The One Minute Clinical Instructor: An Application of the Principles of the One Minute Manager

Introduction
The simplicity and common sense of the One Minute Manager (Blanchard & Johnson, 1982) are impressive. The main ideas are familiar to nursing education, which continuously employs objectives (goals), positive feedback (praise), and negative feedback (reprimands). Because of the similarities between the organizational and the clinical experience goals, the principles might be applied in the clinical instruction of nursing students. After studying the book, I planned how those principles and practices might be incorporated in the exercise of my role as clinical instructor.

Clinical instructors should be effective managers. "Effective managers manage themselves and the people they work with so that both the organization (health-care delivery system) and the people (individual students) profit from their (instructor's) presence" (Blanchard & Johnson, 1982, p.15). With effective management, the patients receive better care and the students feel better about being there, learning, and giving that care. Students must win: the success of our educational programs depends on it. As clinical instructors, our interests lie in both results and people: effective patient care given by proficient and satisfied student nurses.

The One Minute Manager
The One Minute Manager portends to teach "the quickest way to increase productivity, profits, job satisfaction, and personal prosperity" (Blanchard & Johnson, 1982, jacket). The book is aimed at managers, and its methods have been acclaimed by business leaders. The philosophy of the One Minute Manager is based on the idea that people will be more productive if they know what is expected of them and if they receive feedback on their efforts. The key elements of the One Minute Manager are one minute goal setting, one minute praising, and one minute reprimands.

One Minute Goal Setting. One minute goal setting is the first stage of a new responsibility or task. During this step, the manager makes clear the responsibilities for which the employee will be held accountable. When employees are oriented to and made constantly aware of their goals, they do not have to guess what they are to do, nor do they forget their daily tasks. Because "80% of your really important results come from 20% of your goals" (Blanchard & Johnson, 1982, p.28), the employees set daily goals for key areas of responsibility, and briefly record their goals and performance standards. This information is shared with the manager, who, if he or she agrees with the employees, keep a copy of these goals. During the day, both the manager and employees check their copies to see if the employees' performance matches the stated goals.

One Minute Praising. Based on the theory that "people who feel good about themselves produce good results" (Blanchard & Johnson, 1982, p.19), the One Minute Manager invests time and effort to "catch them (the employees) doing something right." The manager makes clear exactly what the individual employees are doing right and encourages them to continue that standard of performance and keep detailed records of progress.

One Minute Reprimand. When an employee does not perform as expected, the manager tells him the specific behavior that was unacceptable. After letting the message sink in, the manager reminds the employee of how much he is valued and that the manager thinks well of him, but not his performance. Finally, once the reprimand is over, it is over.

Application
Schools of nursing are fortunate to have admission criteria for obtaining natural winners, students who rapidly develop the knowledge and skills essential to the nursing profession. Other students are potential winners. Although some may be dis-
guised as losers, through guidance, many such students have been unmasked to reveal some of the profession's finest nurses. The nursing educator who uses the principles of the One Minute Manager on the clinical unit is called the one minute clinical instructor. The one minute clinical instructor promotes the development of winners. The key elements used are the same: goal setting, praising, and reprimands.

Goal Setting. It takes more than a minute to set the ground work for the effective practice of the one minute clinical instructor. Requiring hours, the first step in the goal setting process is participating in an orientation. This orientation educates the students to the objectives established by the faculty for the students' education. As each objective is explained, the evaluation tool is distributed, and standards of behavior are given. The students are also encouraged to enumerate outcome behaviors desired from taking the course. If agreed to by the instructor, these objectives are written and distributed and are considered as important, but not more so, than the course objectives.

Since the one minute clinical instructor does not assume that all students know what will be expected of them, she initially provides concrete direction concerning matters for which the students will be held accountable. She gives them written and verbal guidelines for preparation, suggestions for organizing time and activities, and an introduction to how they will be managed through one minute goal setting, praising, and reprimands.

Each week thereafter, the students write specific goals for their practice. For many students, it is their first experience in actually using goals to direct their efforts. Using behavioral terms, the students write cognitive, practice, and patients' goals. These briefly stated goals are written daily and are confirmed or redirected by the instructor during the pre-conference or soon after. The goals are referred to periodically and are checked when accomplished. Goals may be revised according to the situation, but not without confirmation by the instructor. This restriction ensures that students will aim toward accomplishing their goals and will not simply write goals to reflect their outcome performance.

Although the goal of the one minute clinical instructor is not to spend a minimal amount of time supervising the students, it may be an outcome realized near the end of each semester. That is, when the students learn what is expected of them and can effectively evaluate their own behavior, they require progressively less supervision, and the instructor has time to concentrate on enhancing the students' experiences. To arrive at the point where less supervision is required, students must reach a certain degree of proficiency and self-confidence. Moreover, those qualities are fostered by the initial investment of guidance and reinforcement.

Praising. The second secret of the one minute clinical instructor is one minute praising—catch the student doing something right. Students do many things right: they may ask good questions, support their patients, perform procedures or take histories well, identify pertinent nursing diagnoses, or astutely select priorities. The one minute instructor sees those behaviors and tells the students individually what was done well and how the instructor feels about the student's success. The instructor affirms the benefit of those behaviors to the patient and reminds the student to "keep up the good work."

A major focus for the one minute clinical instructor is praise: make an equal effort to give positive reinforcement as is usually given to negative reinforcement. Praising helps students learn what is judged to be effective nursing behavior and helps them gain confidence in their own abilities. Honest, simply-stated praise, generously given early in the semester, bolsters the students' self-confidence so that if negative criticism is eventually necessary, students are better able to handle it. Additionally, they will require progressively less external feedback when they have accomplished something praiseworthy. As the semester progresses, the students are periodically asked to tell the instructor something they have done well, for example, something only a skilled professional could do or simply something of which they were proud. This self-evaluative behavior helps the students feel good about themselves while developing professionally.

Reprimanding. What happens when a student fails to meet the standards required? On this occasion, two things must happen: the behavior must be corrected and the student supported, in that order. When the student does not perform at the desired level, the instructor takes him aside for a one minute reprimand, specifying exactly what was done wrong (for example, inadequate preparation) and how the instructor feels about the behavior. Remaining silent for a short period, the instructor then touches the student, tells him how competent he generally is and how they are respected; that the behavior displayed is not consistent with the student's usual attempts to give the best care possible to his patients. The instructor concludes with the acknowledgment that the student is a valuable person and has a great deal to offer. The reprimand is then over. Although the incident is recorded on that week's evaluation sheet, further discussion about this performance is unnecessarily unless it is repeated.

Unlike most methods of reprimanding, the one minute clinical instructor does not begin by making positive statements about the student. Rather, she begins with the reprimand itself because students learn to appreciate that when they are praised, it is an unconditional praise and will not be followed by a "however." Students learn that each reprimand covers one behavior rather than an accumulation of behaviors with the instructor's intensified reaction. Moreover, when reprimands are followed by statements of value, the recipients feel they have been treated fairly and tend to remember the message rather than the process; consequently, they are more willing to accept the criticism and change their behavior.

Conclusion

Two years ago, I began using the methods of the One Minute Manager in my practice as clinical instructor. Although my application is constantly being refined, I am pleased with the results. Students are more goal-oriented; hence, they are more successful in attaining significant goals. They are more aware of their strengths, and they acknowledge that they have received feedback. They appreciate the minimal stress level and feel they grow professionally. With this method, responses can be more consistent with behavior. Moreover, I feel comfortable with my performance, continuing to be positive while vigorously promoting the attainment of higher standards for the students' performances.

Instructors using similar modalities need to make only slight modifications to become a one minute clinical instructor. This application of the highly acclaimed business management technique will foster an atmosphere in which both students and instructors become winners.

Reference
