**Chapter 13**

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| **Preceptor Development Plan:** **Pragmatics of Precepting** | | | |
| Review the information on pragmatics of precepting described in this chapter. What are your strengths? In which areas do you need to increase your knowledge and expertise? What is your plan for expanding your knowledge and expertise? What resources are available? Who can help you? | | | |
| **Name:** | | | |
| **Date:** | | | |
| **Organization and Time Management** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Delegation** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Performance Discrepancies** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Problem-Solving Preceptor-Preceptee Relationships** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Challenging Behaviors** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor-Preceptee Mismatch** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |

**Chapter 14**

|  |  |
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| **Preceptor Development Plan: Self-Care**  **Things I Commit to Including in My Life This Month** | |
| Review the information on the practices of self-care to prevent burnout and create an optimal healing environment described in this chapter. Create a plan of self-care for yourself. To get started, pick two of the practices in each pathway and develop a plan on how to include those practices in your life in the next month. | |
| **Name:** | |
| **Date:** | |
| **Physical pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
|  |  |
| **Mental pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
|  |  |
| **Emotional pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
|  |  |
| **Spiritual pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
|  |  |
| **Relationships pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
|  |  |
| **Choices pathway practices I commit to including in my life this month** | |
| **Practice** | **Plan** |
|  |  |
| **Accountability Buddy** | |
| **Consider finding an accountability buddy. Who are the people who could be your buddy?** | |
|  | |

**Chapter 15**

|  |  |  |  |
| --- | --- | --- | --- |
| **NPD Practitioner Plan: Responsibility for Developing and** **Supporting Preceptors** | | | |
| ***Review the information on developing and supporting preceptors described in this chapter. What are your strengths? In which areas do you need to increase your knowledge and expertise? What is your plan for expanding your knowledge and expertise? What resources are available? Who can help you?*** | | | |
| **Name:** | | | |
| **Date:** | | | |
| **Advocacy for Preceptor Programs** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Selection** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Program Development** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Support** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Recognition and Rewards** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Retention** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |

**Chapter 16**

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| --- | --- | --- | --- |
| **Manager Plan: Selecting, Supporting, and Sustaining Preceptors** | | | |
| Review the information on selecting, supporting, and sustaining preceptors described in this chapter. What are your strengths? In which areas do you need to increase your knowledge and expertise? What is your plan for expanding your knowledge and expertise? What resources are available? Who can help you?  In addition, review your organization’s preceptor performance standards, selection criteria, education program (initial and continuing), evaluation forms, and recognition plans. If any of these are not yet available in your organization, work with stakeholders to develop and implement them. | | | |
| **Name:** | | | |
| **Date** | | | |
| **Establishing Performance Standards and Preceptor Competencies** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Setting the Stage: Creating a Culture** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Setting the Stage: Defining Needs** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Setting the Stage: Matching Preceptors With Preceptees** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Setting the Stage: Setting Expectations** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Preceptor Education** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Communication** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Evaluating Preceptors** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Supporting and Sustaining Preceptors and Preceptorships** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Providing Adequate Resources** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Meaningful Recognition** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Overcoming Challenges** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |

**Chapter 17**

|  |  |  |  |
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| **Preceptor Development Plan: Planning and Implementing a Preceptor Program** | | | |
| Creating preceptor development programs requires considerable planning.Review the information on preceptor development described in this chapter. What are your/your team’s strengths? In which areas do you/your team need to increase your knowledge and expertise? What is your plan for expanding your/your team’s knowledge and expertise? What resources are available? Who can help you? | | | |
| **Name:** | | | |
| **Team Composition—Do you have the competencies you need on your team?** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Standards** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Assess the Practice Gap** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Identify Educational Needs** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Program Delivery** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Learner Engagement Strategies** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Program Length** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Content** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |
| **Program Evaluation and Continuous Improvement** | | | |
| **Strengths** | **Needs** | **Plan** | **Resources** |
|  |  |  |  |