

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**Safeguarding the Practices of Nursing:  
The Lived Experience of being-as Preceptor to Undergraduate  
Student Nurses in Acute Care Settings**

**A thesis presented in fulfilment of the requirements for the degree of  
Doctor of Philosophy  
in  
Nursing**

**at Massey University, Albany, New Zealand**

**Louise G. Rummel**

**2001**

## Abstract

An Heideggerian Hermeneutic approach has been adopted to explore the experience of being-as preceptor to undergraduate student nurses in the acute care setting. This thesis addresses the question: What is the experience of being a preceptor to undergraduate student nurses in an acute care setting? Fifteen preceptor-participants were interviewed twice, with each interview being approximately one hour. Heideggerian Hermeneutical Analysis was used to reveal the experience of preceptors as they precept undergraduate student nurses.

The thesis begins by placing nursing education in an historical, socio-political and professional context that provides the background to current New Zealand nursing practice. Student nurses undergoing their nursing education learn the meaning of being a nurse in many different contexts. This research is situated in the acute care context where both preceptors and student nurses engage in the practice of nursing. The methodological background shapes the way the research is presented to explicate the meaning of being-as preceptor. The four data chapters reveal the preceptors' experience and open with dialogue showing how nurses become preceptors. This is followed by exploration of how preceptors assessed where the student was at, moves to preceptors promoting learning and closes with discussion of how preceptors keep students and patients safe. Many practices were uncovered during the revelations of the preceptors as they disclosed to the researcher narratives of their everyday practice world.

Common themes that emerge from the data include: *Becoming attuned – the call*, *The Emerging Identity of 'being-as' Preceptor: Keeping the student in mind*, *Assessing where the student is at: The Preceptor and Preceptee Working and Growing Together*, and *The Preceptor as Builder of Nursing Practice: Teaching Reality Nursing*. A number of common themes support the relational themes which are of greater complexity. A constitutive pattern, the highest form of interpretation that emerges from the data, was *Safeguarding the Practices of Nursing*. This constitutive pattern lies within every text either directly or is inferred from each participant's dialogue. It contains the central meaning of the thesis. It is constituted from common and relational themes as they present themselves in the analytical process.

In this thesis the experience of being-as preceptor is unveiled through the participants' own words as the researcher takes the reader back to the 'things themselves' as is espoused by hermeneutic phenomenology.

## ACKNOWLEDGEMENTS

*...Not to have arrived, but to have made the journey...*

To have completed this thesis feels like I have run a marathon. I have never run a marathon but I feel some empathy for those who do. This doctoral thesis has been a challenging, frustrating, enjoyable, woeful and at times despairing journey for me. Not only for me but also, for those whom I hold most dear. However, I have not travelled alone. I have had many travelling companions who have sustained me throughout the journey.

To my husband, Stuart, who has been my constant companion, a man who “likes to get on with the job and get finished”, has found this lengthy journey for a PhD a daunting achievement. He has ‘proof read’ the chapters as they have emerged. He has visited the library and retrieved references for me. He has read Heidegger with me from time to time. He must share this PhD as much as I. Our children, Simonne, Diana and partner Rick, Matthew his wife Di, all have shared this journey with me. They too will be pleased to have their mother back at weekends and holidays. Also my thanks goes out to my wider family of three remaining sisters, Diane, Jan, and Judy and my brother Peter, their spouses and their children. All have encouraged me to stretch forward to finish the work upholding my flagging energies at times. To you all, my love and heartfelt thanks. You have been with me each step along this pathway.

My sincere gratitude goes to my fifteen preceptor participants whom I hold in the highest of esteem. Without your participation, there would be no doctoral thesis. Your willingness to share your experience of being a preceptor to undergraduate student nurses in the richness, fullness and immediacy of your practice made this work possible. I trust that I have captured your world as faithfully as you have shared it. Further, I hope that I have made it visible to the eyes of others that can make a difference for you in your day to day practice as-preceptor for that was my intention, to make your world a better place for ‘being’-as a preceptor.

My whole hearted thanks to my mentor, scholar and friend, Dr. Margaret Idour who spent long hours with me at different points of the journey. Her deep knowledge of Heideggerian Hermeneutics, her vast understanding of nursing education, nursing practice and the health care system is inspirational and has helped me greatly with methodological and contextual aspects of the thesis.

My sincere gratitude is extended also to my supervisors. The long journey for this thesis to emerge has meant that there have been changes along the way. My deepest thanks go to Dr. Julie Boddy who has travelled the complete journey with me. An astute scholar and critic, I have valued her keen remarks and guidance throughout. Also my deepest gratitude is extended to Dr. Nancy Diekelmann who first introduced me to Heideggerian Hermeneutic studies and has been an inspiring teacher through a number of Heideggerian Institutes and Workshops both in America and in New Zealand. As an early co-supervisor, she travelled a considerable distance with me until her own commitments made it impossible to continue. Nevertheless, since that time she has been only an email away and has provided ongoing support throughout the PhD work. I especially thank her for her early critique of the literature during visits to the University of Wisconsin, Madison, United States of America, and during my attendance at the 1999 Heideggerian Institute. Also my warm thanks to her husband Dr. John Diekelmann. An astute and informed scholar, he has always been able to answer the difficult questions that arise out of reading Heideggerian texts.

My supervisor, Dr. Rita Monsen, a wonderful researcher and practitioner, who shares a deep love for nursing education and practice I proffer my heartfelt thanks for her critique of parts of the work in progress and the total work at its conclusion.

To my newest co-supervisor, Dr. Liz. Smythe, a dear friend and esteemed scholar of Heidegger and his writings, I thank you most sincerely for your insightful guidance, critique, support and inspiration.

My deepest thanks also go to my PhD companions, Liz, Elizabeth, Deb. S, Deb. P, Dianne, Karen and latterly, Annette. Your support, interest and discussions have been energizing, illuminating and uplifting.

My thanks also go to my colleagues at Manukau Institute of Technology. Your interest, support and collegiality have been a tower of strength to me during difficult times. Always encouraging and committed to seeing me through.

Special thanks is given to my wonderful librarian, Sue Roylance. Sue has provided me with ongoing reference material, secured interloans from difficult places, photocopied articles for me when I was incapacitated with illness, checked referencing along the way and has been a remarkable support throughout.

My thanks also must go to my close and dear friends Brenda, Jean M., Jean L., and Phyl., who have walked this path with me eager to see me attain what I had set out to do. To my dear friend, and scholar, Dr. Antoinette McCallin, thank you for your critique, encouragement, and your guidance at the near conclusive draft of this work. A close friend throughout our Masterate studies, I have missed your close walk with me as I made this marathon journey.

To you all, my heartfelt thanks. You all must take credit for the achievement. It has been a long and arduous journey. Without your companionship, and your belief in me, I may never have reached my destination.

## TABLE OF CONTENTS

Abstract / ii

Acknowledgements / iii

Table of Contents / vi

### **CHAPTER ONE: Introduction / 1**

Background to the Study / 3

Aim of the Research / 5

Purpose of the Research / 5

Significance of the Study / 6

The Research Approach / 6

Heideggerian Hermeneutical Analysis: An Introduction / 7

Pre Understandings and Horizon / 9

Choice of Phenomenology and Hermeneutics / 9

Beliefs about Nurses and Nursing Education / 10

Biases / 10

Assumptions about being a Preceptor to Undergraduate Student Nurses / 11

Theories / 12

The Phenomenon of Concern: The Nature of Preceptorship / 12

Background to the Phenomenon of Concern / 15

Summary / 20

Organisation of the Thesis / 20

### **CHAPTER TWO: The Situated Context of Preceptorship / 23**

Introduction / 23

New Zealand – A Bicultural Society / 24

The Restructured Health Context / 26

The Nursing Work Context / 28

The Technological Context / 29

The Legislative Context / 30

The Nursing Education Context / 31

The Contemporary Nursing Education Context / 33

The Statutory Context - The Nursing Council of New Zealand / 35

The Clinical Training Context: Changing Structures, Changing Roles / 37

The Student Context / 39

Summary / 40

### **CHAPTER THREE: Review of the Literature – An Hermeneutic Approach / 41**

Introduction / 41
The Beginning / 41
Being New / 42
Preceptorship as Familiarisation and Socialisation / 43
Understanding Preceptorship / 45
Being an “Ideal” Preceptor / 46
Preparing to be a Preceptor / 48
Being an Effective Preceptor / 49
The In-Betweenness of Clinical Instructing and Precepting / 50
Theoretical Approaches to Precepting and Learning / 51
Recognising how Learning Styles Influence Practice / 52
Guiding Students Through Practice / 54
Organisational Support for Preceptors / 56
Rewarding the Preceptor / 57
The Preceptor’s Role in Developing Clinical Competence for the Student / 58
The Complexity of Precepting / 59
Evaluating a Preceptor Programme / 59
Creating New Pedagogies for Nursing / 61
Thinking Through Practice / 62
Summary / 64

### **CHAPTER FOUR: The Research Methodology / 66**

Introduction / 66
Heideggerian Phenomenology / 66
Space / 68
World / 69
Language / 69
Heideggerian Hermeneutics / 72
Interpretation / 76
Evaluating and Interpretation Account / 82
Coherence / 82
Consensus / 83
Futuristic / 83
Limitations of Hermeneutic Phenomenology / 84
Particular Philosophical Works used in this Thesis / 86
Thinking / 88
Nursing and Humanism / 88



Heidegger and National Socialism / 90

Summary / 91

## **CHAPTER FIVE: The Research Process: The Readying Phase for the Research / 93**

Introduction / 93

Gaining Ethical Approval / 93

Setting the Scene / 93

The Participants / 95

Integrating Ethical Principles across the Thesis / 95

Confidentiality / 95

Storage of Data / 97

Risks and Benefits to the Participants / 98

Conflict of Interest / 98

Value of the Research / 99

The Interview Method / 99

Timing of the Interview / 99

Triangulation / 100

Analysis and the Interpretive Process / 101

Stage One – Exploring the Transcripts / 101

Stage Two – Searching for the Themes / 103

Stage Three – Looking for Similarities and Differences / 104

Stage Four – Weaving the Themes Together / 104

Stage Five – Substantiating the Constitutive Pattern / 105

Stage Six – Confirming the Interpretation / 105

Stage Seven – Preparing the Report / 106

Ensuring Internal Rigour / 106

Comprehensiveness / 106

Penetration / 106

Thoroughness / 107

Appropriateness / 107

Contextuality / 107

Agreement / 108

Suggestiveness / 108

Potential / 108

Summary / 109

## **CHAPTER SIX: Becoming Attuned - The Call / 110**

Introduction /	110
Being Thrown /	111
Unsettledness and Unfamiliarity /	115
Leaping Ahead /	118
Standing Alongside: Remembering Being There /	120
Restlessness – The Yes-and-No of being a Preceptor /	121
Being ‘Not a Proper’ Preceptor /	127
Being a Preceptor: It’s Reality /	128
Summary /	134

## **CHAPTER SEVEN: The Emerging Identity of ‘Being-as’-Preceptor: Keeping the Student in mind / 136**

Introduction /	136
Being-as-a Preceptor: Gifting Time to Share /	137
Being as-Preceptor: Encouraging Students to ‘Let Be’ /	139
Preceptor-as-Being Open to Students from other Cultures /	141
Being-as-Preceptor: Coping with Staffing Crises and Precepting Students /	143
Experiencing Being-as-Preceptor: The-Uncertain-Place /	144
Being-as-a-Preceptor to Students who find Learning a Struggle /	146
Preceptor as Coping with Stressful Situations: Writing a Bad Report /	150
Being-as-Preceptor: Encouraging Students to Think in Practice /	154
Being-as-Preceptor and Finding-a-Place for the Competing Demands /	158
Living-a-Life-as-a Preceptor-Meaningfully: To-ing and Fro-ing /	161
Summary /	163

## **CHAPTER EIGHT: Assessing Where the Student is at: The Preceptor and Preceptee Working and Growing Together / 165**

Introduction /	165
Being as-Preceptor: Assessing where the Student is at /	165
Being as-Preceptor: Weighing up the Student /	168
Being as-Preceptor: Knowing and Connecting with the Student /	170
Being as-Preceptor: “Checking” and “Double Checking /	172
Being as-Preceptor: Thoughtful Engagement in Guiding Students /	174
Being as-Preceptor: “Together Work” /	175
Preceptor as Following Through /	179
Preceptor as Being Vigilant /	181
Preceptor as Creating a Sense of Purpose /	183

Preceptor as Enabling Freedom to Learn / 186  
Summary / 191

**CHAPTER NINE: The Preceptor as Builder of Nursing Practice: Teaching Reality  
Nursing / 193**

Introduction / 193  
Being as-Preceptor: Enabling Student Learning Through Engaging the Patient / 193  
Being as-Preceptor: Enabling Students by the Practice of “Talking Through” / 194  
Being as-Preceptor: Being-with and Showing the Student How / 195  
Being as-Preceptor as Patient Advocate / 198  
Being as-Preceptor as Letting Students Grow / 200  
Being-as Preceptor: Helping Students Cope with the Reality of Death / 203  
Precepting as Drawing Attention to the Meaning of Power Play / 204  
Being-as Preceptor: Working with Students Hitting Reality / 205  
The Fishbowl Room – Preceptor as Taking “Time out to put in” / 209  
Being-as Preceptor: Walking the Talk / 211  
Being as-Preceptor: Feeling Alone in the World of Nursing Education / 213  
Experiencing Preceptoring as Being-as “Doubly Accountable” / 215  
Experiencing Being-as a Preceptor – Letting the Student Lead the Way / 218  
Summary / 221

**CHAPTER TEN: The Research Findings: The Meaning of the Experience of Being  
as-Preceptor to Undergraduate Student Nurses / 222**

Introduction / 222  
The Constitutive Pattern: Safeguarding the Practices of Nursing / 224  
The Four Chapters (Six – Nine) / 225  
The Relational Themes Supporting Safeguarding / 228  
Safeguarding as Becoming Attuned - the Call / 229  
Safeguarding as the Emerging Identity of being-as Preceptor: Keeping the  
Student in mind / 231  
Safeguarding as ‘Assessing where the student is at’ – the preceptor &  
preceptee working and growing together / 233  
The Preceptor as Builder of Nursing Practice -Teaching Reality Nursing / 236  
Summary / 239  
Converging Conversations /241  
Authenticity: Preceptors as ‘Mine-ness’ / 241  
Preceptor Accountability / 242

Competency	243
A Lack of Understanding of the Contemporary World of Nursing Education /	244
Theory/Practice Separation /	244
Preceptor Preparation and Credibility /	245
Meaninglessness and Inauthenticity /	245
Phrōnesis /	246
A New Era Required /	246
Leadership /	247
Co-operacy /	248
Collaborative Partnerships /	248
Good Preceptors /	249
A Phenomenological Study /	250
Summary /	252
Implications of this Research for Education /	253
Implications from the Research for Practice /	255
Implications for Further Research /	256
Limitations of the Research /	258
Recommendations /	260
Research Skills /	260
Reflective Practice /	260
Commitment /	260
Concluding Statement /	260

## **REFERENCES / 264**

## **APPENDICES /**

Appendix One – Invitation to Participate /
Appendix Two – Information Sheet /
Appendix Three – Consent Form /
Appendix Four – Typist's Confidentiality Agreement /