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#### Abstract

Clinical preceptors are essential to nursing education because they help students learn clinical skills and develop as professionals. However, assessing preceptor competency can be challenging due to the lack of standardized and reliable tools. While various tools are available to measure multiple aspects of competency, there is no clear agreement on how these tools should be selected or used across clinical settings. The purpose of this systematic review was to identify and evaluate tools measuring competence of nursing clinical preceptor. The review focused on the instruments and their psychometric qualities, how they are used, and how effective they are in improving clinical education. A systematic literature review was conducted to identify existing instruments used to measure the level of competency of nursing clinical preceptors. Science Direct, Google Scholar, Sage Journal, Pubmed, and Springer were the databases selected for this study. Of the 13 eligible articles in this study, 12 different instruments were found. The instruments found included the Clinical Educators' Competence Questionnaire, Clinical Teaching Competence Inventory, Maastricht Clinical Teaching Questionnaire (MCTO), Preceptors Orientation Competence Instrument (POCI), Preceptors' Competency Domain Guide Tool, Clinical Core Competency of Preceptors (CCCP), Clinical Preceptor Experience Evaluation Tool (CPEET), Competence of Clinical Nurse Educators Instrument, Nursing Clinical Teacher Effectiveness Inventory (NCTEI), Mentors' Competence Instrument (MCI), Mentorship Effectiveness Scale, IMSOC Questionnaire. Although there are several tools available to evaluate nursing clinical preceptor competency, each has its advantages and disadvantages, according to the review's findings. For a thorough evaluation, the suitable instruments must be chosen depending on particular educational circumstances. The results show that these instruments need to be further developed and standardized to increase their applicability and reliability in a variety of healthcare settings. This will ultimately assist successful preceptorships and raise the caliber of nursing education. Keywords: Clinical Preceptors, Competence, Instrument, Measuring, Systematic Review

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### **INTRODUCTION**

Both nursing students undergoing clinical practice and new nurses learn skills through the critical role of clinical preceptors in nursing education (Awang Rosli et al., 2022). To ensure that students are professionally prepared and competent enough to provide quality health care, clinical preceptors are responsible for mentoring, directing, and evaluating students' performance during clinical practice (Pramila-Savukoski et al., 2020). Clinical preceptors must possess a variety of skills, such as technical, communication, and teaching skills, that are essential to support effective clinical education. Students may experience discomfort or even errors in their practice if they do not receive proper guidancefrom their preceptors (Ball et al., 2022).

Experienced clinical preceptors are increasingly needed as healthcare standards increase and services become more complex (Carlos & Jeniffer, 2020). In this context, clinical preceptors must have more than just clinical and technical skills; they must also be adept at interacting with others, managing time, and providing constructive feedback to support the learning process (Ong et al., 2021). The importance of clinical preceptors stems from their responsibility to ensure that students receive appropriate guidance, which enables them to provide high-quality and safe patient care (Davis et al., 2021). Clinical preceptors with adequate competency support students in developing the skills. clinical communication skills. and professional attitudes needed to handle a variety of situations in a dynamic clinical environment (Manginte et al., 2019).

### METHOD

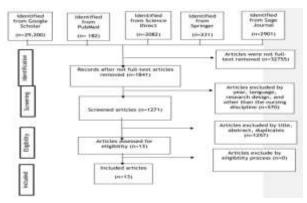
Google Scholar, PubMed, Springer, Science Direct, and Sage Journal are the databases selected for this study. The selection of literature is adjusted to be indexed by a reputable and reliable database. The index is very important for credibility, breadth of reach, and reputation, as it will affect the impact of published articles. To obtain more relevant and specific results, the researcher combined the keywords that had been compiled with Boolean Operators. So after combining the keywords with Boolean operators, the results obtained were (instrument OR tool OR questionnaire) AND (measuring OR assessing OR evaluating) AND (nurse clinical preceptor) AND (competence OR capability).

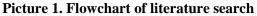
The following are the inclusion criteria for this study: 1) English language articles; 2) articles published between 2019 and 2024; 3) full-text articles; 5) papers using case-control research methods, randomized-control trials, cross-sectional studies, cohorts, quasi-experimental, qualitative, and quantitative. The exclusion criteria for this study are: 1) published before 2019; 2) articles written in languages other than English; 3) Not full-text articles; 4) papers originating from conferences or proceedings; 5) papers that are the result of reviews

The identification, screening, eligibility, and inclusion stages are the first of numerous steps in the literature review process. At the eligibility step, researchers evaluate the article's eligibility using the JBI Critical Appraisal Tools to obtain outcomes free from bias. The articles that are found can be incorporated into the research once it has been deemed eligible following a feasibility test conducted using the JBI Critical Appraisal Tools.

We organized the articles in a table with numerous points in order to collect data from those that qualified. The questionnaire's name, the author and journal, the subscale, the goal, the population, and the sample were among these requirements.

#### **RESULT AND DISCUSSION**





#### Table 1. Literature Analysis Results

#### Comparative Analysis of Instruments

1D	Author and Journal	Questionnaire	Subscale	Objective	Population
A1	Identity Jerg, C. C., On, L. S., Tang, H. M., Cheo, Y. P., Lin, J. R., & Monrosson, L. V. (2002). Evaluating Clinical Educatori Competencie in an East Asian Contents: What Proportiers in	Stame Chinicat Educators Competence Questionnaire	Traching ability     Assessment ability     Personal qualities     Interpersonal     Relationships     Curriculum     planning	To comprohend what makes up appropriate evaluation standards and who is most qualified to conduct the assessment of clinical educators in medicize within an East Alian culturer especially Tahwan.	and Sample 258 Hurses preceptor s
42	Medicine, 9, 894822, Wu, 8, V. Chi, Y., Selvam, U. P., Davi, M. K., Wang, W., Chen, Y. S. B. Ang, H. K. E. (2020). A clinical tenching blended learning grogram in enhance regeneration of the properties less. The second positive study, Journel of medical Internet research, 22(4), e18004.	Clinical Teaching Competence Immittery	<ul> <li>Student</li> <li>evaluation</li> <li>Goal setting and individual teaching</li> <li>Teaching</li> <li>Teaching</li> <li>Strategier, a</li> <li>Demonstration of organized knowlodge</li> </ul>	To create a clinical teaching blonded learning (CTB2, program for nume preceptors, it also sought to determine how well the CTBL program affected the clinical teaching competencies, self- efficacy, attRudes toward web-based learning, and blended learning outcomes of the preceptors.	preceptors
A3	Rodino, A. M., B. Wolcott, M. D. (2019), Animatry preceptor use of cognitive apprenticeship in the Massinicht clinical teaching questionnaire (MCTQ) a useful approach?, Teaching and Laarning in Neddicine, 31(5), 505-518.	Manttricht Climitat Teaching Questionnaine (MCTQ)	Modelting     Coaching     Articulation     Exploration     Safe     Isaning     environment	To evaluate the utilitation of cognitive apprenticeship teaching techniques by preceptors	preceptors
44	prochammetric tenting of the processory orientation competence (POCI), murae Execution in Practice, 64, r01445,	Preceptors Octonolation Computence Destrument (PDCI):	characteristics a Graal-oriented P Guidence IIII C Guidence IIII C reflective I discussion P Minowiedge of I work unit prestices P Creation of P	la create and 8 veceptors 9 p veceptors 9 p veceptors competence softwareart software softwareart soft	44 ourse neceptors
45	Siyabi, I., Al	Prese option*1 Competency Domain Guide Tool	Guide novice 7 numes to develop p interprofessional p addits Communication p	To creeke a 6 organización de la construction publica for nurse recorptorn at an Xinani bertsery ospital	nacaptors
Ab	<ul> <li>Jeong, H. W., Ju, D., Choi, M. L., B. Kim, S. (2021). Development and evaluation of a procepter education program based on the one-minute preceptor model: participatory action research. International Journal of Environmental Research and Public Health, 18(21), 11376.</li> </ul>	of Preceptors (CCCP)	<ul> <li>Educator</li> <li>Learning needla assessment</li> <li>Learning experience planning</li> <li>Learning plan implementation</li> </ul>		30 nurse preceptors
1	Mhango, L., Jere, D., Msiska, G., Chorwe-Sungani, G., B Chirwa, E. (2021).	Preceptor Experience Evaluation Tool (CPEET)	Education	The roles and experiences of preceptors: during the students' clinical instruction were investigated in this study.	87 nurse preceptors

48	Armania, B., Falecki, T., Menegenia, A., B Bayma, J. (2005) Clinical practice competence of Method Method Education Method Education Method Education and Preckler, 791- 796.	Bend represent	Competence     Mercelony     Mercelony	educatory competency profiles and the background to them.	147 storage
	Allenissani, M., Gatoori, P., Alayen, B., B. El Isajn, M. (2020). Crinical leading effectives in indergraduate in student courses in the United Arch. Open In courses, 6: 21779602020448140.	COnical Teacher InterCoveness Internory INCTED	<ul> <li>Harstrig competence</li> <li>Evaluation of ritidents</li> <li>Interpersonal relationship</li> <li>The personality of the clinical teacher</li> </ul>	atudy was to investigate how number of tablects and profession in the Ukoted Arab Eminates view the coorduct of effective climical teachers.	attedents
A30	Disatemente de la desarreito. V., Petroloarento M., Labitemente, M., Labitemente, M., Labitemente, M., Malarento, M., Malarento	imenduare Competences Introductors Introductors (MCI)	<ul> <li>Mannestrag practices in the vortigizate</li> <li>Chartertermitiks of the resultance</li> <li>Canal servertaking in missiony</li> <li>Reflection during memory</li> <li>Reflection during construction</li> <li>Servertaking</li> <li>Servertaking</li></ul>		
ATT	dequeritmential citady, relation Educations Rising, P. C., Hoisene, H. S., Chen, M. C., Chent, Y. P., Coli, S. F., B. Tamig, S. M. (2027): Effectivening aff propagnets of long- transfer apped cares is returned on the set statistics of long- tensis apped cares is returned on the set statistics. Horse, Sciences,	alarri oruhup Erfluesi saraaa Sessia	On-caregola Instrument Chescal Instantinity Montecellaria Rockee	The clarify clonest investor's distingtone addition and enables the effectiveness of incoment incoment incoment preferences preferences and efficiency in long- tants addition y in long- taddition y in long- taddition y in long	students
813	Educations Today, 123, 1402 (1991), advances, 24, 141 (1991), advances, 24, 141 (1991), advances, 24, 141 (1991), advances, 141 (1991), advances, 141 (1991), perceptures, 24 (1991), 141 (1991), here floated availy, floated, 142, 1204081.	The skentors Comparison of tractoursent (MCI)	Merindoring in the practices in the consectory of the set of the set of the sector of the sector of the sector of the institute of the institute of the institute set of the set of t	stratig was be accertain whether proceptor training affects contrary proceptor competently and there beyne of satisfiction with the	189 sourcing students
214	Mastagetili, R., Harter, B., Elsoni, A., Matter, S., Elsonych, M. S. (2004). The effect of the program control of the program control of the program control of the second statement of the second sta	MSOC Questiamate	<ul> <li>Implementation</li> <li>Moli-ation</li> <li>Satification</li> <li>Ofinitation</li> <li>Ofinitation</li> <li>Commitment</li> </ul>	To accertain whether the preceptorship individe program the training program for clinic accertain number clinic accertain number of the accertain the number accertain the number accertain.	86 mener preceptors

Tools such as the Clinical Educator Competency Questionnaire (CEC-Q) and the Clinical Teaching Competency Inventory (CTCI) broader and cover topics such as are communication, clinical teaching skills, feedback, and management of clinical situations (Jenq et al., 2022). The instruments found in this systematic review showed variation in the scope, focus, and application of tools for measuring clinical preceptor competency. These instruments are well suited to conducting a comprehensive assessment of preceptor competency, especially when the goal is to gain a comprehensive understanding of how effective clinical teaching is across multiple domains (Wu et al., 2020b).

However, instruments like the Preceptor Clinical Core Competencies (CCCP) and the Preceptor Orientation Competency Instrument (POCI) concentrate on particular aspects, like initial orientation and core clinical competencies. The POCI, for instance, is mainly used to assess a preceptor's capacity to assist new students in adjusting to the clinical setting. Since the preceptor receives the teaching, these tools are especially helpful for assessing new preceptors or those participating in orientation programs (Pohjamies et al., 2022). On the other hand, the CCCP evaluates core competencies in highly specialized and professional domains, like clinical knowledge and fundamental clinical skills. It is therefore a useful instrument for assessing the foundational abilities of more seasoned preceptors (Jeong et al., 2021).

Additional methods, such as the Maastricht Clinical Teaching Questionnaire (MCTQ) and the Nursing Clinical Teacher Effectiveness Inventory (NCTEI), measure preceptor competency from the perspective of students and provide insight into the quality of clinical teaching as perceived by students (Rodino & Wolcott, 2019). To assess the quality of preceptor teaching, student-centered perspectives are essential, such as openness in communication, ability to provide feedback, and supportiveness during the learning process. These instruments tend to be more subjective in their results, but they do offer additional information that is useful for understanding how preceptorship impacts students' learning experiences (AlMekkawi et al., 2020).

Instruments such the Mentors' as Competence Instrument (MCI) and the Mentorship Effectiveness Scale have been tested in a variety of settings and be highly accurate and valid in assessing mentor competence, particularly in mentor-mentee relationships in clinical settings (Oikarainen et al., 2022). These instruments are useful for assessing the emotional support, trustworthiness, and ability of mentors to mentor students. They are often used together to produce a richer assessment of the interpersonal interactions and support provided to students in the practice setting (Oikarainen et al., 2022).

In summary, each instrument has advantages and disadvantages depending on the purpose of the evaluation and the situation in which it is used. Instruments with a broad scope, such as the CEC-Q and CTCI, are advantageous for comprehensive assessment, while more specific instruments, such as the POCI and CCCP, are more suitable for focused assessment of a particular competency area. In practice, a combination of these instruments can allow for a more comprehensive assessment of the clinical preceptor's abilities. This would address the need for assessments that include technical, interpersonal, and teaching aspects.

# Contextual Suitability and Instrument Application

Each instrument, depending on its design and the skills it is intended to measure, can be used in both academic and clinical contexts, according to a comprehensive review. Instruments such as the Clinical Educators' Competence Questionnaire (CEC-Q) and the Clinical Teaching Competence Inventory (CTCI) can be used in both academic and clinical settings (Kaarlela et al., 2022). They are also suitable for a variety of educational programs that involve practical teaching. These Instruments cover a range of competencies, such communication, clinical knowledge, and as feedback, and can therefore be used effectively to assess the quality of clinical teaching in a variety of contexts (AlMekkawi et al., 2020).

In contrast, an instrument such as the Preceptor Orientation Competency Instrument (POCI), which focuses on orientation skills, is ideal for early preceptorship or the orientation phase of clinical education, particularly in hospitals that prioritize structured orientation programs. The POCI is also ideal for early preceptorship or during the orientation phase of clinical education (Pohjamies et al., 2022). Similarly, the preceptor core clinical competencies (CCCP) emphasize core competencies necessary for clinical decision-making and direct patient care, which is a major advantage for preceptors who need strong foundational clinical skills. This instrument is particularly suited to intensive care

or acute care settings where foundational skills are critical (Jeong et al., 2021).

Instruments such as the Maastricht Clinical Teaching Questionnaire (MCTQ) and the Nursing Clinical Teacher Effectiveness Inventory (NCTEI) are commonly used in academic settings where student feedback on preceptor effectiveness is critical to program improvement (Rodino & Wolcott, 2019). These instruments provide insight into how students perceive preceptor support, communication, and teaching quality, which are key to program improvement. Therefore, these instruments are particularly relevant in settings where student well-being and learning experience are critical (AlMekkawi et al., 2020).

Additionally, instruments such as the Mentoring Effectiveness Scale and the Mentor Competency Instrument (MCI) are particularly useful in situations where the mentor-mentee relationship is critical, such as in residency programs or long-term clinical placements. These instruments are designed to assess relational elements of preceptorship, such as emotional trust building, and interpersonal support, communication (Oikarainen et al., 2022). They are appropriate for long-term research or evaluation in settings where preceptors are in an ongoing mentoring role. In situations such as public health rotations or specialty clinical residencies, these instruments are particularly useful (Kung et al., 2023).

All things considered, each instrument's contextual appropriateness emphasizes how crucial it is to choose one that meets the various requirements and objectives of every educational or therapeutic situation. Because of the wide range of applications and breadth, there is no one-sizefits-all method for evaluating preceptor competency. A variety of situation-specific instruments are frequently needed for an effective assessment.

### Discussion

The results of this study provide important light on the application associated with tools used to assess nursing clinical preceptor competency. The study found at least 13 instruments. Each of the instruments used to assess clinical preceptor competency has unique advantages and disadvantages that are mostly determined by their scope, design, and intended use.

The Clinical Teaching Competence Inventory (CTCI) and the Clinical Educators' Competence Questionnaire (CEC-Q) are examples of broad instruments that are useful for general assessments of clinical teaching quality because they cover a wide range of competency domains, such as communication, clinical knowledge, and feedback skills (Kaarlela et al., 2022). They could not have the depth necessary for certain competencies, including initial orientation skills or core clinical knowledge, which are crucial in early-stage or specialized preceptorships, therefore their breadth could be a drawback when more focused assessment is required (AlMekkawi et al., 2020).

Clinical Core Competency The of Preceptors (CCCP) and the Preceptors Orientation Competence Instrument (POCI) are particularly helpful for evaluating orientation procedures or core clinical competencies because of their depth within more specific categories (Chen et al., 2021). Although these instruments offer detailed assessments for particular skill sets, their limited scope prevents them from providing a complete picture of a preceptor's overall competency, frequently necessitating the use of additional instruments for more thorough evaluations. By assessing teaching efficacy from the viewpoint of students, instruments that gather student input, such as the Nursing Clinical Teacher Efficacy Inventory (NCTEI) and the Maastricht Clinical Teaching Questionnaire (MCTQ), offer a useful perspective (Rodino & Wolcott, 2019). These findings, however, may be arbitrary and may not accurately reflect the interpersonal or technical abilities required of preceptors outside of student engagement settings.

Furthermore, instruments that evaluate relational skills and mentorship efficacy, such as the Mentors' Competence Instrument (MCI) and the Mentorship Effectiveness Scale, are especially trustworthy for long-term assessments in contexts where interpersonal communication and emotional

support are crucial (Alhassan et al., 2024). Although crucial, their emphasis on mentormentee relationships may restrict their usefulness in situations where clinical and technical abilities are given equal weight. The advantages and disadvantages of each instrument show how important it is to carefully choose and sometimes combine different instruments to adequately capture the variety of skills needed by clinical preceptors (Griffiths et al., 2021).

The results of this systematic study have important ramifications for management procedures in healthcare settings as well as clinical education. Given the wide variety of techniques available for assessing preceptor competency, institutions educational and healthcare organizations may improve their training initiatives by choosing the best instruments for their particular requirements (Bartlett et al., 2020). For example, educational institutions can evaluate the overall efficacy of their preceptorship programs by using comprehensive instruments like the Clinical Educators' Competence Questionnaire (CEC-Q), which can pinpoint areas where faculty may need further assistance or training. The creation of focused seminars or professional development opportunities geared at enhancing clinical supervision and teaching abilities might be guided by the results of this thorough examination (Wu et al., 2020).

In addition, instruments that emphasize student input, like the Nursing Clinical Teacher Effectiveness Inventory (NCTEI), offer insightful information on the learning outcomes and student experience, empowering teachers to modify their curricula and instructional strategies accordingly (AlMekkawi et al., 2020). Institutions may foster a more responsive and stimulating learning environment, which will eventually improve student success and happiness, by proactively integrating student input into program evaluations. From a management perspective, knowing the competencies needed for а successful preceptorship can help direct hiring and training procedures, guaranteeing that preceptors have the abilities needed to effectively assist students' development (Aithal, 2023).

Furthermore, the results highlight how crucial it is to create a mentoring culture in clinical settings where preceptors are assisted in honing their mentoring abilities in addition to being assessed on their teaching abilities (van der Goes et al., 2022). Because well-trained preceptors can produce more prepared nursing graduates with both technical skills and critical thinking abilities, this all-encompassing approach to preceptorship can result in better patient care results (Lestari et al., 2021). In the end, healthcare organizations may improve the quality of their educational programs, assist their mentors' professional development, and increase the overall nursing student learning experience by utilizing the insights gathered from these instruments.

### CONCLUSION

A wide variety of instruments for assessing nursing clinical preceptor competency were found in this systematic study, each with unique advantages and disadvantages. Some instruments concentrate on particular skills, like orientation or student feedback, while others provide thorough evaluations across several categories. Choosing the right methods according to the assessment's goals and circumstances is essential to getting a comprehensive picture of effectiveness. These instruments' preceptor disparate psychometric qualities suggest that additional validation and standardization are required to improve their dependability in various healthcare contexts. In the end, these results can help guide instructional strategies, enhance the caliber of clinical mentoring, and enhance nurse education and patient care results. Future studies should concentrate on creating instruments that fill in the current gaps in the assessment of preceptor competency.

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