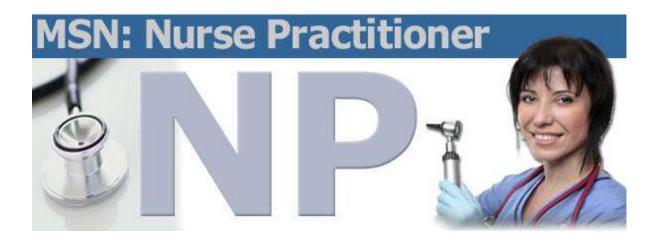
Preceptor Guide UTC School of Nursing Nurse Practitioner Concentration



On behalf of the University of Tennessee (UTC) School of Nursing (SON), we would like to thank you for agreeing to serve as a preceptor for our Nurse Practitioner (NP) students. The NP curriculum at the UTC SON prepares students to obtain the knowledge and integrate the skills that they need to become advanced practice registered nurses who deliver quality health care to individuals across the lifespan. Expertise acquired through education and clinical practice permits the NP students to engage in family and patient centered care by obtaining detailed comprehensive and focused histories, performing physical exams, diagnosing and managing acute and chronic illnesses, providing health promotion interventions, making referrals to appropriate community resources, and evaluating care for a population.

This guide is intended to give direction to the preceptor serving as a supervisor, teacher, and mentor for our NP students. This guide includes:

- 1. Our mission, vision, core values, and MSN graduate program outcomes
- 2. The purpose of preceptorship
- 3. Preceptor qualifications and responsibilities
- 4. Preceptor/agency expectations
- 5. Ongoing practice parameters
- 6. How preceptors can reach faculty
- 7. Expectations of NP students
- 8. Objectives for clinical practice
- 9. Preceptor and faculty evaluation of students and the SON forms
- 10. Student evaluation of preceptors and clinical sites
- 11. Overview of teaching strategies with an emphasis on principles of adult learning

Preceptors are an extremely important part of any advanced practice nursing program. While the SON NP faculty are ultimately responsible for the NP student, preceptors are an instrumental part of the education of the NP student. Preceptors offer clinical experiences that are an integral component of NP education.

According to the Commission on Collegiate Nursing Education (CCNE) guidelines for accreditation and UTC graduate policies, the UTC SON supports the development of nurse practitioners in collaboration with faculty, external preceptors, and agencies. To meet UTC NP program goals, students need an appropriate range of clinical experiences. The program uses a variety of clinicians to provide *direct clinical teaching* for students. Over the course of the program, the students should have a majority of their clinical experiences with preceptors from the same *population-focused* area of practice as the degree they pursue.

Again, thank you for your assistance in educating future nurse practitioners.

Sincerely,

Amber Roache' DNP, FNP-BC

Nurse Practitioner Program Coordinator School of Nursing – Department 1051 College of Health, Education, & Professional Studies 615 McCallie Avenue Chattanooga, TN 37403-2598 Phone: (423) 425-4661 Fax: (423) 425-4668

1. UTC School of Nursing (SON) Vision, Mission, Core Values, and Master of Science in Nursing Graduate Program Outcomes

SON Mission

UTC School of Nursing is a dynamic force in providing quality nursing education and excellence by actively engaging students, faculty and staff through respectful partnerships; fostering integrity; embracing diversity and inclusion; inspiring positive change and providing nursing leadership for the future of person-centered healthcare.

SON Vision

The UTC School of Nursing aspires to be the leader in transforming nursing education and promoting health by engaging students, faculty and graduates in advancing health for all people.

SON Core Values

The School of Nursing Faculty, Staff and Students value:

- Quality and excellence in education, practice and research.
- Life-long learning, inquiry, critical thinking, clinical reasoning and scholarship.
- Behaving ethically and with integrity.
- Civility and respect for all.
- Diversity and inclusion.
- Advocacy and leadership.
- Embracing creativity, technology and innovation.

Graduate Program Outcomes Based on the American Association of Colleges of Nursing's Essentials of Master's Education in Nursing (2011)

Upon successful completion of the Master of Science in Nursing (MSN), the graduate:

1) Synthesizes concepts and theories from nursing and related sciences into the delivery of advanced nursing care to diverse groups. (Essential I, Essential IX)

2) Understands how healthcare delivery systems are organized and financed, the impact of healthcare delivery systems on patient care, and identify economic, legal, and political factors that influence healthcare. (Essential II, Essential VI)

3) Promotes a professional environment that includes accountability, high-level communication skills, advocacy for patients, and abilities to analyze information regarding quality initiatives for improvement of patient care across nursing and interprofessional teams. (Essential III, Essential VII)

4) Integrates theory, evidence, clinical judgment, research, practice guidelines and translational processes to improve practice and patient outcomes. (Essential I, Essential IV, Essential V, Essential VIII)

5) Examines impact of national and state policy, legal, and regulatory processes on nursing practice and population or patient health outcomes. (Essential VI)

6) Advocates for the value and role of the profession nurse while employing collaborative strategies in the design, coordination, and evaluation of patient-centered care. (Essential VII)

7) Synthesizes social determinants of health and research data to design and deliver evidence-based, culturally relevant clinical interventions and strategies. (Essential III, Essential IV, Essential VIII, Essential IX)

8) Incorporates the best available evidence from nursing and related sciences to build a foundation for practice. (Essential I, Essential IV, Essential IX)

9) Includes core scientific and ethical principles in identifying potential and actual ethical issues arising from practice to assist patients and members of the health care team to address these issues. (Essential II, Essential VI, Essential VII)

For Advanced Practice Registered Nurse MSN:

10) Demonstrates the ability to assess, diagnose, plan, intervene, evaluate, and revise patient care to positively impact health outcomes using advanced knowledge in health assessment, pharmacology, pathophysiology, cultural competency, organizations and systems theories, communication, healthcare policy, advocacy, and inter-professional practice. (Essential I, Essential VIII, Essential IX)

2. Purpose of Preceptorship

The Purpose of Preceptorship is Threefold:

- 1. Integrate the student into the role of the nurse practitioner.
- 2. Assist the student in applying didactic concepts and theory into practice.
- 3. Assist the student in achieving skills, competence, and expertise.

3. Preceptor's Qualifications and Responsibilities

Required Preceptor Documentation

- 1. Current copy of the appropriate clinician license.
- 2. Copy of the preceptor's board or specialty certification.
- 3. Name of educational program with date of graduation and degree conferred.
- 4. Current CV (within the past 2 years).

Preceptor Requirements

- 1. Practices in an agency that has sufficient client volume in the specified specialty to meet course objectives.
- 2. Allows the student to practice more slowly than expected of an agency-employed practitioner.
- 3. Allows the student to independently conduct history and physical exams and complete other assessments with appropriate oversight.
- 4. Allows students to present the patient case to include diagnoses, plans for treatment, and patient management.
- 5. Willing to critique verbal case presentations.
- 6. Cosigns each chart upon completion of documentation for which the student has developed a plan of care.
- 7. Functions as a teacher/mentor in facilitating student learning.

8. Informs the faculty of student performance at specified points during the clinical practicum and as needed.

The preceptor serves as a role model and should provide adequate opportunities for practice and is ultimately responsible for each encounter. The preceptor provides support, encouragement, and professional feedback in difficult and complex situations. It is the preceptor's responsibility to determine what type of patient and the number of patients seen each time the student is in the clinic. The patients should increase in complexity as the semester progresses.

The School of Nursing utilizes a direct supervision model. The preceptor must maintain a 1/1 student/preceptor ratio at all times. When faculty have students with them in clinical practice, they also maintain a 1/1 ratio. If for any reason, the preceptor will not be on site, the student may not see patients.

The preceptor will complete a midterm and final evaluation for the student that includes the preceptor's assessment of the student's effort, knowledge, and abilities. Please note that it will take time for all students to become consistently self- directed in meeting goals. Please feel free to contact UTC nursing faculty if you have questions or feel that the student is not progressing in the role development as expected.

- The preceptor should review each patient's chart of student encounters.
- The preceptor should review and sign the student's time log.
- The preceptor should collaborate with the student and professor in an ongoing evaluation of the student's needs and clinical experiences.

There are two student evaluations: *a midterm evaluation* completed at the half-way point in the practicum and a *final evaluation* completed at the end of the clinical practicum. In addition, a *midterm* and *final evaluation* will be completed by the student's faculty. These evaluations are graded as "Satisfactory" or "No Credit." A student must receive a satisfactory evaluation on all in order to progress in the program. Please use the *midterm evaluation* to determine practice areas where the student demonstrates competence and areas where the student needs further development to successfully complete the practicum.

The student should provide the preceptor with a copy of the syllabus for the current clinical course. Please review these objectives and discuss them with the student. The successful student should achieve these objectives by the conclusion of the semester.

Student Evaluation and the SON Evaluation Forms: The faculty for the clinical course will be making visits to the site to evaluate the student's progress and to answer any questions the preceptor may have. However, the student's progression will be based upon the evaluations from the primary preceptor. This standardized evaluation tool is based on the National Organization of Nurse Practitioner Faculties (NONPF) *Domains and Competencies*. If a behavior does not apply on the evaluation form, please mark "NA" next to it. Not all of the behaviors will be experienced by every student. Also, please

understand that the NP student should not be working independently the first clinical day. It is expected that, by the final practicum, the student is working independently on all levels. With this in mind, we ask that the student be evaluated based on effort, progress, and willingness to learn, in addition to the competencies on the evaluation forms.

4. Ongoing Practicum Parameters

In order to provide a good experience for both the student and the preceptor, the SON requires the following:

- Evaluations of the preceptor and facility completed by the students each semester and include student's perception of supervision, role modeling, and interpersonal skills of the preceptor.
- The preceptor will submit an evaluation of the student's progress at midterm and at the end of the semester to the clinical faculty.

Updates to the program based on evaluations from students, preceptors/agencies, the CCNE, the NONPF, the UTC Graduate School, and the SON Graduate Committee will be addressed as necessary. Preceptors will be informed of any needed updates when they occur.

5. How Preceptors Can Reach Program Staff or Faculty

Please feel free to contact the School of Nursing at (423) 425-4644 for any questions or concerns. In addition, the clinical faculty for the practicum will provide their contact information. The student has access to all of these numbers.

6. Expectations of NP Students

As each semester is completed, the student should be more adept at taking a patient's history, conducting a physical assessment, identifying differential diagnoses, developing problem lists, identifying needed labs and diagnostic testing, interpreting results, and developing a plan of care. Additionally, the student should be achieving these tasks in light of the NONPF *Domains and Competencies* and the American Academy of Nurse Practitioners *Standards of Practice for Nurse Practitioners*. The student should be seeing increasingly complex patients as the semester progresses.

A schedule of clinical days needs to be agreed upon by both the student and the preceptor. The student is expected to communicate with the preceptor regarding the time he/she will be in the clinical site. If the student must be absent, he/she is expected to inform the preceptor and the faculty member as soon as possible. If the student does not do this, the preceptor needs to inform the faculty member who will address the issue with the student. The student is expected to maintain the confidentiality related to the agency, client, and SON. Any breach in confidentiality is grounds for disciplinary action by the agency and/or the SON.

Students are expected to dress professionally in appropriate clinical attire. The dress code policy is available here: https://www.utc.edu/nursing/pdfs/msn_fnp_policies.pdf. All tattoos should be covered.

Student Evaluation of the Preceptor and the Clinical Site: Evaluations for the preceptor and the clinical agency will be completed by the student. Interpersonal skills, the ability to serve as a role model, and quality of supervision are important precepting components that contribute to a successful

student/preceptor relationship. In addition, the NONPF *Domains and Competencies* are the basis for the evaluation of the preceptor. The clinical site should provide the student with a variety of experiences.

Student Time and Case Logs: The student is responsible for a specified number of clinical hours with the preceptor. The number of patients seen by the student and the role of the student in the encounter should be reflected on the log. Students are responsible for keeping time logs in the Typhon Group database. From Typhon, the student will print a spreadsheet of the number of hours completed for the preceptor to sign at midterm and again at the completion of total hours. Students are also responsible for recording a minimum number of case logs each semester. The case log includes the preceptor, clinical site, patient demographics (age, race, gender), insurance type (no identifiable patient information), time with patient, consult time with preceptor, type of decision making, level of student participation, reason for visit, chief complaint, type of history, procedure or skills and student level of involvement, ICD-10 Diagnosis Codes, CPT Billing Codes, Medications, and student notes. Preceptors may review case log details and other student work as desired/needed.

7. Documentation of Precepting Students

Upon completion of the clinical course, all preceptors will receive a letter via email from the SON that documents the hours spent with the student. This can serve as a record for credit with the preceptor's certifying body. It is important that the SON has an accurate email address for each preceptor to ensure that all preceptors get appropriate documentation for their effort.

8. Overview of Teaching Strategies with an Emphasis on Principles of Adult Learning

Personal learning needs and styles are important factors in the student's academic success. In order for learning to occur in the adult, there must be opportunities for them to be active learners. The student must gain knowledge, rather than merely memorizing the faculty/preceptor's knowledge through lectures or reading textbooks.

Andragogy, Knowles' theory of adult learning, suggests that successful adult learners are independent and self-directed, use prior experiences as resources, orient both formal and informal learning around social and work roles, and feel that learning is based on performance rather than a particular subject. The transformative learning theory suggests that adults need autonomy, participation, and collaboration. Additionally, feedback, assessment, and experiential learning is required (Cyr, 1999). The self-directed learning theory states that students plan, carry out, and evaluate their own learning (Wilson, 2003). No matter which theory, the noticeable difference in adult learners is the active role he/she takes in education. Therefore, the teacher needs to serve as a facilitator for the student to be successful.

On behalf of the UTC School of Nursing and Nurse Practitioner Concentration, we thank you for taking your extremely valuable time to precept our students. Our students are better because of the time that you have spent shaping them into capable and responsible advanced practice registered nurses.

Appendix 1:

Student Evaluation of Clinical Site

| Student's Name: | Precepto | r: | | | | | |
|---|---|----------------------------|---|---|---|---|---|
| Clinical Site: | Date: | Course: | | | | | |
| 5=Strongly agree, 4=Agre disagree | ee, 3=Neither Agree or Disagr | ee, 2=Disagree, 1=Strongly | 5 | 4 | 3 | 2 | 1 |
| This clinical site provi an advanced practice | ded adequate practice op nurse | portunities for growth as | | | | | |
| This clinical site has r | esources to support a stu | ident practicum. | | | | | |
| materials, and person practice nursing. | procedure and protocol m nel to adequately suppor | t a student in advanced | | | | | |
| | or, preceptor (circle one) se of study for which this | | | | | | |
| The clinical site perso | onnel were supportive of r | ny role as an NP student. | | | | | |
| Clients are variable in | age, diagnoses, and eth | nicity. | | | | | |
| | s are readily accessible. | | | | | | |
| The philosophy of the personnel was directed toward quality care, health promotion, and disease prevention. | | | | | | | |
| Opportunities were readily available for my participation in management of care for patients. | | | | | | | |
| My overall evaluation | nis clinical site to my peer of this clinical practicum Fair=3, Poor=2, Would not | | | | | | |
| Please feel free to sh | are any comments about | this course: | | | | | |

Appendix 2:

Student Evaluation of Preceptor

| Evaluation of FNP Preceptor N 559r UTC School of Nursing | 1 | | | 1 1 | |
|--|-----------|------|------|----------|------|
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| | | | - · | | |
| Preceptor's Name | Excellent | Good | Fair | Marginal | Poor |
| Relationships | 5 | 4 | 3 | 2 | 1 |
| Establishes rapport with and maintains therapeutic partnership with clients | | | | | |
| 2. Identifies clients' strengths and weaknesses. | | | | | |
| Cognizant of age, cultural, gender, and professional differences in providing care | | | | | |
| Cognizant of and maintains human dignity. | | | | | |
| 5. Identifies concerns of client. | | | | | |
| 6. Provides necessary information and partners with clients in decision making. | | | | | |
| 7. Interested in students as professional colleagues. | | | | | |
| 8. Provides adequate opportunities for students to determine diagnoses, make decisions, and develop | | | | | |
| plans of care. | | | | | |
| 9. Provides timely and accurate feedback to students at scheduled intervals. | | | | | |
| Professional Role | | | | | |
| 1. Demonstrates the roles of researcher, educator, health care provider, patient advocate, leader, | | | | | |
| consultant, collaborator, manager, and change agent. | | | | | |
| 2. Identifies need of clients across the life span from diverse cultures. | | | | | |
| Provides anticipatory guidance as a part of information giving. | | | | | |
| 4. Engages in health promotion and disease prevention services based on culture, risk, age, and | | | | | |
| development. | | | | | |
| 5. Provides appropriate primary care services. | | | | | |
| 6. Utilizes collaborative and consultative approaches to management of client illness. | | | | | |
| Develops plan of care which includes ongoing assessment, appropriate diagnostic tests, treatments, pharmacological and alternative therapies, and evaluation plan. | | | | | |
| Teaching Coaching | | | | | |
| 1. Determines clients' level of comprehension, readiness for learning, and barriers to learning taking into | | | | | |
| consideration developmental, age, gender, and cultural differences. | | | | | |
| Ascertains clients' perceived barriers, supports, and willingness to promote health. | | | | | |
| Partners with clients in setting goals, evaluating progress, and making changes. | | | | | |
| Modifies teaching strategies to complement clients' abilities, culture, age, understanding, and development. | | | | | |
| Quality Health Care Practice | | | | | |
| 1. Exercises ethical, accountable behaviors. | | | | | |
| 2. Updates self through continuing education, self-evaluation. | | | | | |
| 3. Maintains license and certification(s). | | | | | |
| | | | | | |
| 4. Documents within legal, professional, and ethical boundaries. | | | | | |
| Cultural Competence, Spirituality | | | | | |
| Shows respect for the inherent dignity of every client, whatever their age, gender, religion, socioeconomic class, and ethnic or cultural group. | | | | | |
| 2. Accepts the clients' rights to choose their care provider, participate in their care, and refuse care. | | | | | |
| Uses knowledge of the client's cultural preferences to plan care. | | | | | |
| Respects the inherent worth and dignity of each person and the right to express spiritual beliefs as part of his/her humanity. | | | | | |
| 5. Assists clients and families to meet their spiritual needs in the context of health and illness experiences, | | | | | |
| including referral for pastoral services. | | | | | |

Appendix 3:

| Clinical Evaluation of FNP | Student UTC School of Nursing | 2 | | | | |
|---|---|--|--|---|---|---|
| Student's Name | Date | | | | | |
| Preceptor's Name | Course NURS | | | 8 | | |
| Please evaluate the student evaluation. If you check "conside review this form with the stud envelope. If you would like to spea | gy you took to be a preceptor. Your fer on the following competencies by che rable guidance needed" or "does not lent and have the student return it to c ak with a clinical faculty member perso outc.edu; 423-425-4661). This form sh semester. | cking the a meet goals linical facu nally, plea | ppropriat " please p lty. Or, yo se don't h | e box. See provide writ ou can retur nesitate to c | legend at e ten commer n via email contact Amb | nd of the hts. You may or sealed er Roache via |
| Midterm: a score of > 50 is considered sati Final: a score of > 60 is considered satisfa Indicate: Midterm Final | | Consistently self directed * | Moderate guidance * | Considerable guidance needed * | Does not meet goals * | Comments |
| Health Promotion & Disease Prevention, III Obtains a comprehensive and/or problem focused I population foci | iness and Wellness Management health history and physical exam for the appropriate | 3 | 2 | 1 | 0 | |
| Incorporates current evidence-based practice and r Immunizations. Offering appropriate reminders and | | | | | | |
| Differentiates between normal, variations of normal Orders, may perform, and interprets common scree | | | | 2 | | |
| | ons while attending to the patient's and/or care giver's | 3 | | | | |
| Possess current and adequate knowledge regardin Information as needed to patients and/or care giver | | | | | | |
| Formulates a problem list | | | | | 1 1 | |
| Prioritizes problems and intervenes appropriately in | cluding initiation of effective emergent care | 2 | | a i | 8 8 | |
| Demonstrates knowledge of the anatomy and physi specifics of growth and development as indicated | lology of the patient in wellness and liness, applying the | | | | | |
| Formulates a disease management and/or treatment standards of care and practice guidelines | nt plan based on scientific rationale, evidence-based | | | | A. 68. | |
| Provides anticipatory guidance and counseling to p disability in health | romote health, reduce risk factors, prevent disease and | | | | | |
| Evaluates and/or integrates appropriate non-pharm into a treatment plan | acologic interventions and health promotion modalities | | | | - | |
| Nurse Practitioner-Patient Relationship | | | | | | |
| Evaluates the impact of life transitions on the health liness on patients (individuals, families and/or com | viliness status and recognizes the impact of health and munities) | | | 100 C | 1 | |

| Maintains confidentiality while communicating data, plans, and results in a manner that preserves the | 25 | | 2 |
|--|----------|------------|------------|
| dignity and privacy of patients and provides a legal record of care Assesses the on-going and changing needs of the patient for education based on: a) anticipatory guidance | 2 | | - 2 |
| Assesses the on-going and changing needs of the patient for exclanith based on a participation guidance associated with growth and developmental stage; b) care management that requires specific information or skills; c) patient's and care given's understanding of his/her health condition | | | |
| Teaching-Coaching Function | | 1 J 1 J | -1 |
| Assesses, creates and evaluates an individualized health education plan in collaboration with the patient and or care giver | | | |
| Coaches the patient and/or care giver for behavioral changes | 8 | 8 | 0 |
| Professional Role | 50 10 | | |
| Delivers safe care | | | |
| Collaborates with other health care providers, private and public entities | 8 | | 1 |
| Acts ethically | | 1 1 | 1 |
| Accepts personal responsibility for professional development, self evaluation, limitations of practice | 8 | de di | <i>о</i> . |
| Receptive to constructive feedback and input regarding clinical abilities and performance | | | 1 |
| Cultural Competencies Shows respect for the Inherent dignity of every human being, whatever their age, gender, religion/spintual beliefs, socioeconomic class, ethnic or cultural group | 1 | | |
| Accesses culturally appropriate resources to deliver care to patients from other cultures | | | _ |
| Skills Pediatrics (If applicable) | | | |
| Pediatric well child physical/exam | | | |
| Dvelopmental screening Accurate measurement/weighing of the patient | | | |
| Skills Women's Health (If applicable) | | | 1 |
| Able to perform a pap smear with minimal guidance and note normal/abnormal findings | | | |
| Able to perform a breast exam and note any abnormal findings | | | ~ |
| Able to perform microscopy and note normal/abnormal findings | | | 3 |
| Comments | <u>a</u> | 8 8 | 8 |
| Identify the major strengths of this student | | 1 1 | |
| | | | |
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| | | | |
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| | | | |

| Identify the areas that the student should focus on for improvement | | | | |
|---|-----------------|-----|--|--|
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| Plan for Improvement | | | | |
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| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Preceptor Signature/Date Stude | nt Signature/Da | ate | | |
| | | | | |
| | | | | |
| | | | | |
| Consistently self-directed: Student is able to complete this competency | | | | |
| from start to finish at least 85% of the time; or, complete 85% of the | | | | |
| competency alone. | | | | |
| | | | | |
| Moderate guidance: Student is able to complete this competency from | | | | |
| start to finish at least 60% of the time; or, complete 60% of the | | | | |
| competency alone. | | | | |
| competency alone. | | | | |
| Considerable guidance: Student is able to complete this competency | | | | |
| | | | | |
| from start to finish at least 45% of the time; or, complete 45% of the | | | | |
| competency alone. | | | | |
| Description of each of the state is always as writing calls is an if an write | | | | |
| Does not meet goals: Student is always requiring collaboration with | | | | |
| preceptor to complete the competency. | | | | |
| | | | | |
| The expectation is that you will review this evaluation with your student. | | | | |
| The expectation is that you will review this evaluation with your student. | | | | |
| If there are any areas of concern that need to be discussed with a | | | | |
| clinical faculty member, please contact | | | | |