiene issues discussed in the study included company and administrative policies, supervision, salary, interpersonal relations, and working conditions (Green & Puetzer, 2002). The study reported that to achieve successful preceptorship programs, administrative support, and monetary recognition for preceptors needed to be in place. Motivating issues were addressed that dealt with recognition, and responsibilities. Findings concluded that formal recognition of preceptorship programs should be a financial and professional goal, one that meets both hygiene and motivator issues that will assist with nurse job satisfaction.

Olsen et al., (2001) studied the transition from nursing student to a beginning level staff nurse. The study included 9 preceptored and 19 nonpreceptored students. The goals of this longitudinal study were to decrease orientation time, staff turnover, and lower recruitment costs. The study set out to discover, if length of orientation time and registered nurse turnover costs for the institution would be reduced by early socialization, increased competence and perceptions of familiarity, and confidence among novice nurses in their first professional nursing position. It was reported that graduates who had one-to-one preceptor experiences were more likely to find their jobs rewarding, because they experienced self confidence and competence in the nursing role. It was theorized that technical and cognitive skills are complementary and that during the preceptorship experience, the opportunity was provided to develop a critical thinking framework for making patient care decisions.

The results of the study concluded that preceptored nurses perceived high expectations and felt more confident to take on higher levels of responsibilities and
encountered satisfying opportunities. There were minimal changes noted in critical thinking between preceptored and non-preceptored nurses. Preceptees developed competencies more quickly than non-preceptored new graduates, and demonstrated increased job satisfaction and retention. The retention rate was 50% two years after the project. Study limitations include a small sample size (9 preceptored and 19 non-preceptored new nurses) with varying educational and clinical backgrounds among preceptors and a lack of standardized orientation for the preceptors. Another limitation of the study was lack of a reliable measurement instrument to assess productivity levels of preceptored and non-preceptored new graduates at baseline and sustained levels of work as the work experiences differed among the three hospitals.

Using Herzberg’s motivation theory, hygiene issues involved preceptors having high expectations of the preceptees. Despite high expectations, preceptors were able to create a feeling of teamwork, which may have enabled the motivators such as achievement and responsibility to lead to an increase in job satisfaction.

Roche, Lamoureux, and Teehan (2004) studied ways to attract and recruit new nurse graduates, ensure that a continual pool of new nurses were available to replace the rapidly aging workforce, and create a system and a culture that recognizes and supports the development of professional nursing practice to retain the most expert nurses. The goal of the study was to create a work environment that increased job satisfaction, retention, and performance. The study utilized an empowerment model which consists of factors that impact work empowerment such as access to opportunities, information, support, resources and relationships. Using this model, the relationships between work empowerment and job satisfaction, retention, and work performance were explored.
The study consisted of 67 new graduates and 27 experienced nurses. Results of this study showed that newly hired nurses reported feeling very supported by their preceptors, which in turn supported the preceptorship program. The researchers found that the single most important element in new nurse satisfaction with their orientation was their relationship with their preceptors. At six months, the preceptees rating of support from the preceptor was 3.8 on a scale of 4 = always, 3 = frequently, 2 = often, 1 = seldom.

Hygiene factors studied included support from preceptor, peers, other staff nurses, development staff and faculty, unit educator, clinical nurse specialist and manager. Comparing the precepted versus not precepted groups, the precepted group demonstrated an increase in job satisfaction due to support from preceptors. Study findings suggest that preceptorships can enhance hygiene factors which may lead to improvement in motivating factors such as perceptions of higher achievement and responsibility with greater job satisfaction.

Delaney (2003) used phenomenological methods to study graduate nurses (N=10) preceptorship experiences. The results of the study showed the emergence of the following 10 themes: 1. mixed emotions, 2. preceptor variability, 3. welcome to the real world, 4. stressed and overwhelmed, 5. learning the system and culture shock, 6. not ready for dying and death, 7. dancing to their own rhythm, 8. stepping back to see the view, 9. the power of nursing, 10. ready to fly solo. Preceptors had a significant effect on both the transition experience and the outcome.

Graduates working with preceptors who displayed professional qualities, such as seasoned expertise, critical judgment, and clinical expertise, combined with a caring and supportive attitude helped to facilitate healthy transitions from student to nurse. Conversely,
when preceptors did not demonstrate these characteristics, preceptee’s were less positive and their progress was delayed. Even if preceptors were not described as ideal, a certain level of comfort was achieved through consistent interactions that allowed progression. Preceptors could benefit from ongoing continual education and training programs to help them address the needs of graduates during role transition. Stress was the most common experience that the preceptees encountered. As organizational and prioritization skills developed, the preceptees began to adjust and adapt their own styles to feel connected to the unit. Despite the stress, preceptees found great value and meaning in their work. By the end of 12 weeks, most preceptees felt ready to be independent. Limitations of the study included a small sample size (N=10) of female graduate students ranging from age 22 to 40. Eight nurses held associate degrees and two had baccalaureate degrees. The small sample size does not accurately represent the whole population of nurses.

This study (Delaney, 2003) was able to demonstrate that when hygiene factors such as company administrative policies, supervision, interpersonal relations, and working conditions were not addressed, there was a negative impact on preceptee job satisfaction by a delay in progress of the preceptee. As preceptees increased in their organization and prioritization skills, their confidence also increased, and they began feeling a connection to the unit and institution. When addressing both hygiene and motivating factors of Herzberg’s theory, preceptees were able to achieve greater job satisfaction.

Employee job satisfaction is a main concern for nurses nationwide. Unfortunately few organizations make job satisfaction their top priority. Satisfied employees tend to have increased productivity and demonstrate more creativity and commitment to their employers (Syptak et al., 1999). It is important to realize that nurses consider hygiene factors of great
importance in comparison to all other job factors (Syptak et al., 1999). This is information that nurse administrators need to take into account when looking for ways to recruit and retain experienced and qualified nurses, as well as new novice nurses.

It is important for administrators to look at hygiene factors and determine, if changes need to be made to company policies such as staffing ratios and patient acuities, as well as personnel issues such as on call time, and low census standby time. Policy updates may help to solve these frequent dissatisfiers among nurses. Available research demonstrates that addressing interpersonal relations is a key factor in nurse job satisfaction. Allowing nurses to develop a sense of camaraderie and teamwork is essential to any organization and greatly helps to increase job satisfaction (Syptak et al, 1999).

Once these hygiene issues are met, the motivators create satisfaction among employees. These motivators (satisfiers) include: work itself, achievement, recognition, responsibility, and advancement. Herzberg (1993) reported that motivators have the most influence and produce the most growth within the individual, but in order to provide an environment in which employee satisfaction and motivation are even possible hygiene, issues such as company and administrative policies, supervision, salary, interpersonal relations and working conditions must be dealt with first.
Summary

The literature reveals limited evidence that shows direct relationship between preceptorship programs and job satisfaction. Many variables need to be considered, and further studies conducted to discover the significance of preceptorship programs on job satisfaction. The limited available literature suggests that the use of preceptorship programs does increase job satisfaction, which generally increases nurse retention. The increasing age of the population and the ever-growing nursing shortage create an urgent need to improve mechanisms that promote job satisfaction and retention. The science related to job satisfaction and retention is in its infancy and further research is critical.

Future suggestions for areas of study may include evaluating preceptorship programs in hospital settings specific to different areas such as, the medical surgical unit, intensive care unit, public health nurse setting, as well as educational settings. Further research is needed in the area of nursing that has the highest burnout rate, which area of nursing has the highest job satisfaction rate, and see if the effects of a preceptorship program has any direct effects on nurse retention. With the ever-increasing growth of the population, especially elderly in Washington State, the need to recruit and retain experienced nurses is paramount. In order to train novice nurses and guide them to experienced nurses, quality preceptorship programs are necessary.
Table 1

<table>
<thead>
<tr>
<th>Source</th>
<th>Problem/ Purpose</th>
<th>Method/ Research Design</th>
<th>Sample Methods</th>
<th>Measurements</th>
<th>Reliability Validity</th>
<th>Results</th>
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<tbody>
<tr>
<td>AORN Journal</td>
<td>To identify whether the invitational operating room teaching survey could be used as a reliable tool in the operating room, determining the attitudes of preceptees toward preceptors</td>
<td>Quantitative descriptive questionnaire</td>
<td>Convenience sample of 113 nurses drawn from 7 midsized hospitals.</td>
<td>57 usable surveys were analyzed using the Statistical Package for the Social Sciences (SPSS)</td>
<td>Cronbach’s alpha reliability analysis revealed reliability of the tool at 0.95.</td>
<td>An effective orientation program combines inviting teaching behaviors with proficient clinical instruction.</td>
<td>This study supports the usefulness in providing feedback to preceptors about their teaching practices and behaviors. This will assist in identifying the teaching practices that assist in nurses job satisfaction</td>
</tr>
</tbody>
</table>
| **Journal of Advanced Nursing**  
| Barrett, Myrick (1998) | **This study was designed to examine the relationship between preceptor/preceptee job satisfaction and preceptee clinical performance** | **Correlational descriptive design using quantitative data** | **Convenience sample of 35 staff nurses and 33 preceptees from 3 university schools of Nursing in Atlantic Canada** | **A Job Description Index questionnaire was used to measure overall job satisfaction** | **Cronbach’s alpha reliability in the areas of pay and supervision revealed a reliability of 0.95.** | **Findings indicate that preceptors and preceptees differ regarding two components of job satisfaction, namely pay and supervision.** | **Preceptor job satisfaction does not impact on preceptee clinical performance, while preceptee job satisfaction does affect their performance.** |

| **Journal of Nursing Care Quality**  
| Greene, Puetzer (2002) | **The use of staff preceptors within a structured orientation program as a means to enhance diversity in skill, knowledge and development** | **Longitudinal Study** | **New nurses at the implementation of a formal Nursing Mentorship Program** | **The use of clinical tracking forms, planning calendars, and feedback mechanisms** | **An excepted form of measuring utilizing the nursing process as a template for the mentorship experience** | **Data revealed a significant decrease in the number of novice staff terminations** | **Mentoring creates a supportive environment where nurses want to come to work** |
| Journal of Nursing Administration Olson, Nelson, Stuart, Young, Kleinsasser, Schroedermeier, Newstrom (2001) | The use of a residency program for senior baccalaureate nursing students to ease their transition into the role of beginning level staff nurses in an acute care setting | Quantitative longitudinal study lasting 900 hours | 9 preceptored and 19 nonpreceptored students placed in 3 different healthcare facilities | The use of the California Critical Thinking Disposition Inventory and the California Critical Thinking Skills Test | Cronbach’s Alpha reliability revealed a coefficient of 0.92 | Participants reflected on the high expectations of them as well as satisfying opportunitie s that they experienced | Mentoring allowed a level of preparation, competence, and confidence that allowed for ease of role transition and job satisfaction |
| Journal of Nursing Administration Roache, Lamoureux, Teehan (2004) | Using an empowerment model to attract, and recruit new nurse graduates as well as retain the most expert nurses | Qualitative with open-ended questions | 67 new graduate and 27 experienced nurses were hired, oriented and socialized into their new position | Support was measured on a 4 point Likert scale | Cronbach’s alpha reliability revealed a coefficient of 0.95 | The single most important element in the new nurses’ satisfaction with their orientation was their relationship with their preceptor | The newly hired nurses and preceptors will be assessed at the completion of years 1 and 2 of this program |
| **Journal of Nursing Education** (2003) | To investigate graduate nurses’ transition experiences during orientation | Phenomenological methods to study graduate nurses preceptorship experiences | 10 female graduate nurse students for the hospital orientation program based on a caring framework | Analysis of the participants’ transcribed responses using Colaizzi’s (1978) method | Well established standard | 10 themes emerged from the data. The final step was validation of the themes and exhaustive description by 4 of the participants | The findings of this study will assist graduates to better understand the transition process, thus decreasing their anxiety related to the most stressful time in nurses’ careers |

...
Figure 1

Motivators
- Recognition
- Responsibility
- Work Itself
- Personal Growth
- Interpersonal Relationships
- Supervisors
- Company Policies
- Pay and Security
- Working Conditions
- Achievement

Hygiene Factors

Job Satisfaction
References


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