**Adult Learning Principles for Preceptors Working with Nursing Students**  
**Application to Scenario for Competency 5**

How does Jennifer (PHN) use these principles when working with Sarah (student) in the unfolding case study throughout the chapter? (See PHN Manual, Chapter 7, pp. 193-219).

<table>
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<tr>
<th>Principle</th>
<th>Application</th>
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| 1. Preceptor experience and expertise  
• Preceptor is the “expert”  
• Student is the “novice”  
• Preceptor is a facilitator | Jennifer has worked for the county health department for 10 years. Sarah is a public health nursing student assigned to Jennifer for her public health nursing experience (p. 193). |
| 2. The best preceptors  
• Understand learning  
• Are lifelong learners | Jennifer has agreed to bring a public health nursing student with her on her daily activities. She organizes her days with students to include a variety of learning activities. She provides opportunities to debrief these experiences with Sarah. She role models best practice in communication with her clients. |
| 3. Preceptors demonstrate  
• Empathy  
• Warmth  
• Respect  
• Consistency | When no one was home for a planned visit, Jennifer explained that families living below the poverty level are often focused on immediate concerns rather than keeping track of events that are scheduled later (p. 202). |
| 4. Each student is unique  
• Adult students bring unique life experience to the experience | Sarah grew up in an urban area and is Korean. She was adopted into an American family as an infant (p. 194). Sarah will likely have typically American cultural values, but she may have also had the opportunity to explore her Korean heritage. |
| 5. Students learn best when they participate in  
• Design  
• Implementation  
• Evaluation of the clinical experience | Jennifer included Sarah in a meeting with the director of an alternative learning center to plan a health fair for a high school population (p. 199). |
| 6. Learning resources are available in the environment | Possible learning resources for Sarah include the county public health website, public health annual report, client charts, data sources, client pamphlets and handouts, and specific program information. |
| 7. The environment should be  
• Supportive  
• Non-threatening  
• Open to questions | When Sarah shared her doubts about her ability to become independent in decision-making, Jennifer suggested they could review the experiences of their day together and identify the independent nursing interventions (p. 204). |
| 8. Content needs to be  
• Relevant  
• Useful  
• Organized | Sarah completed a reflective journal (pp. 202-203) on her observations of Jennifer’s interactions with clients. She noted the skills and tools used by Jennifer during the visits. Jennifer’s schedule provided structure for understanding the range of |
a public health nurses’ activities. Sarah prepares for learning in public health clinical by reviewing the Public Health Intervention Wheel interventions and practice levels and the population-based public health nursing competencies. In addition, Jennifer can review with Sarah the interventions and levels of practices she used from the Public Health Intervention Wheel.

9. Learning is a holistic process; use the nursing process to organize the clinical experience

- Assessment
- Planning
- Implementation
- Evaluation

Jennifer can call Sarah’s attention to data from a needs assessment and then help Sarah to think critically about next steps in the nursing process. Jennifer said, “You can begin to think about which interventions you would consider to be independent practice and how you might collaborate with others. We can discuss the skills and knowledge a PHN needs for these interventions.” (p. 204)

References

