

**HANDBOOK FOR THE  
NURSE PRACTITIONER  
STUDENT'S CLINICAL  
EXPERIENCE**

**Research College of Nursing**

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## **PREPARING FOR PRACTICUM**

All students must complete a list of clinical requirements before starting their clinical experiences. For a complete list of Practicum Course Requirements go to [www.ResearchCollege.edu](http://www.ResearchCollege.edu) >>Resources and Forms>>Catalog>>Graduate Academic Policy>>Administrative Requirements for Enrollment and Progression>>Practicum Course Requirements or click on link below.

SHERYL PLEASE PUT LINK TO CATALOG HERE.....

**We recommend that you start this process early in the semester before starting your clinical experience.**

Students **must** hold a current RN license in **both states, MO & KS.**

**NOTE:** Students will not be allowed to register for a Practicum course until ALL clinical requirements are completed. Once clinical requirements are completed and documentation has been provided, students begin the next step of the process.

## **HOW TO CHOOSE A PRECEPTOR**

### **Guide to Clinical Preceptors: AGNP & FNP Track**

The criteria below will assist you in selection of a preceptor.

#### **Preceptor Qualifications:**

1. Must hold a current license to practice in the state where the practicum site is located.
2. Nurse Practitioner preceptors should hold a Master of Science in Nursing from an NLNAC or CCNE accredited institution and have a minimum of 1 year of clinical experience.
3. Nurse Practitioners who are not Master's prepared, but are certified by ANCC or AANP and have a minimum of 2-5 years, may also be considered.
4. Physician preceptors should hold a medical or osteopathic degree from an accredited program and be board certified in his or her specialty area.
5. The Student's immediate supervisor at his or her place of employment may not serve as the student's preceptor.

### **Clinical Site Considerations:**

1. Consider the practice terms of geographical location and case mix (age, diversity in acute, chronic ambulatory and inpatient care, mental health, health screening exams).
2. Observe the practice setting in terms of professional disciplines represented and how they interface. Are there other students at the same location? Are residents working at this location? Review a copy of a Nurse Practitioner position description if available.
3. Note the past/present experience with Nurse Practitioners and the preceptor-candidate's understanding of the Nurse Practitioner role.
4. What has the preceptor-candidate's experience been teaching or functioning as a preceptor for students?
5. How much time would the preceptor-candidate have available for a student on a daily/weekly basis?
6. Would the preceptor-candidate be available for at least one site visit during the course of the preceptorship?
7. Would the preceptor-candidate be willing to review and discuss student's cases and provide verbal and written feedback on the student's performance?
8. Consider the experiences a student could expect to have in the practice that would prepare him or her for practice in the current health care arena (billing, third-party reimbursement, risk management, quality assurance).
9. Would the student be involved in selection of patients/clients according to student need?
10. What opportunities would be available to provide follow-up care to patients/clients?

### **INITIATING THE PRECEPTOR AGREEMENT AND CLINICAL CONTRACT**

It is the **student's** responsibility to identify preceptors and initiate the request to work with a preceptor. If the student identifies a preceptor within a HCA facility, he/she **must** notify a clinical faculty liaison. A **clinical faculty liaison** will communicate with the HCA Practice Manager. The student will contact the Practice Manager only after the site placement has been confirmed by the clinical faculty liaison and the student has been given permission. The student may communicate directly with the preceptor only. Students may identify preceptors by networking via the work environment, professional organizations, or community contacts. All preceptors must possess qualifications described below. The preceptor must complete a Preceptor Agreement (SHERYL, PLEASE ATTACH PRECEPTOR AGREEMENT HERE) and a Site Contract (contract with HCA facilities are already on file) must be established with the College. We

recommend that you initiate the preceptor agreement at least 8 weeks before planning to begin your rotation with the preceptor.

The process of preceptor selection is as follows:

After interviewing the preceptor candidate, you will:

1. Give the **preceptor packet** to your preceptor. This packet is available to you in the graduate student office or electronically on the intranet. The preceptor packet will contain a **Preceptor Agreement** and information about the preceptor role and responsibilities, course objectives and evaluation tool.
2. After verbal agreement is made with a preceptor, contact the Administrative Assistant at Research College of Nursing to verify that a Site Contract exists. If a contract is needed by the College, this can take 6-8 weeks to complete by the Administrative Assistant.
3. Once the Preceptor Agreement is approved, the NP Program Coordinator will review the Preceptor Agreement and approve the preceptor.
4. All students must be given permission to start clinical practice hours by their Clinical Faculty member.

### **NP PRACTICUM REQUIREMENTS**

The following requirements must be met:

1. You must complete 660 total clinical hours.
2. Primary Care Practicum I is 180 hours, Primary Care Practicum II is 180 hours and Independent Care Practicum is 300 hours for the FNP and AGNP tracks. The student will complete a minimum of 180 hours in their program focus in Independent Care Practicum.
3. The Pediatric component (60 hours) is usually done during the Primary Care Practicum II or Independent Care Practicum with faculty permission. **(FNP students only)**
4. The Women's Health component (60 hours) is usually done during Primary Care II or Independent Care Practicum with faculty permission. The Women's Health experience should include, well-woman visits, prenatal and post-partum care, and total woman care. **(FNP & AGNP students)**

5. The Geriatric component (60 hours) is usually done during Primary Care II or Independent Care Practicum with faculty permission. The Geriatric experience should include, but is not limited to long term care facilities, assisted living, and nursing homes. **(AGNP students only)**
6. A student must have 180 hours in their program area in the final semester. **(FNP students – Family Practice and AGNP students – Internal Medicine)**
7. Clinical hours must be spread throughout each semester.
8. It is acceptable to have two clinical sites in a semester (for example: primary care/family practice and urgent care).
9. It is anticipated that the student will see a minimum one to two patient per hour on most days depending on the complexity of the patient.
10. Preceptor should oversee, be involved, and visit with every patient that the student encounters.
11. Any preceptorship time that takes place outside of the primary agency that the preceptor and clinical contract specifies must be observational only and approved by the clinical faculty.
12. No more than 180 hours can be completed in the Emergency Room, Urgent Care, or Retail Clinic (ie. CVS, Walgreens, etc.) during the program. In the ER department setting, the preceptor must be a NP (no physician preceptor in the ER dept.). These settings can be used for a clinical site in either Spring (180 hrs.), Summer (120 hrs.), or Fall (60 hrs. of specialty).
13. Students may complete specialty clinical hours with a specialist or preceptor. The number of hours will be determined by the faculty on an individual basis after taking into account previous clinical experience. This is to ensure a well rounded clinical experience. The maximum time allowed will be 60 hours in the last clinical semester. This site must be approved by the Clinical Faculty member prior to the experience. Radiology and Dermatology are recommended specialties to set up clinical time.
14. Think long term. You may want to use your 60 hours of specialty in the last semester in an area or site where you may want to be employed. Specialty hours are at the discretion of your clinical faculty.
15. For any preceptorship students must complete the paperwork for a site and preceptor contract.
16. For any preceptor that you work with for more than 30 hours, you must complete a Clinical Evaluation.

17. All patient encounters must be entered into NPST. Your clinical faculty will review these patient encounters. Completion of clinical hours will be verified by clinical faculty.
18. Minute Clinic (in some CVS stores) and Walgreens Health Care Clinics only take FNP students.
19. Lunch time is not counted as clinical time.

### **DRESS CODE FOR THE CLINICAL EXPERIENCE**

It is expected that the student will dress in accordance with agency policy. If an agency policy does not exist, the student should wear professional attire suitable for the setting. No jeans, denim, shorts, mini-skirts, leggings or midriff revealing tops. Engagement and wedding bands, watches, and stud earrings are the only jewelry permitted. Jewelry may not be worn in any other parts of the body that is observable to coworkers and patients. Nametags must be worn at all times in the clinical setting or whenever the student is representing Research College of Nursing. For a full review of policies related to dress and appearance, please see The Guide to Student Life.

### **BLOOD BORN PATHOGEN EXPOSURES**

To assure adequate follow-up, nursing students sustaining accidental percutaneous-puncture wound and/or mucous membrane exposure to blood or body fluids shall comply with the following guidelines:

Immediate treatment must be carried out.

- A. Stop the current activity.
- B. Thoroughly clean the wound with soap and water.
- C. Flush mucous membranes with large amount of water.
- D. Report the occurrence immediately to faculty or preceptor so that evaluation of risk and need for treatment can occur promptly.

If a blood or body fluid exposure occurs at RMC or the Brookside campus, RMC will assume the cost of the source blood testing. If baseline or follow up testing is required, students should contact their personal health care provider within 72 hours of the event. The emergency room should be used only when the source patient is known HIV positive or active Hepatitis B as prophylaxis should begin within hours of exposure.

If a blood or body fluid exposure occurs at a facility other than Research Medical Center or the Brookside campus, the student should follow the policy of that agency.

The student is responsible for the cost of all follow up testing and/or treatment.

For a full listing of all policies and procedures, please see the Guide to Student Life.

## **CLINICAL RESPONSIBILITIES**

### **Student Responsibilities**

The student, in consultation with the preceptor and faculty, should progress through the five stages of role performance from dependence to independence in providing care to clients. It is essential that the student experience success in knowing when to treat independently, when to consult, and when to refer.

Specifically the student will:

1. Understand and practice within the scope of advanced nursing practice as regulated by the Nurse Practice Act in the state where clinical experiences will be completed.
2. Communicate with the preceptor/agency prior to starting clinical experience about the need to provide professional documentation (e.g. licensure, resume, proof of immunizations, CPR certification etc).
3. Negotiate goals/objectives for fulfilling the clinical requirements with the preceptor.
4. Provide written documentation of educational and clinical experiences that meet goals and objectives as indicated in the course syllabi and NPST.
5. Maintain a collegial and professional relationship with preceptor and faculty.
6. Provide evidence of self evaluation of clinical performance and the attainment of learning objectives.
7. Assume responsibility for individual learning needs through assessment of own strengths and limitations.
8. Report to preceptor and faculty immediately if unable to meet clinical experience commitment.
9. Communicate to the preceptor and faculty immediately about any problems that may arise during the clinical experience.
10. Participate in the clinical evaluation process via communication with preceptor and faculty.
11. The student must be available for a site visit by their Clinical Faculty during day hours and Monday-Friday. Site visits are not done on weekends.



### **Preceptor Responsibilities**

The preceptor works directly with graduate nursing students and closely with faculty to facilitate the student's clinical experience and achievement of clinical objectives.

Specifically, the preceptor will:

1. Precept the student on a one-to-one clinical basis.
2. Participate in student instruction while serving as an expert, role model, and consultant during clinical experience.
3. Provide student orientation to the facility and introduction to staff.
4. Provide space and room facilities as needed for the student's clinical experience.
5. Provide the student with clinical experiences to meet the course and clinical requirements, objectives, and specific educational expectations.
6. Critique the student's clinical performance including clinical skills and knowledge.
7. Evaluate the student's clinical competency via communication with student, preceptor, and clinical faculty.
8. Notify the College's clinical faculty immediately of any problems arising from the student's performance.
9. Provide feedback to the student about performance and progress on an ongoing basis.
10. Facilitate student experiences through evaluation of clinical experience, participation in quality management of clinical experience, and identification of new learning experiences.

### **Clinical Faculty Responsibilities**

The clinical faculty member, in collaboration with the preceptor, will arrange clinical experiences to optimize the student's personal and professional development.

Specifically, the clinical faculty member will:

1. Identify clinical educational requirements and objectives with the preceptor and student.
2. Orient students and preceptors to the respective roles and responsibilities.

3. Assess the adequacy of space and appropriateness of clients within the preceptor environment to insure adequate student learning experiences and meeting learning objectives.
4. Ensure that appropriate agreements are signed with agencies and preceptors.
5. Respond to problems and concerns of preceptors and students.
6. Communicate periodically with preceptor and student about progress in meeting goals and devise new strategies for attaining goals if needed.
7. Evaluate the student's clinical competency and meeting of clinical learning objectives through scheduled communication with preceptor and in consideration of the written preceptor evaluation.
8. Schedule site visit(s).
9. Evaluate the student's clinical competency via communication with student, preceptor, faculty, and through site visits as indicated.
10. Facilitate the student-preceptor-faculty relationship through continual constructive feedback.

### **EVALUATION PROCESS**

The Clinical Evaluation Tool will be used by preceptors to evaluate the student's performance, by the clinical faculty to evaluate the student's performance during a site visit and by the student to perform a self-evaluation. The Clinical Evaluation Tool is available in the on-line course and in the Preceptor Packet.

At the end of each semester, the student evaluates the course, the faculty and the preceptor. The evaluation instruments are located in the on-line course and titled "Evaluation: Course, Faculty and Agency". This evaluative information is used by the Assessment Committee in the college to evaluate the quality of instruction. Feedback provided by students is meaningful to faculty. Frequently, course changes are made in response to student feedback. It is greatly appreciated.

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