University of Virginia Health System Nursing Professional Development Services Preceptor Essentials Program Critical Thinking in Nursing

What can a Preceptor do to Enhance Critical Thinking?

- Encourage questions or ask what others might ask (e.g., "What will other professions expect you to know?" or "What will the doctor want to know?"). *Rationale*. This helps identify a wider scope of questions to be answered to gain relevant information.
- Ask then to discuss "why?" (determine underlying reasons). *Rationale*. To fully understand something, you must know *what* it is and *why* it's so. There's a saying, "S/he who knows what and how is likely to get a good job. S/he who knows why, is likely to be her boss."
- Encourage "what else" questions. For example, change "Have I done everything?" to "What else do I have to do?" *Rationale*. "What else" questions push you to look further and be more complete.
- Ask "what if" questions and encourage your new hire to ask "what if" like, "What if the worst happens?" or "What if we try…?" *Rationale*. This helps a new hire to be proactive, instead of reactive. It enhances creativity and situational perspective.
- Teach the person to paraphrase (ask them to put it in their own words). Rationale. Helps the person to understand the information using their own language and encode in the brain.
- Compare and contrast. Rationale. This forces new employee to look closely at the parts of something as well as the whole and become more familiar with both things you're comparing. For example: If I asked you to compare two different kinds of wounds (tubes, IV lines, drains, etc.), you'd have to look closely at both of them. As a result of comparing them, you'd also be more likely to know and *remember* each type.

Help them organize and reorganize information. *Rationale.* Organizing information helps in the recall of patterns, but it may make you *miss* others; reorganizing information helps individual see *other* patterns. For example printing patients hourly list of medication due for the group vs grouping medication for one patient at a time.

- Encourage them to look for flaws in thinking. Become a detective! Ask questions like, "What's missing?" and "How could this be made better?" "Am I thinking of everything" *Rationale*. If you don't go looking for flaws, you'll be unlikely to find them. Once you've found them, you can make corrections early and avoid negative outcomes.
- Encourage the new hire to ask someone else to look for flaws in your thinking. Rationale. This offers a "fresh eye" for evaluation, encourages peer review, introduces them to a University education culture and brings new ideas and perspectives.
- Discuss how they can develop "good habits of inquiry" (habits that aid in the search for the truth, such as keeping an open mind, verifying information, and taking enough time). *Rationale*. Forming good habits helps make critical thinking more automatic.
- Help them learn to revisit information. Rationale. When you come back and look at something after a period of time, you'll be likely to view it differently: The passage of time not only helps you be more objective, but also you'll be likely to bring new knowledge you've gained to assessing the situation. This situation also applies when the new graduate is experiences "Reality Shock" when they are not sure about their ability, their choice of working environments or their decision to become a nurse.
- Teach then to replace the phrases "I don't know" or "I'm not sure" with "I need to find out." *Rationale.* This demonstrates you have the confidence and ability to find answers and mobilizes you to

locate resources. Preceptors should model this behavior and help them understand that a University is a learning environment.

- Demonstrate the quality process of turning errors into learning opportunities. Rationale. We all make mistakes—they're stepping stones to maturity and new ideas.
- Share your mistakes with a new person—they're VALUABLE. Rationale. Sharing your mistakes helps others avoid making the same mistake, and may identify a common misconception or problem that needs to be rectified.

ADAPTED FROM:

Alfaro-LeFevre, R., (2004), Critical thinking and clinical judgment: a practical approach (3rd ed.); St. Louis: Saunders.