

A Cross-Sectional Study on Nursing Preceptors' Perspectives About Preceptorship and Organizational Support

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Rasha Ibrahim, MSc, PhD¹ , Manju Varghese, PhD¹ and Said Saleh Salim, MSc²

Abstract

Background: A skilled and experienced preceptor enhances nursing candidates' education. Students can acquire invaluable insights by observing and learning from the preceptor's professional nursing practice. Organizations must furnish sufficient support to guarantee the efficacy of preceptors in their responsibilities.

Objective: To evaluate preceptors' perceptions of the preceptorship and the relationship between organizational support and preceptor perspective of preceptorship.

Methods: A cross-sectional correlational design was deployed using purposive sampling of 90 nurses in the UAE. Between August 2023 and December 2023, a self-reported questionnaire with 40 items on preceptor perspectives of preceptorship (PPP) was distributed to nurses. The student's t-test, Chi-square, Monte Carlo, Fisher Exact, and Pearson coefficient were used.

Results: The results revealed that most participants were female (71.1%), with 48.9% between 36 and 45 years old. The mean score for the PPP was high (73.81 ± 10.92). There was a significant association between age, years of nursing experience, work area, and overall PPP. A strong correlation was found between self-preparation ($r = .675$), preceptorship perception commitment ($r = .762$), and the benefits of preceptorship ($r = .830$), along with organizational support.

Conclusion: The preceptors in this study had a positive perspective about preceptorship. Their acknowledgment of preceptorship's benefits to the organization shows their optimism and dedication. Future studies should analyze preceptor training programs and devise initiatives to improve clinical teaching.

Keywords

preceptorship, clinical competence, hospital education department, hospital, teaching

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Introduction

The Importance of Clinical Preceptors in Nursing Education

Nursing education is incomplete without the guidance and support of clinical preceptors. Their indispensable role in bridging the gap between theoretical knowledge and real-world clinical practice is invaluable (Ahsan et al., 2023; Patterson et al., 2022; Renu et al., 2015). Clinical preceptorships are extensively used to help new graduate nurses adapt to the hospital environment and educate them (Moabi & Mtshali, 2022). Clinical preceptorship is defined as a formal agreement between an experienced health practitioner (the preceptor) and a recent graduate or student (the preceptee) in a clinical environment (Bartlett et al., 2020;

Gholizadeh et al., 2022). A preceptor is “an educator who gives on-the-job training to novice nurses and nursing students” (Hong & Yoon, 2021, p. 1). In general, the preceptorship program entails teaching freshly graduated nurses who enter clinical practice for the first time, ensuring a smooth transfer to new employment (L'Ecuyer, 2019; Nachinab & Armstrong, 2022 ; Senneff et al., 2019). The collaborative

¹Nursing Department, Fatima College of Health Sciences, Madinat Zayed, UAE

²Nursing Development Department, Al Dhafra Hospitals, Madinat Zayed, UAE

Corresponding Author:

Rasha Ibrahim, Nursing Department, Fatima College of Health Sciences, 50433, Al Dhafra region, Baynunah complex, Madinat Zayed, UAE.
Email: rasha.ibrahim@actvet.gov.ae



relationship between preceptors and nursing students fosters an environment where questioning and exploration are encouraged, ultimately nurturing a culture of continuous learning and professional growth (Ebu Enyan et al., 2021b; Hardie et al., 2022).

It is of utmost importance to invest resources in educating and supporting preceptors. This will equip them with the necessary tools and resources to carry out their roles effectively (Kim et al., 2022). By doing so, we can improve the quality of education and development of nursing students, leading to better patient outcomes and overall quality of healthcare delivery (Dorgham et al., 2022; Sugito et al., 2023).

Review of Literature

Preceptors' Self-Preparation

To excel as preceptors, nurses should prioritize self-improvement and consistently seek opportunities to enhance their knowledge and skills. By staying up-to-date with the latest evidence-based practice guidelines, attending workshops and conferences, and actively pursuing continuing education, nurses can better equip themselves to provide exceptional support and guidance to novice nurses (Jassim et al., 2022; Phuma-Ngaiyaye et al., 2017). This ensures that students receive a comprehensive and well-rounded education. Moreover, preceptors who commit to their professional development enhance the learning experience and create a nurturing and supportive environment (Chen et al., 2022). Research has demonstrated that preceptors are critical in helping students develop into competent nurses. A quasi-experimental study revealed that self-preparation significantly improved nursing students' learning outcomes (Dorgham et al., 2022). These results align with a study at Malmö University that found that Preceptors' self-preparation improves nursing students' abilities to cooperate, understand, and build confidence in patient interaction (Jassim et al., 2022).

Organizational Support to Preceptors

For preceptors to succeed, organizations must support them (Gholizadeh et al., 2022; Pohjamies et al., 2022). The nursing education department must provide preceptors with training and resources beyond staff nurse orientation (Hardie et al., 2022). A well-designed training program should be implemented, focusing on educational principles that enhance their teaching skills and knowledge and enable them to guide nursing students effectively (Susanti et al., 2022). Preceptors should receive teaching materials, regular check-ins with nursing faculty or education coordinators, and professional development and networking opportunities. These strategies will help them navigate the complex health environment and meet varied learning demands (Omer & Moola, 2018; Wang et al., 2022). By offering thorough assistance, hospitals can

ensure preceptors are well equipped to execute their responsibilities properly.

Establishing and implementing a robust feedback system for receiving regular input from students regarding their preceptorship experience through the nursing education department is imperative (Jeong et al., 2021). This feedback is critical in continuously improving and providing tailored support to preceptors and students (Phuma-Ngaiyaye et al., 2017). The nursing education department must actively seek student feedback to identify areas of strength and growth within the preceptorship experience. This process is crucial to enhancing the overall learning environment for nursing students (Mahasneh et al., 2021). A quasi-experimental methodology was employed to evaluate the preceptors' knowledge levels before and after training and assess the quality of their feedback. Participants endorsed the preceptorship program because it allowed them to take on many roles, including being a preceptor and an educator (Dorgham et al., 2022).

Preceptors' Perception of the Value of Their Roles

Providing assistance to preceptors and acknowledging their contributions enhances the education and growth of nursing students and improves preceptors' perspective on the importance of their jobs (Adawi et al., 2021). Providing rewards and support in clinical settings improves job satisfaction and has a beneficial effect on student learning. To efficiently manage the preceptorship program, the preceptor must commit to their responsibilities wholeheartedly (Onbe et al., 2022a). This can be accomplished by offering ample incentives, awards, and assistance services. Further investigation is required to explore the perspective of nurse preceptors regarding their role as crucial collaborators in the preceptorship program (Wang et al., 2022). A correlational study conducted in Iran examined the relationship between preceptor nurses' perceived benefits, rewards, support, and commitment to their role. The study found a positive and moderate association between the studied variables (Gholizadeh et al., 2022).

Benefits of Preceptorship for Preceptors

Preceptorship offers numerous benefits for preceptors, including professional development, leadership opportunities, enhanced self-confidence, decreased work-related stress, and a sense of fulfillment within the nursing profession (Loughran & Koharchik, 2019; Mukhalalati et al., 2022). One of the critical benefits of preceptorship to nurses is the opportunity to enhance their leadership skills (Ebu Enyan et al., 2021b). This role allows them to impart their knowledge and expertise to the next generation of nurses, thus contributing to the overall growth and development of the nursing profession. The sense of achieving that comes from nurturing and precepting future nurses can greatly enhance job satisfaction and contribute to a positive work environment (Koy, 2015). Being a preceptor can boost

self-confidence and decrease anxiety and work-related stress. This role demands individuals to be knowledgeable and competent, which improves their confidence in their abilities (Siraj et al., 2022).

Barriers to Preceptorship

While there is a notable tendency toward precepting students, particular challenges can significantly impede the process. These obstacles not only impact the preceptors but also undermine the whole educational experience for the students. Therefore, it is imperative to tackle these problems to guarantee a seamless and effective precepting process (Omer & Moola, 2018). One obstacle is staffing shortages, which force nurse preceptors to lecture in class without student participation (Robinson et al., 2023). Due to the high student-to-preceptor ratio, nursing preceptors may not have enough time to supervise clinical students (Christmals, 2022). Without enough incentive and reward, preceptors may burn out and become overwhelmed trying to manage teaching and patient care (Onbe et al., 2022a). Another barrier to preceptorship is the lack of official training and support. Because many healthcare organizations do not train or equip preceptors, they often feel unprepared (Anderson et al., 2020). It is important to understand and respect the role of the preceptor, as not doing so can be challenging (McDermott, 2023).

A survey among 442 nurses and midwives in Ghana revealed that the primary obstacles to preceptorship were inadequate preparation, insufficient support from faculty members and managers, and an increased workload (Ebu Enyan et al., 2021a). An Iranian phenomenological investigation likewise documented a dearth of support for preceptors (Valizadeh et al., 2016). Therefore, the present study was conducted to assess preceptors' perspectives on the preceptorship program among nursing students and explore the relationship between organizational support and the four domains of preceptors' perception patterns. Based on the literature review, the study of

preceptorship can be examined from five perspectives: preceptors' self-preparation, organizational support, perception of the value of their roles, benefits, and barriers (Figure 1).

Materials and Methods

Design and Setting

This quantitative research carried out at Madinat Zayed Hospital in a clinical environment, utilizes a cross-sectional and correlational methodology. Madinat Zayed Hospital is the primary teaching hospital in the city and has a total of 155 beds. Of these beds, 109 are dedicated to inpatient departments and their specialties, while the remaining 46 are for critical care and associated disciplines. The facility is a necessary center for training and educating nursing students. The Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) checklist was used in reporting this study (see Supplementary File 1).

Sample

The researcher opted for a whole-population sampling strategy by potentially involving every member eligible for inclusion in the study. The study included registered nurses who served as preceptors and were affiliated with Seha corporate—the exclusion criteria aimed to remove nurses who did not participate in preceptorship experiences. Nurse managers were also excluded as they were not directly involved in precepting students. Although the survey anticipated 100 nurses for inclusion, there were 90 participants, yielding a response rate of 90% (Figure 2).

Study Instruments

Demographic information encompassed age, gender, qualifications, nursing experience, current position, preceptorship

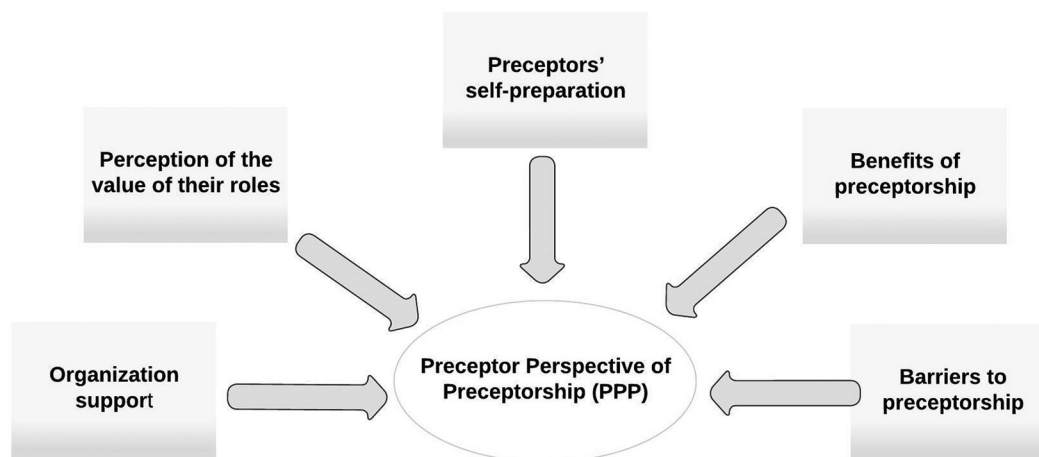


Figure 1. Preceptor perspective of preceptorship (PPP).

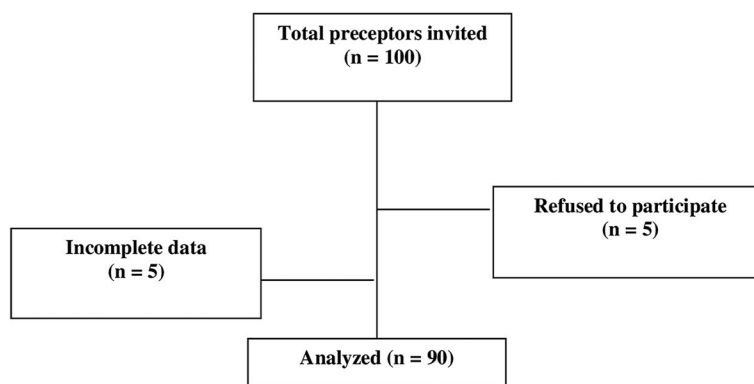


Figure 2. Diagram depicting study participants and losses.

experience, and work area. The researchers designed a questionnaire to collect data on PPP. Face validity was established after meticulous evaluation by three nursing specialists with extensive expertise and experience in preceptorship. The experts independently and collectively verified the questionnaire's construct. The instrument comprises 40 items categorized into five themes: preceptors' self-preparation (six items; $\alpha = .976$), organization support (seven items; $\alpha = .903$), perception of the value of their roles (10 items; $\alpha = .713$), benefits of preceptorship (11 items; $\alpha = .965$), and barriers to preceptorship (six items; $\alpha = .11$) (see Supplementary File 2).

The respondents assess each statement using a five-point scale ranging from 1 = strongly disagree, 2 = disagree, 3 = neither agree nor disagree, 4 = agree to 5 = strongly agree. Some statements, specifically Items numbers 20, 21, and 35–40 were rated on a reversed scale from 1 = strongly agree to 5 = strongly disagree. The researchers calculated the average score for each theme and the total scale score obtained by averaging the five themes. Higher scores indicated a heightened level of perception. The overall score, ranging from 40 to 200 points, could be classified as low perception level (40–92 points), intermediate perception level (93–145 points), or high perception level (146–200 points). To evaluate the reliability of the research instruments, the researchers examined internal consistency using Cronbach's alpha coefficient test with a statistical significance set at $p < .05$. The tool showed reliability with an $\alpha = .957$, surpassing the satisfactory threshold of ≥ 0.7 for study groups' values. The pilot study was performed on participants from the previously mentioned context to assess item clarity and practicality, identify potential hurdles and concerns during data collection, and test the time necessary to complete the tools. Some aspects needed clarification from researchers but did not necessitate change. Participants in the pilot study were not included in the study sample.

Data Collection

The data collection for this study involved the distribution of survey questionnaires to nursing staff through email

communication. This process transpired over five months, from August to December 2023. The survey instruments were accompanied by a comprehensive letter of information appended to the email. This letter provided details regarding the study's purpose, potential benefits, and the rights of the participants. It explicitly conveyed to the nursing staff that participation in the study was voluntary. The survey, designed to take approximately 5–10 minutes, was introduced in the email along with the researcher's contact information. Throughout the data collection period, the researcher remained accessible to address any queries from participants, ensuring clarity and understanding of the study's objectives.

Statement of Ethics

The Research Ethics Committee at Fatima College of Health Sciences, United Arab Emirates, granted ethical permission for this study after presenting the study protocol, instrument, and consent to committee members. The authorization was issued on May 23, 2022 [IRB approval number FCEC-2-21-22-BSN-2-SF]. In addition, the Al Dhafra Hospitals Institutional Research Ethics Committee (ADHIREC) issued ethical permission on November 4, 2022 [approval number ADH-IREC-022-002]. After being briefed on the purpose of the study, the subjects gave their informed consent. Confidentiality and anonymity were protected by assigning a code number to each questionnaire. The nurses were informed that their information would remain anonymous and be used solely for research. Participants are told they could abandon the research at any time.

Data Analysis

The data underwent analysis utilizing SPSS 20. Descriptive statistics, encompassing frequency, means, standard deviations, and percentages, were applied to quantify demographic variables. In inferential statistics, comparisons of overall PPP among distinct groups, distinguished by sociodemographic

characteristics, were conducted through Student's *t*-test, chi-square, Monte Carlo, and Fisher's exact tests. The Pearson coefficient was also employed to assess correlations between organization support and different PPP (Akoglu, 2018). All statistical analyses adhered to a significance level of $\alpha = 0.05$.

Results

Table 1 presents the sociodemographic characteristics of the study participants. The most significant proportion of participants (at 48.9%) is between 36 and 45 years old. Females comprise the majority of the sample, accounting for 71.1% of all participants. Most hold a bachelor's (64.4%), while fewer have diplomas (31.1%) or master's (4.4%) degrees. The analysis indicates that 40% of participants have 6 to 10 years of preceptorship experience. Regarding work

Table 1. Sociodemographic Characteristics of Study Participants ($n = 90$).

Demographic characteristics	N	%
Age (years)		
<25	12	13.3
26–35	26	28.9
36–45	44	48.9
46–50	8	8.9
Gender		
Female	64	71.1
Male	26	28.9
Qualifications		
Diploma	28	31.1
Bachelor	58	64.4
Master	4	4.4
Years of experience as a nurse		
0–5 years	16	17.8
6–10 years	20	22.2
11–15 years	28	31.2
16–20 years	26	28.8
Current position		
Staff nurse	75	83.3
Charge nurse	15	16.7
Years of experience as a preceptor		
<2 years	24	26.7
3–5 years	16	17.7
6–10 years	36	40.0
11–15 years	14	15.6
Area of working		
Adult medical/surgical	10	11.1
Intensive care unit	20	22.2
Emergency room	10	11.1
Maternity	24	28.9
Pediatrics/NICU	14	13.3
Operating room	12	13.3
Language barrier		
Yes	10	11.1
No	80	88.9

areas, maternity (28.9%) and intensive care unit (22.2%) are reported as the most common areas. The findings indicate that a significant proportion of participants (88.9%) do not encounter any language hurdles in their professional endeavors, but a smaller percentage (11.1%) experience such barriers.

According to the findings shown in Table 2, the overall perceptions of preceptors were predominantly positive, as indicated by a majority percentage of 62.2% with a mean score of (73.81 ± 10.92) . In terms of individual aspects, it was observed that the "self-preparation" aspect had the highest average score (84.81 ± 12.85) , with a significant majority of preceptors (95.6%) being classified in the high category. Subsequently, the subscale "Benefits of preceptorship" had an average score of 82.22 ± 12.42 , and once again, a majority of participants were classified in the high category 86.7%. Barriers to preceptorship had considerably lower scores (51.02 ± 22.86) , with only 33.3% rated as high, 42.2% as moderate, and 24.4% as low category.

Table 3 demonstrates the association between Overall PPP and various socio-demographic variables among the study participants. The analysis also shows a notable association between years of nursing experience and overall PPP ($\chi^2 = 11.114, p = .010$). A statistically significant correlation is also observed between the work area and overall PPP ($\chi^2 = 13.929, p = .016$). Participants working in the Intensive Care Unit demonstrate higher percentages in the "High" PPP category compared to other areas. No significant association is found between qualifications and Overall PPP ($\chi^2 = 1.052, p = .766$) and between the current position and Overall PPP ($\chi^2 = 0.618, p = .452$). Likewise, no significant association was observed between the language barrier and overall PPP ($\chi^2 = 0.756, p = .635$).

Table 4 depicts the association between organizational support and different PPP among the study participants. The correlation coefficients (*r*) and corresponding *p*-values are reported for each PPP. A significant positive relationship is observed between organizational support and preceptors' self-preparation ($r = .675, p < .001$). A considerable positive correlation is found between organization support and perception of the value of their roles ($r = .762, p < .001$). Additionally, a notably strong positive correlation exists between organizational support and preceptorship benefits ($r = .830, p < .001$). However, unlike other domains of PPP, no statistically significant correlation was noted between organization support and Barriers to preceptorship ($r = .144, p = .346$).

Discussion

The primary aim of this study was to assess preceptors' perceptions of preceptorship and explore the link between organizational support and the Preceptor Perspective of Preceptorship. Notably, the study revealed a high level of

Table 2. Descriptive Analysis of the Studied Preceptors According to the Mean Percent Score of PPP ($n = 90$).

Study variables	Mean score Mean% \pm SD	Low ($<33.3\%$)		Moderate ($33.3\text{--}66.6\%$)		High ($\geq 66.67\%$)	
		N	%	N	%	N	%
Preceptors' self-preparation	84.81 \pm 12.85	0	0	4	4.4	86	95.6
Organization support	76.83 \pm 14.03	0	0	12	13.3	78	86.7
Perception of the value of their roles	69.50 \pm 9.51	0	0	48	53.3	42	46.7
Benefits of preceptorship	82.22 \pm 12.42	0	0	2	2.2	88	97.8
Barriers of preceptorship	51.02 \pm 22.86	22	24.4	38	42.2	30	33.3
Overall preceptor perspective of preceptorship	73.81 \pm 10.92	0	0	34	37.8	56	62.2

Table 3. Association Between Overall PPP and Participants' Demographic Data ($n = 90$).

Sociodemographic variables	Overall PPP				χ^2	p
	Moderate		High			
	($n = 34$)		($n = 56$)			
	N	%	N	%		
Age						
<25	6	17.6	20	35.7	5.024	$^{MC}p = .155$
26–35	22	64.7	22	39.3		
36–45	6	17.6	6	10.7		
46–50	0	0	8	14.3		
Gender						
Female	4	11.8	22	39.3	3.9	$^{FE}p = .088$
Male	30	88.2	34	60.7		
Qualifications						
Diploma	22	64.7	36	64.3	1.052	$^{MC}p = .766$
Bachelor	12	35.3	16	28.6		
Master	0	0	4	7.1		
Years of experience as a nurse						
0–5 years	2	5.9	18	32.1	11.114*	$^{MC}p = .010^*$
6–10 years	16	47.1	4	7.1		
11–15 years	10	29.4	16	28.6		
16–20 years	6	17.6	18	32.1		
Current position						
Staff nurse	26	76.5	48	85.7	0.618	$^{FE}p = .452$
Charge nurse	8	23.5	8	14.3		
Years of experience as a preceptor						
<2 years	6	17.6	18	32.1	4.592	$^{MC}p = .198$
3–5 years	10	29.4	6	10.7		
6–10 years	16	47.1	20	35.7		
11–15 years	2	5.9	12	21.4		
Area of working						
Adult medical	4	11.8	0	0	13.929*	$^{MC}p = .016^*$
Adult surgical	2	5.9	4	7.1		
Intensive care unit	2	5.9	18	32.1		
Emergency room	6	17.6	4	7.1		
Maternity	16	47.1	10	17.9		
Pediatrics	0	0	12	21.4		
Operating room	4	11.8	8	14.3		
Language barrier						
Yes	2	5.9	8	14.3	0.756	$^{FE}p = .635$
No	32	94.1	48	85.7		

Note. MC = Monte Carlo; FE = Fisher exact; χ^2 : Chi-Square. p : p -value for comparison between the studied categories.

* $p \leq .05$.

Table 4. Relationship Between Organization Support and PPP ($n = 90$).

Preceptor perspective of preceptorship (PPP)	Organization support	
	<i>r</i>	<i>p</i>
Preceptors' self-preparation	.675*	<.001*
Perception of the value of their roles	.762*	<.001*
Benefits of preceptorship	0.830*	<.001*
Barriers of preceptorship	.144	.346

Note. *r*: Pearson's coefficient = small ($r = .1$); medium ($r = .3$); large ($r = .4$) and bigger ($>.4$)

* $p \leq .05$

perception among nursing preceptors, with preceptorship benefits ranking the highest, followed by preceptors' self-preparation perception. This finding underscores the importance of recognizing and enhancing the benefits of preceptorship in nursing education and administration. The study also identified a positive association between years of experience and work area with the overall perception patterns of preceptors. Furthermore, the correlation analysis demonstrated a robust positive relationship between organizational support and preceptorship's benefits, preceptors' self-preparation, and perception of their roles' value. There was no correlation between organizational support and barriers to preceptorship.

It is worth noting that the majority of participants in this study were females, a trend that mirrors the gender distribution in the nursing profession. This gender disparity in nursing, a widely recognized phenomenon, could have influenced the study's results and should be considered when interpreting the findings. Recognizing this potential bias is essential to understand the study's implications comprehensively (Pohjamies et al., 2022). Their average preceptorship experience of 6–10 years is a testament to their unwavering commitment and dedication to preceptorship and education in nursing. As staff nurses who have completed their bachelor's degrees, they bring a solid clinical knowledge and skills foundation to their roles as preceptors. This expertise enables them to serve as preceptors effectively, providing comprehensive guidance and support to new nurses, instilling confidence in their abilities, and inspiring others in the field.

The study uncovered a correlation between years of nursing experience and overall PPP, suggesting that a wealth of professional experience may contribute to a more nuanced and positive perception of the preceptorship program. This finding aligns with previous research that underscores the important role of experienced nurses in preceptorship roles. Their ability to navigate the complexities of guiding novice practitioners is a testament to the value of their expertise (Preceptorship in Nursing, 2023). However, it contradicts a finding from quantitative studies in Sweden and New Zealand stating that registered nurses' years of experience did not influence the preceptorship role (Hallin & Danielson, 2010 ; Lienert-Brown

et al., 2018). Another study of 59 nurses in Australia revealed that although registered nurses were experienced, they had no previous exposure to teaching and supporting students (Cusack et al., 2020). It is important to note that a recent study suggested that newer nurses can bring fresh perspectives and enthusiasm to the preceptorship relationship. This finding challenges the traditional belief that more experience leads to more favorable perceptions. In Japan, an exploratory case study approach confirmed that involving newer nurses in preceptorship roles could potentially bring about a dynamic shift in the preceptorship landscape, offering a more diverse range of perspectives and approaches (Kawakami et al., 2022).

A significant association between the work area and overall PPP has been observed. This could be explained by the large number of students they precept each semester compared to other wards. While some studies suggest that the work context can influence teaching approaches and satisfaction (Flores et al., 2022; Hong & Yoon, 2021)

The reported overall level of perception about preceptorship was high at 62.2%, with a mean percentage of $73.81 \pm 10.92\%$. This indicates high awareness and understanding among the study participants regarding preceptorship domains. This percentage is like that of a study conducted in Brazil (Giroto et al., 2019) but lower than in South Africa (Cloete & Jeggels, 2014), Ethiopia (Teferra & Mengistu, 2017), and Korea (Hong & Yoon, 2021). There may be differences in the results due to the sample size, socioeconomic characteristics, and the number of nurses supervising the students. The preceptors' positive approach can be ascribed to multiple factors, including the program's efficacy in encouraging skill development, fostering meaningful relationships between preceptors and students, and creating a supportive environment. Additionally, the overall positive perception among preceptors may suggest the program's impact on their professional achievement. The fulfilling experience guiding the next generation of nurses can serve as a potent incentive, shaping preceptors' perspectives toward their roles. Likewise, a qualitative study was conducted to explore the experiences and perceptions of preceptors who participated in the Preceptor of Excellence program. The study revealed that preceptors have high perception levels, and programs positively impact the educational program and help achieve outcomes (Raines, 2012).

Our study showed that preceptor nurses perceived the benefits of being preceptors and were adequately prepared for their role. This is evidenced by the relatively higher mean scores on the benefits and self-preparation subscales (82.22 ± 12.42 and 84.81 ± 12.85 , respectively) than on the remaining level of perception. This suggests that nursing preceptors have an excellent grasp of the effectiveness of their roles, which can be attributed to the comprehensive training programs for preceptors, ongoing support, access to resources, feedback mechanisms, and recognition.

The notably strong positive correlation between organizational support and the benefit of preceptorship ($p < .001$) further strengthens the argument that organizational backing

is a vital determinant of the overall positive outcomes associated with the preceptorship program. Supportive organizational structures contribute to a positive preceptorship experience by fostering effective communication, preceptorship relationships, and a culture of continuous improvement (Sun et al., 2022). Similarly, a descriptive correlational study was conducted in Iran, which found a link between the commitment to the preceptor role and the benefits, rewards, and support perceived by preceptor nurses (Gholizadeh et al., 2022). Another study in Canada, which involved 331 preceptors, aimed to examine their perceptions of benefits, rewards, and support. The study revealed that preceptors had an overall positive experience in their role (Kalischuk et al., 2013).

The current study revealed a positive and significant correlation between organizational support and preceptors' self-preparation ($p < .001$). These findings are consistent with previous research, showing a positive correlation between organizational support and commitment (Bryan & Vitello-Ciccio, 2022; Chang et al., 2013; Cloete & Jeggels, 2014; Dibert & Goldenberg, 1995). The reason for this finding can be given to the hospital's educational center, which sets up the preceptorship orientation and offers assistance and instruction to preceptors when required. The finding is backed by a study investigating the impact of preceptor training courses on clinical teaching practices. This indicates that nurse managers and colleagues should provide support to preceptors, and there is a need to create preceptor training programs (Hong & Yoon, 2021). Another reason suggests that a supportive organizational environment, including access to training resources, preceptorship programs, and adequate preparation mechanisms, significantly boosts preceptors' confidence and a strong sense of readiness and commitment to self-preparation. Additionally, preceptors are well prepared due to continuous and timely updating for the hospital education team about any changes in student assessment criteria of all clinical courses by submitting copies of the clinical workbooks beforehand, which provides them with sufficient time to prepare themselves. A study of 120 clinical preceptors of undergraduate nursing students emphasized the importance of submitting university paperwork before the placement and the availability of university staff (Broadbent et al., 2014).

Similarly, the substantial positive correlation between organizational support and the perceived value of preceptors' roles ($p < .001$) underscores organizational recognition and investment's pivotal role in shaping preceptors' attitudes toward their responsibilities. Organizations that prioritize and acknowledge the significance of the preceptor role are more likely to foster a sense of professional achievement and commitment among preceptors. This finding echoes the results of a study among 337 registered nurse preceptors who acknowledged the support from head nurses, coordinators, and university teachers to value their roles as preceptors (O'Brien et al., 2014). Conversely, a study in Australia involving 59 nurses assessing their perception of recognition levels revealed a lack of recognition and support for the time allocated to

nurses for teaching and supervision. Consequently, nurses felt it was an additional burden and were forced to choose between delivering high-quality nursing care and providing valuable learning opportunities for students (Cusack et al., 2020). An empirical study has further elucidated that when queried about their preferred mode of recognition as preceptors, 85.2% expressed a predilection for non-material awards over material awards (Kalischuk et al., 2013).

However, the lack of correlation between organizational support and barriers to preceptorship raises intriguing questions and warrants careful consideration. One potential interpretation is that while organizational support may enhance positive aspects of the preceptorship experience, it may not necessarily alleviate the challenges and barriers inherent in the role. External factors such as workload, time constraints, and institutional policies could influence barriers, which may not be entirely mitigated by organizational support alone. The finding suggests the necessity for a comprehensive approach addressing the preceptor role's positive and challenging aspects. A systematic review of preceptor's experience in supervising undergraduate nursing students reported that nine studies viewed preceptorship as time-consuming (Benny et al., 2023). A study utilized qualitative and quantitative methods to assess the clinical competence in BSc nursing registration programs. The study found that, apart from managing the patient load, preceptors were also responsible for supervising students, which added to their workload. Consequently, due to the excessive workload, preceptors could not provide comprehensive explanations and a wide range of experiences to students during their placement (Cassidy et al., 2012)

Strengths and Limitations

This study was the first to assess the circumstances of clinical nursing education in UAE from the viewpoint of preceptors. It obtained critical informants from the same clinical placement students attending their clinics. This approach provided a comprehensive perspective that can be used to make informed decisions and enhance the quality of clinical education. This study highlights the importance of organizational support in improving preceptorship's perceived effectiveness and advantages. Although this study offers new perspectives for theory and future research, it also has limitations. The small sample size and specific demographics may have limited the study, restricting the generalizability of the results to broader groups of healthcare students.

Implications

Preceptors receive extensive training, including workshops and preceptorship programs, covering various subjects related to teaching and mentoring in a clinical setting. Those who possess strong time management skills and

exhibit professional behavior are more capable of effectively supporting students during their clinical training. They demonstrate increased dedication when they understand the importance of preceptorship to the organization. Future research should focus on analyzing the content of preceptor training programs and developing programs that might improve preceptors' clinical teaching behaviors.

Additionally, Emphasis should be placed on identifying solutions for the difficulties that preceptors face. These encompass the utilization of effective time management strategies, such as prioritizing work. Create a comprehensive schedule that allocates specific teaching and clinical duty periods. Participate in intentional and regular activities that enhance personal well-being and efficiently handle stress.

Conclusions

We evaluated the perspectives of preceptors regarding preceptorship and investigated the connection between organizational support and PPP. We found that nurse preceptors who participated in this research had a positive mindset toward preceptorship. The highest ranking was given to the benefits of preceptorship, followed by the preceptors' perception of their self-preparation. The study also found a correlation between the number of years of experience and the work area with the general perception patterns of preceptors. Moreover, the correlation analysis revealed a strong positive association between organizational support and the benefits of preceptorship, as well as the self-preparation of preceptors and their opinion of the importance of their positions. There was no discernible relationship between the level of support provided by the organization and the obstacles encountered in the preceptorship program.

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Author Contributions

RI contributed to the principal investigator, writing the original draft, methodology, results preparation, completing ethical approvals, manuscript review, and the corresponding author. MV contributed to results writing, original draft preparation, proofreading, and manuscript review. SS contributed to data collection and reviewing of the manuscript. The authors read and approved the final version of the manuscript.

Data Availability

The data supporting this study's findings are available from the corresponding author upon reasonable request.

Declaration of Conflicting Interests

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ORCID iD

Rasha Ibrahim  <https://orcid.org/0000-0002-1066-3436>

Supplemental Material

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