Texas A&M International University College of Nursing and Health Sciences Canseco School of Nursing

> Master of Science in Nursing PRECEPTOR HANDBOOK



Revised May 2017

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Letter of Introduction

To: Graduate Students, Preceptors and Clinical Faculty From: Graduate Faculty, Texas A&M International University, College of Nursing and Health Science

Texas A&M International University and the College of Nursing and Health Sciences (CNHS) welcomes you as part of our nursing education team. As a part of that team, you participate in our commitment to nursing and assist in the education of outstanding clinicians, scholars, health advocates, mentors and leaders who will become instrumental in addressing the health care needs of our community. The preceptor-student relationship provides students with an opportunity to apply theory and skills learned in an educational setting, to the health care practice setting under the guidance of expert professionals.

The handbook contains documents that facilitate and define the expectations of the master students in both the Family Nurse Practitioner (FNP) and the Nursing Administration (NADM) programs. These documents are used by students, faculty, and the preceptor from the healthcare agency (the preceptorship team) during the precepted experience. The Preceptor/Affiliation agreement that is signed by each team member is the contract between the preceptor, the student and the CSON that guides the precepted process during a specific timeframe. Documents to be completed by the team during and after the experience are included and will be explained during the initial team meeting, or as otherwise arranged by the faculty. Other materials, specific to the student or programs, will be provided as needed.

The student bears the primary responsibility to coordinate their learning needs with both preceptor and CSON clinical faculty. It is every student's responsibility to work with the CSON clinical faculty and the preceptor team to create the best experience by negotiating the agreement that matches the course requirements and their learning needs. The CSON clinical faculty or the students, with the approval of the clinical faculty, may identify the preceptor. The agreement must be signed *BEFORE* clinical experiences begin.

It is expected that the student will complete the external practice requirements at the same time as the associated didactic or classroom course is taught. The clinical practicum hours, established by the CNHS as part of the academic course, is to be distributed equally throughout the semester so that the content covered in the didactic course is practiced concurrently in the healthcare setting.

The Preceptor Handbook is reviewed as needed to validate consistency with professional competencies and, for the FNP students, consistency with the standards and regulations from the Texas Board of Nursing.

This handbook contains the skills and competencies to be completed by the student and evaluated by the preceptor during the semester of the practice experience. Students, preceptors, and faculty will use the handbook to monitor achievement of those skills. NADM students will have specific competencies from the AONE Competency Manual that may be validated during the semester if opportunities in management become available (i.e. meeting of a governing board). Where appropriate forms that differ between FNP and NADM students, will be included and titled accordingly. This handbook is specific to each clinical experience and valid for the dates noted on the preceptor agreement form.

A. MISSION OF THE CANSECO SCHOOL OF NURSING

The mission of the Dr. F. M. Canseco School of Nursing is to prepare professional nurses to improve the well-being of complex and diverse populations.

B. TEXAS A&M INTERNATIONAL UNIVERSITY MISSION STATEMENT

Texas A&M International University (TAMIU), a member of the Texas A&M University System, prepares students for leadership roles in an increasingly complex, culturally diverse state, national, and global society. TAMIU provides a learning environment built on a solid academic foundation in the arts and sciences. The University offers a range of baccalaureate and master's programs and the Doctor of Philosophy degree in International Business Administration. In addition, the University pursues a progressive agenda for global study and understanding across all disciplines.

Through instruction, faculty and student research and public service, TAMIU improves the quality of lives for citizens of the border region, the state of Texas, and national and international communities.

C. PHILOSOPHY OF THE COLLEGE OF NURSING AND HEALTH SCIENCES

The faculty believe that the College of Nursing and Health Sciences of Texas A&M International University is in a unique position, as a result of geographic location and institutional affiliation, to prepare professional nurses to improve the well-being of complex, multicultural and diverse populations. The faculty believe that professional nursing education must address a wide range of health beliefs in combination with dynamic political, social, economic and legal issues.

Professional nurses have distinct educational needs and practice responsibilities. The faculty believe that nursing education is a lifelong process that includes formal and informal components, and that teaching and learning are reciprocal activities during which faculty and students learn from each other. To effectively serve a diverse population amid rapid changes in health care systems and treatment, nurses must develop critical thinking through enhanced creative and flexible problem solving skills. Diverse and changing health care needs and patient safety goals can best be met by evidence-based practice based on theory and research. The faculty of the Canseco School of Nursing are committed to educating outstanding clinicians, scholars, health advocates, mentors and leaders who will be instrumental in addressing the health care needs of communities. Strong communication skills are essential to the enactment of these roles and professional nurses must also be increasingly concerned with the ethical, legal, political and socioeconomic dimensions of their practice.

Nursing is a learned and complex therapeutic process through which the nurse engages individuals, patients, families or communities for the purpose of meeting health care needs. Nurses understand health and illness to be relative conditions that include life experiences and biological phenomena. Effective nurses utilize a broad framework based on the humanities and the social and biological sciences. Furthermore, the nurse-patient relationship requires a broad understanding of diverse individual and communities along with the therapeutic use of self.

D. CONCEPTUAL FRAMEWORK

The conceptual framework of the Canseco School of Nursing is portrayed as a pair of hands joined within a globe. The globe signifies the international context of the nursing program. The hands are joined in such a way that the individual fingers are intertwined and hidden within the clasp of the two hands.



At one level, the clasped hands represent the interaction between nurse and partner, be that patient, individual, family, population, community or member of the interdisciplinary health care team. In this interchange, the fingers of the two hands become so intertwined that it becomes difficult to determine which fingers derive from which hand.

At another level, the two hands represent the two foci of the curriculum: expertise in clinical nursing care and nursing in partnership with communities. Together these two capacities can effect dramatic changes in the world with which they interact.

The hand clasp can be loosened somewhat to reveal individual fingers that represent the strands of the nursing curriculum, as described by the ten curricular objectives: (1) a broad base of knowledge; (2) cultural competence; (3) critical thinking and the research process; (4) the nursing process; (5) health promotion; (6) professional nursing roles; (7) societal trends; (8) law and ethics; (9) life-long learning; (10) service to the profession and community.



The <u>ten strands</u> are defined within the context of the overall program philosophy of cultural diversity and community partnership, as follows:

- 1. A broad base of knowledge includes grounding in the natural and social sciences, the liberal arts as well as awareness of tradition and prior learning and experience.
- 2. Transcultural nursing and cultural aspects of care include awareness of individual and cultural variation in health status, human development, values, beliefs, attitudes, history and environment and how these differences affect the need for and acceptance of nursing care within a global context.
- 3. Critical thinking includes the use of problem solving, clinical judgment/ decision making and the research process to apply appropriate principals for the resolution for ever changing societal and professional problems.
- 4. The nursing process involves assessing, diagnosing, planning, implementing and evaluating evidenced-based and culturally-appropriate nursing care in collaboration with patients, families, populations, communities and other members of the health care team.
- 5. Health promotion strategies incorporate the three modes of Leininger's Transcultural Nursing Care theory (preservation, accommodation and repatterning) to promote health of individuals/ patients, families, populations and communities within the limits of culturally acceptable behaviors.
- 6. Professional nursing roles include those of provider of patient-centered care, health care team member/collaborator, leader/manager, educator, scholar, patient safety advocate, activist, mentor, and entrepreneur.
- 7. Societal trends involve analysis of the impact of evolving socioeconomic, political and demographic changes on nursing practices and health care systems.
- 8. Legal and ethical principles that guide professional nursing practice include adherence to the Texas Nurse Practice Act, standards of professional nursing, nursing code of ethics, and statutory and case law.

- 9. Lifelong learning incorporates current evidence-based knowledge of nursing and health care standards.
- 10. Service to the profession and community includes participation in activities of nursing and health related organizations of the university and community.

E. SCHOOL OF NURSING PROGRAM OBJECTIVES MSN Program

Upon completion of the Master of Science in Nursing course of study, graduates will be prepared to:

- 1. Critically analyze, interpret, and utilize appropriate knowledge, research and theories to meet the health care needs of diverse urban and rural patient/client populations across the lifespan.
- 2. Collaboratively plan for the delivery of culturally sensitive health care within the organization and the community.
- 3. Contribute to the advancement of the nursing profession through evidence-based research and practice.
- 4. Synthesize the leadership, management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs.
- 5. Assume accountability for competent practice in the advanced nursing role.
- 6. Use ethical, legal, and political principles in the delivery of health care services.
- 7. Advocate for evidence based practice through a commitment to lifelong learning and community service.
- 8. Evaluate how organizational structures, models of care delivery, economics, marketing, and policy decisions impact the quality and safety of health care.

Approved June 17, 2014

| | Family Nurse Practitioner (FNP) Program Objectives | FNP Student Learning Outcomes |
|----|--|--|
| 1. | Critically analyze, interpret, and utilize appropriate knowledge, | 1a (T) Critically analyze and interpret the theoretical and knowledge base |
| | research, and theories to meet the health care needs of diverse | needed for advanced nursing practice. |
| | urban and rural patient/client populations across the life span. | 1b(C) Critically use cognitive and behavioral skills needed to successfully |
| | | perform as an advanced practice nurse in a variety of settings. |
| 2. | Collaboratively plan with the individual/family and other health | 2a (C) Collaborate with community leaders and other health care |
| | care providers to provide holistic health care within the context of | providers to develop holistic care within the context of individual/family |
| | the individual's/family's culture and worldviews. | cultural backgrounds. |
| | | 2b(C) Collaborate with other health care providers to manage self-limiting |
| | | and chronic illness/problems of individuals and families. |
| 3. | Contribute to the advancement of the nursing profession through | 3a (T) Critique, evaluate, and utilize concepts and theories of nursing, |
| | evidence-based research and advanced practice nursing. | health care delivery and regulatory issues relating to the advanced |
| | | practice role. |
| | | 3b (C) Display professionalism through implementation of evidence based |
| | | practice protocols. |
| | | 3c (T) Integrate research, collaboration, leadership, and negotiation skills |
| | | relating to the advanced practice role. |
| 4. | Synthesize the leadership, management, negotiating, | 4a (C) Establish strong working relationships through interpersonal |
| | teaching/coaching, and consulting roles to foster continual | communication processes with staff, administration and community. |
| | improvement in health care organizations to meet changing | 4b (C) Engage in activities that incorporate the diverse roles of advanced |
| | societal and environmental needs. | practice. |
| 5. | Operationalize ethical, legal, political, and economic principles in | 5a (T) Analyze health care delivery systems, health care reimbursement, |
| | application to management of healthcare delivery across the | and public policy as they relate to patient care across the lifespan. |
| | lifespan. | 5b (C) Analyze and influence key legislative initiatives at regional, state |
| | | and national levels regarding health care policies impacting advanced |
| | | practice and patient care across the lifespan. |
| 6. | Advocate for advanced nursing practice through a commitment to | 6 (C) Engage in behaviors that reflect a commitment to the nursing |
| | lifelong learning and community service. | profession and its values and practice. |
| 7. | | 7a (T) Synthesize knowledge and theories from nursing and other |
| | upon the quality and safety of health care. | academic disciplines to design and evaluate effective business strategies |
| | | for health care organizations. |
| | | 7b(C) Utilize knowledge of patient care delivery models, work designs and |
| | | patient safety outcomes. |

Reaffirmed June 17, 2014 by Faculty

| | Nursing Administration (NADM) Program Objectives | NADM Student Learning Outcomes |
|----|--|--|
| 1. | Critically analyze, interpret, and utilize appropriate knowledge, research, and theories to meet the health care needs of diverse urban and rural patient/client populations across the life span. | 1a (T) Critically analyze and interpret the theoretical and knowledge base of nursing management and executive functions. 1b(C) Critically utilize cognitive and behavioral skills needed to successfully perform as a manager or nursing executive in a variety of settings. |
| 2. | Collaboratively plan with other community leaders, health care providers and organizations to provide holistic health care within the context of community preferences, needs and practice. | 2a (C) Critically analyze and influence policy and operational decision making the healthcare organization. 2b(C) Design patient care delivery systems to enhance culturally diverse populations, patient care outcomes, safe clinical systems, and quality care. |
| 3. | Contribute to the advancement of the nursing profession through evidence based research and practice. | 3a (T) Critique, evaluate, and utilize concepts and theories of nursing, health care delivery and regulatory issues related to health care organizations. 3b (T) Submit descriptive or research based papers to a peer reviewed journal related to nurse administrative topics that include but are not limited to academics or organizational issues. Descriptive or research based papers to a peer reviewed journal related to nurse administrative topics that include but are not limited to academics or organizational issues. 3c (C) Display professionalism through implementation of evidence based administrative practices which extend beyond the organization 3d (C) integrate research, collaboration, leadership, and negotiation skills to influence professional issues and health care policy. |
| 4. | Synthesize the leadership, management, negotiating, teaching/coaching, and consulting roles to foster continual improvement in health care organizations to meet changing societal and environmental needs. | 4a (C) Establish strong working relationships through interpersonal communication processes with staff, administration and community. 4b (C) Engage in activities that incorporate the diverse roles of the nursing executive/nurse manager at the graduate level. |
| 5. | Operationalize ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan. | 5a (T) Analyze health care delivery systems, health care reimbursement, and public policy as they relate to health care economics, ethical and legal guidelines and diverse populations. |

| | 5b (C) Analyze and influence key legislative initiatives at regional, state and national levels regarding health care policies and health care practices |
|---|---|
| 6. Advocate for advancement of nursing through a commitment to lifelong learning and community service. | 6 (C) Engage in behaviors that reflect a commitment to the nursing profession and its values and practice. |
| Integrate mastery of business skills into the role of nurse executive. | 7a (T) Synthesize knowledge and theories from nursing and other academic disciplines to design and evaluate effective business strategies for health care organizations. 7b(C) Utilize knowledge of patient care delivery models, work designs. Quality improvement metrics, budget, risk management, governance, and outcomes measurement to influence health care delivery. |

Reaffirmed June 17, 2014

Program Outcomes – New FNP and NADM Curriculum

Upon completion of the MSN program, graduates will:

- 1. Critically analyze, interpret and utilize appropriate knowledge, research and theories to meet the health care needs of diverse client populations across the lifespan.
- 2. Collaboratively plan the delivery of culturally sensitive health care with organizations and the community.
- 3. Contribute to the advancement of nursing profession through evidenced-based research and practice.
- 4. Synthesize the leadership management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs.
- 5. Operationalize ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan.
- 6. Advocate for advanced nursing practice through a commitment to lifelong learning and community service.

Approved Spring 2016

F. GENERAL EXPECTATIONS FOR MSN STUDENTS

The student and clinical faculty are responsible for selecting a clinical site and preceptor. The clinical site should provide students with opportunities that allow students to demonstrate satisfactory completion of course objectives and progression in their development as nurses with advanced educational preparation. *Under no circumstances is it appropriate for a student to complete the clinical experience on a unit where the student is employed. Also, students are not to select family members for preceptors for any course.*

Successful clinical performance is achieved through the student-preceptor-clinical instructor relationship. Each member of this educational team contributes to the student's learning experience. Students must be actively involved in arranging, maintaining and terminating the preceptor-student relationship over a course semester. The responsibilities delineated in this handbook are consistent with current, professional Texas Board of Nursing and Texas law requirements.

Students Responsibilities for Clinical Practicum Experiences

I. Select Preceptor

The MSN courses are offered in a structure that promotes the development of specialized knowledge and skill sets starting with the application of basic principles and skills and moving to the application of complex principles and skills in the delivery of health care. Students should select preceptors based on their qualifications to support student achievement of course objectives.

1. Review course objectives.

It is the responsibility of the student to provide the preceptor with any student-specific clinical objectives that have been identified for the clinical practicum. The student should also provide the preceptor a copy of the course objectives, evaluation criteria and Preceptor Agreement.

- 2. Review preceptor qualifications including verification of preceptor credentials.
- 3. Verify appropriateness of clinical site with CSON Clinical Faculty. Students need to discuss the clinical site and preceptor with clinical faculty prior to completing the required paperwork. Each student should complete required documents essential to establishing the formal preceptor, student, TAMIU relationship and submit these documents to the clinical faculty. The CSON clinical faculty must approve the preceptor arrangement before students begin clinical hours. **The clinical faculty has the final authority over the appropriateness of a clinical site and preceptor arrangement.**
 - 4. Interview Preceptor as indicated:

- a. Some preceptors require that the student seeking a placement interview with them. Students should use this opportunity to demonstrate their commitment to their coursework, knowledge of the preceptor/student relationship and ethical responsibilities (confidentially), and willingness to adapt their schedule to the preceptor's practice.
- b. Students should use the interview to provide the preceptor with an understanding of the level, ability and personality of the student.
- 5. Enable the preceptor to assess if the student would be a "good fit" for the clinical site and the population it serves. The preceptor may say "no" to a student because the site may not fit the course requirement.

II. Clinical Preceptor Agreement

Preceptor agreements specify a relationship between the student and preceptor for a specific time period. Therefore, students and preceptors must sign a new agreement each semester. A curriculum vita (CV) need not be completed each semester by the preceptor if the CONHS has a copy of a current curriculum vita from a previous agreement. It is the student's responsibility to verify that the curriculum vita on file, in the Dean's office, accurately represents the preceptor's work experience and education. If it is not accurate, the student should assist the preceptor to complete a new curriculum vita by providing the preceptor with the necessary forms. The CV on file must be less than one year old. For students, the preceptor's CV must be the same CV stored in their TYPHON account. When professional licensure is required for preceptors, the preceptor must meet established criteria in accordance with the position description included in this Preceptor Handbook. A preceptor must hold professional licensure for supervising students involved in direct clinical practice. Once an individual has agreed to precept the student, the faculty should verify that the individual's credentials are current and valid. The verification can be completed online through the Texas Board of Medical Examiners (https://www.tmb.state.tx.us/page/look-up-a-license) or the Texas Board of Nursing (https://www.bon.texas.gov/licensure_verification.asp). A copy of the license verification will be attached to the Preceptor Agreement and submitted for retention in the TAMIU College of Nursing and Health Sciences Preceptor files. Students in the Nursing Administration specialty area of study may have preceptors who do not hold a professional license. They will only submit verification of licensure when the preceptor practices in a profession that requires licensure (physician, registered nurse, medical social worker). Students should consult the clinical faculty

The preceptor agreement must be signed by the clinical faculty, student and preceptor.

or the program coordinator when they have questions about their preceptor's credentials.

1. Complete and submit the Texas A&M International University College of Nursing and Health Sciences required documents by the date assigned.

- 2. Clearly write the name, address, telephone, fax and e-mail address of the clinical faculty as information to share with preceptor.
- 3. Clearly write the name, address, telephone, fax, and e-mail address of the preceptor.

III. Scheduling of Clinical Hours

Clinical experience hours are to be scheduled at the convenience and availability of the preceptor. Students are not to ask preceptors to conform to a schedule that meets their personal or employment needs. *The student's personal and work schedules are expected to accommodate participation in the required number of clinical hours prescribed in the course requirements.* Students and preceptors need to agree on the days and times that the student will be in the clinical agency at the beginning of the clinical experience. These hours must be approved with the clinical faculty. Clinical faculty must be available to student by phone during clinical hours. A schedule of clinical hours must be given to the clinical faculty for approval at the beginning of each course. *Unless otherwise stated in the syllabus, students are expected to begin the clinical component of a course when the course starts to insure adequate time to complete assignments.* However, students must update their immunization information, licensure and CPR status before engaging in any clinical experiences.

IV. Professional dress and behavior

- 1. Students are representatives of TAMIU College of Nursing and Health Sciences and must present themselves as ambassadors of this program. They are expected to be respectful to preceptors, faculty, staff, patients and their families. Reports of unprofessional behavior will result in the student being counseled and possibly subject to review by the College of Nursing and Health Sciences Admission and Progression and/or to the University office of Student Affairs.
- 2. Students should be *professionally dressed* and wear an ID badge that identifies them as a Registered Nurse and TAMIU College of Nursing and Health Sciences graduate student. These badges should only be worn by the student when the student is in the clinical setting. The appropriate use of uniforms or lab coats should be determined through the preceptor/student interview. Students are expected to conform to the dress of the clinical site where the coursework is completed.
- 3. Students should individually express their appreciation to their preceptors for their dedication, mentoring and teaching at the end of the preceptored experience. They should also give them a summary of the total preceptor hours for their records.

V. Preparation for Clinical Experiences

The clinical experience extends the learning environment of the didactic or lecture portion of the course to practice. Agencies require affiliation agreements between the agency and the TAMIU College of Nursing and Health Sciences. Students should contact their clinical instructors or the program coordinator immediately when they are informed this agreement is in place. Students will not be allowed to start clinical until the agreement is signed.

Students should prepare for the clinical experience by developing individual learning objectives associated with the course. Course work required in the didactic or lecture portion of the course is generally designed to prepare students for their clinical experiences. Therefore, students are expected to remain engaged in the course, prepare for clinical by completing the required readings and assignments, and reviewing additional relevant material that will insure appropriate practice in the clinical setting.

The preceptor may recommend materials and topics for review prior to the first clinical day. Students involved in care delivery and nurse administration should review the common clinical problems relevant to the clinical site. Students involved in system operations should review the structures and processes common to the clinical site. Follow-up reading of current reference material following the clinical day provides the student with the opportunity to increase the breadth of scientific and clinical knowledge gained through the clinical experience.

Guidelines for preparation include:

- 1. Students are expected to have full knowledge of entrance requirements for clinical experience, including credentials, dress, location, timing, etc., before scheduling the first clinical day at the agency.
- 2. Students are responsible for insuring they are in compliance with agency requirements for the student learning experience. These requirements generally include current CPR certification, background check, urine drug screen and immunizations, by the first day. In accordance with TAMIU College of Nursing and Health Sciences and agency policies, students without confirmation of meeting these requirements shall not enter the clinical setting.
- 3. Compliance with clinical requirements such as criminal background checks and urine drug screens should be documented in the Office of the Dean.
- 4. Whenever possible, discussion with other students, who have had the same or similar placements, may be beneficial.
- 5. On the first clinical day, questions about computer access, the procedure for preceptor cosigning documents, eating and parking arrangements and the communication with

other disciplines should be discussed.

- 6. In order to acknowledge the preceptor's background and allow for a fuller experience, learn something about the preceptor when possible.
- 7. Students employed in the agency they have selected for a clinical experience must not combine work activities with course activities. It is illegal to access patient information associated with learning experiences using the student's employee identification or password. Each student must complete course requirements from the student role perspective.

VI. Attendance

Performance of clinical hours at the negotiated times and days with the preceptor is required. It is the student's responsibility to monitor the number of hours completed and plan on completing the required number of hours for the term. The student is responsible for adjusting his/her personal and employment commitments, so that the required number of hours can be completed. If the student does not complete the required clinical hours for the term, *s/he cannot expect* the preceptor to continue the relationship after the term has ended. Extension of the clinical period with the preceptor cannot be assumed but is granted only by agreement with the preceptor and TAMIU College of Nursing and Health Sciences faculty. Expectations related to unexpected illness of the student/family and/or preceptor should be discussed with course faculty and the parties involved.

When the student cannot attend clinical hours on a day that is scheduled, <u>the student must</u> <u>immediately notify the preceptor and clinical faculty</u>. The student should obtain a telephone number and discuss the procedure of notifying the preceptor and faculty for unexpected absences. Failure to notify the preceptor, as negotiated prior to the beginning of the scheduled clinical day, is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course faculty as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time.

G. ROLE RESPONSIBILITIES AND POSITION DESCRIPTION

Title: Clinical Faculty for Family Nurse Practitioner & Nursing Administration Students

The clinical components for major specialty courses are supervised by clinical faculty. These faculty members must meet state and national standards for nurse educators supervising graduate nursing students in the clinical area.

Qualifications for All Clinical Faculty:

- Hold a current, valid license to practice as a registered nurse in the state of Texas or reside in any party state and hold a current, valid registered nurse license in that state (TAC 22.11.219.7);
- Hold a minimum of a master's degree in nursing or the equivalent thereof as determined by the Board (TAC 22.11.219.7);
- Be qualified through academic preparation and practice experience to teach the subject assigned and shall meet the standards for faculty appointment by the governing institution (TAC 22.11.219.7); and
- Maintain clinical practice within the clinical role and specialty (TAC 22.11.219.7)

Job Description for All Clinical Faculty:

Support preceptors in guiding students in the application of knowledge to practice, facilitating student autonomy in a specific role for nurses with advanced preparation, and promoting self-confidence that leads to clinical or administrative competency. Insures students have access to learning experiences essential to their development. Represents the educational and professional values of Texas A&M International University College of Nursing and Health Sciences to students and preceptors. Has the overall responsibility for monitoring and evaluating the clinical learning experience for MSN students. Clinical faculty has final responsibility for evaluating student performance in the clinical area.

Faculty teaching in the Family Nurse Practitioner specialty clinical courses must also:

- Be authorized to practice as advanced practice nurses in the state of Texas (TAC 22.11.219.7).
- Have clinical practice experience at the advanced practice nursing level of at least two years if supervising family nurse practitioner students.
- Family Nurse Practitioner faculty must hold appropriate national certification (N. O. N. P. F. Guidelines Checklist IV.B.3.a).

Faculty teaching in the Nursing Administration clinical courses must also:

- Administration and management expertise derived from practical and theoretical preparation.
- Ph.D. preferred and masters of nursing required.
- Administrative and management expertise.
- Current unencumbered Texas licensure to practice in the state of Texas.

Clinical Faculty Role:

At the **<u>onset</u>** of the clinical rotation:

- 1. Verify appropriateness of clinical site contractual agreements and sign the preceptor agreement.
- 2. Orient new preceptors to the preceptor role and TAMIU College of Nursing and Health Sciences educational expectations.
- 3. Review preceptor responsibilities with continuing and new preceptors related to course and level of student.
- 4. Prepare student for clinical experience through an orientation to policies and procedures, prerequisites for clinical rotation and faculty requirements for clinical experiences.
- 5. Validate student qualifications (clinical requirements for clinical practice, as well as prerequisite coursework.
- 6. Make known to students in writing the goals and requirements of each course, the nature of the course content and the methods of evaluation to be employed.

Throughout the course:

- 1. Mentor and serve as a role model for graduate students.
- 2. Conduct clinical site visits at least twice within the term and as needed.
- 3. Work with the student and preceptor to identify and discuss the learner's needs in order to meet the course objectives.
- 4. Use appropriate teaching methods to help the student negotiate the clinical experiences so that the student meets personal learning objectives and has confidence to experiment with newly learned skills.
- 5. Monitor use of accepted guidelines and standards of care.
- 6. Support student in his/her refinement of interpersonal skills that promote effective communication with patients and colleagues.
- 7. Alert students to focus on problematic areas early in the clinical experience with preceptor, thereby providing each an opportunity to refine interpersonal skills by the time the clinical is completed.
- 8. Communicate with preceptor regularly to monitor student's progress in course.
- 9. Evaluate whether the learner's objectives have been achieved through direct observation and preceptor feedback.
- 10. Provide the learner with feedback.

- 11. Demonstrate attitudes and qualities consistent with the ethics of the health professions.
- 12. Implement academic and professional standards set forth in the TAMIU College of Nursing and Health Sciences Handbooks.
- 13. Provide students with feedback utilizing the appropriate TAMIU Clinical Performance Evaluations.

H. POSITION DESCRIPTION

Title: Clinical Preceptor

The clinical preceptor is a critical part of the educational team guiding students in their development as specialists. They are the model for practice in the primary care and administrative setting. As the expert, they help students identify key factors in each setting to frame clinical or operational decisions.

Qualifications

For Family Nurse Practitioner specialty courses:

- Nursing or medical expertise in clinical practice derived from practical and theoretical preparation (N. O. N. P. F., 1-7).
- Authorized to practice as advanced practice nurses in Texas, or currently licensed as a health care professional who can provide supervision and teaching in clinical settings appropriate for advanced practice nursing (TAC 22.11.219.10-2005; N. O. N. P. F. Guidelines Checklist IV. B. (3). (a & b)).
- Current unencumbered Texas license.
- Board of Nursing or Medical Board recognition to practice in a specialty area in Texas (N. O. N. P. F. Guidelines Checklist IV. B. 3. a.).
- Appropriate national certification (N. O. N. P. F. Guidelines Checklist IV. B. 3. a.).

For Nursing Administration courses:

- Administration or management expertise derived from practical and theoretical preparation for individuals in administrative positions;
- Currently holds management or executive leadership position in an organization licensed to provide health services;
- Current management of executive leadership position in the organization where preceptorship occurs;
- Has been in administrative position for least one year.

Job Description:

Guides students in the application of knowledge to practice, facilitates student autonomy in a specific role for nurses with advanced preparation, and promotes self-confidence that leads to clinical or administrative competency. Faculty will be readily available to Clinical Preceptors and students during clinical learning experiences. The faculty member has the overall responsibility for monitoring and evaluating the learning experience.

Role Responsibility:

- 1. Mentors and is a role model for graduate students.
- 2. Direct overall goals and objectives for the experience based on student outcome objectives provided by the student, and/or TAMIU College of Nursing and Health Sciences faculty.
- 3. Identifies and discusses the learner's needs in order to meet the course objectives.
- 4. Assesses the nature of particular clinical encounters that will enable the student to meet his/her learning objectives at varying levels of the specialty curriculum.
- 5. Uses appropriate teaching methods to help the student meet his/her learning objectives and allows each student to experiment with newly learned skills that will build confidence in his/her abilities.
- 6. Directs use of accepted guidelines and standards of care.
- 7. Demonstrates and supports the critical analysis of guidelines/standards of care and determines how they should be implemented or adapted to unique clinical situations.
- 8. Supports student in his/her refinement of interpersonal skills that promote effective communication with patients and colleagues.
- 9. Alert students to focus on problematic areas early in the clinical, thereby providing each student an opportunity to refine interpersonal skills by the time the clinical experience is completed.
- 10. Evaluates whether the learner's objectives have been achieved.
- 11. Provides the learner with feedback.
- 12. Demonstrates attitudes and qualities consistent with the ethics of the health professions.
- 13. Communicates the ability to cope with multiple variables in the clinical setting while carrying out all patient and administrative functions.

Summary of Required Preceptor Documents

The Preceptor Curriculum Vita, Preceptor Agreement, preceptor license verification (when appropriate), preceptor contact information, and Preceptor Packet Checklist must be completed by each MSN student for every preceptor. These documents must be sent together to your clinical faculty for review and approval.

Texas A&M International University College of Nursing and Health Sciences Master of Science in Nursing Preceptor/Affiliation Agreement Approved 05/2016

The preceptor agreement permits Texas A&M International University, Canseco School of Nursing students to participate in a student preceptorship in your organization, . Conditions of this agreement are as follows:

The affiliation period will be from the following Semester/Year: _______.

| The student, | , will be under the supervision of, |
|--------------------------|-------------------------------------|
| acting as the preceptor. | |

The CSON faculty member, ______, serves as the liaison with your organization.

Preceptor Responsibilities:

- 1. Participate in the written agreements between the program, affiliating agency, and preceptor to specify the responsibility of the program to the agency and the responsibility of the programs.
- 2. Orient the student(s) to the clinical agency.
- 3. Facilitate the learning needs of the student based on course learning outcomes.
- 4. Collaborate with faculty to review the progress of the student toward meeting course learning outcomes.
- 5. Provide-timely and appropriate feedback to the student regarding practicum performance.
- 6. Contact the faculty if assistance is needed or if any problem with student performance occurs.
- 7. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
- 8. Give feedback to the nursing faculty regarding the practicum experience with the student and suggestions for program development.

Course Faculty Responsibilities:

- 1. Responsible and accountable for coordinating the practicum learning experiences of assigned students.
- 2. Supervise no more than two students in any one clinical agency setting and six in any one section of the course.
- 3. Develop criteria for the selection of affiliate agencies or practicum practice settings that address the need for students to observe and practice safe, effective, efficient and responsibly based on the MSN track and course learning outcomes.-Select and evaluate

affiliate agencies or practicum settings that provide students with opportunities to achieve the learning outcomes of the MSN program.

- 4. Provide written agreements between the program and the affiliating agencies and specify the responsibility of the program to the agency and the responsibility of the agency to the program.
- 5. Develop written agreements jointly with the affiliating agency, review them periodically according to the policies of the program and the affiliating agency, and include provisions for adequate notice of termination.
- 6. Assume overall responsibility for teaching and evaluation of the student.
- 7. Meet regularly with practicum preceptor and the student in order to monitor and evaluate the learning experience.
- 8. Receive evaluation from the preceptor regarding student performance.
- 9. Receive evaluation from student regarding whether the preceptor and agency met their learning needs/clinical objectives.
- 10. Provide recognition to the preceptor for participation as a preceptor, for example, with a plaque or certificate.
- 11. Place all clinical evaluations in the student's record at the end of each semester.

Student Responsibilities:

- 1. Maintain accountability for own learning activities.
- 2. Prepare measurable objectives for each practicum experience as directed.
- 3. Be accountable for own nursing actions while in the practicum setting.
- 4. Arrange for preceptor's supervision when performing all actions in the precepted environment; determine with the preceptor and faculty competencies that can be done independently and reported following action taken. NOTE: Primary patient care can NOT be done in the precepted situation by Nursing Administration students. This needs reworking
- 5. Notify faculty in the event of unplanned absences of the student or preceptor and any incidents.
- 6. Follow the MSN policy on confidentiality while in the practicum setting.
- 7. Adhere to the MSN dress policy for practicum at all times.

II. CONHS AND PRECEPTOR/AGENCY MUTUAL RESPONSIBILITIES

CONHS and PRECEPTOR/AGENCY agree to:

 In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, TAMIU and PRECEPTOR/AGENCY will not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability or military service in their administration of policies, programs, or activities; admission policies; other programs or employment, unless and except if a person's status directly and adversely interferes with his or her ability to perform assigned duties and cannot be reasonably accommodated.

- 2. Determination of the number of students to be assigned to the clinical learning experience shall be a joint decision based on staff and space available at AGENCY and eligible students enrolled in the program who desire to be educated at CONHS.
- 3. This agreement does not prevent CONHS from participation in any other programs. Nor does this agreement prevent CONHS from placing students with other licensed health care facilities.
- 4. There will be on-going, open communication between CONHS and PRECEPTOR/AGENCY to promote understanding of the expectations and roles of both institutions in providing the clinical learning experience for students. CONHS and PRECTPOR/AGENCY representative will meet as needed at the convenience of both parties to coordinate and improve the clinical learning experience.
- 5. Either CONHS or PRECPTOR/AGENCY may remove a student participating in the clinical learning experiences if, in the opinion of either party, the student is not making satisfactory progress. Any student who does not satisfactorily complete the clinical learning experience or any portion of thereof may repeat the clinical learning experience with PRECEPTOR/AGENCY only with the written approval of both CONHS and PRECEPTOR/AGENCY.
- 6. At no time shall CONHS students be considered representatives, employee or agents of CONHS or PRECEPTOR/AGENCY. CONHS students are not eligible to receive payment for services rendered, replaced or substituted for a CONHS or PRECEPTOR/AGENCY employee, or possess authority to enter into any form of agreement, binding or otherwise, on behalf of CONHS or PRECEPTOR/AGENCY.
- 7. TAMIU and PRECEPTOR/AGENCY each acknowledge that neither party assumes liability for actions taken by students during the time that they participate in the clinical learning experience with PRECEPTOR/AGENCY.
- 8. TAMIU is not responsible for providing personal liability or medical insurance covering students. However, the medical malpractice nursing is provided for all contract clinical hours.
- 9. As an agency of the State of Texas, TAMIU may not agree to indemnify or hold any party harmless from any liability or expenses. Neither party to this assignment shall be required to indemnify or hold the other harmless unless ordered to do so by a court of competent jurisdiction.

10. CONHS and PRECEPTOR/AGENCY agree to assist each other in obtaining and maintaining approvals of regulatory agencies needed to conduct the clinical learning experiences under this agreement.

III. FERPA

For purposes of this agreement, pursuant to the Family Educational Rights and Privacy Act of 1974 (FERPA), PRECEPTOR/AGENCY agrees to maintain the confidentiality of the education records in accordance with the provisions of FERPA attached as Exhibit B.

IV. HIPAA

TAMIU and PRECEPTOR/AGENCY agree that:

- 1. PRECEPTOR/AGENCY is a covered entity for purposes of the Health Insurance Portability and Accountability Act (HIPAA) and subject to 45 CFR Parts 160 and 164 ("the HIPAA Privacy Regulation").
- 2. To the extent that CONHS students are participating in the program [and CONHS faculty are providing supervision at PRECEPTOR/AGENCY as part of the program], such students [and faculty members] shall:
 - a. Be considered part of PRECEPTOR/AGENCY workforce for HIPAA compliance purposes in accordance with 45 CFR §160.103, but shall not be construed to be employees of PRECEPTOR/AGENCY
 - Receive training by PRECEPTOR/AGENCY facility on, and subject to compliance with, all of PRECEPTOR/AGENCY privacy policies adopted pursuant to the HIPAA Privacy Regulations
 - c. Not disclose any Protected Health Information, as that term is defined by 45 CFR §160.103, to CONHS which a student accessed through program participation [or a faculty member accessed through the provision of supervision at PRECEPTOR/AGENCY that has not first been de-identified as provided in 45 CFR §164.514 (a)
- 3. CONHS will not access or request to access any Protected Health Information held or collected by or on behalf of PRECEPTOR/AGENCY, from a student [or faculty member] who is acting as a part of PRECEPTOR/AGENCY workforce as set forth above, or any other source, that has not first been de-identified as provided in 45 CFR §164.514(a) and no services are being provided to PRECEPTOR/AGENCY by CONHS pursuant to this agreement and therefore this agreement does not create a "business associate" relationship as that term is defined in 45 CFR §160.103.

Signatures below confirm that the above conditions reflect correctly your understanding of an agreement to this affiliation.

Facility/Preceptor:

| Preceptor Name/Title: | _ |
|-----------------------|---|
| Date of Approval: | _ |
| Agency Name/Title: | _ |
| Date of Approval: | _ |

TAMIU-Canseco School of Nursing Signatures:

| Student: | Date: | |
|--------------------------|-------------------|--|
| Faculty Member: | Date: | |
| Director of MSN Program: | Date: | |
| Dean CONHS: | Date of Approval: | |

Confirmation of Student-Preceptor-Faculty Agreement to Clinical Preceptorship

Student /Texas A&M International University, College of Nursing & Health Sciences

| (Print) | (Sign) | (Date) |
|---|----------------------------------|------------------------------------|
| Preceptor / Clinical Health, Other (name) | Agency/Type of Agency [Rura] | al Clinic, Private practice, Publi |
| (Print) | (Sign) | (Date) |
| • | xas A&M International Unive | ersity, College of Nursing & |
| Health Sciences | | |
| Health Sciences (Print) | (Sign) | (Date) |
| (Print) | (Sign) | |
| <u>(Print)</u> Site Name: | | |
| (Print) Site Name: Site Address: | | |

Preceptor Contact Information

PLEASE PRINT CLEARLY

| Preceptor Name: _ | | |
|------------------------------|-----------|------------|
| Preceptor E-mail: | | |
| Preceptor <u>Mailing</u> Add | dress: | |
| City/St: | | Zip: |
| Telephone Numbers: | | |
| | Office | Fax |
| Social Security Number | er: (opt) | License #: |

Brief Preceptor Curriculum Vitae **

The preceptor may choose to complete this brief Curriculum Vitae (CV), to submit an entire CV or submit a current résumé.

Please write clearly:

| Professional Education (post-secondary schools attended) and dates attended: | | | |
|--|---------------|------|--|
| Institution | Degree Earned | Date | |
| | | | |
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Certifications:

Academic & Professional Honors:

Professional Experience:

| Position | Dates in Position | Institution | |
|--|------------------------|--------------------|--|
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| | | | |
| | | | |
| | | | |
| Preceptor Experience (specify educational program for preceptored student): | | | |
| Type of Student | Role of Student in | Date of Experience | |
| Preceptored | Preceptor Relationship | _ | |

**If you have not submitted a completed Vitae in the last 12 months, please attach one to this form. Thank you.

| Preceptor's Name: | Date: |
|-------------------|-------|
| Student's Name: | Date: |

Preceptorship Documentation

Students should use this form to provide preceptors with a summary of the hours they spent with a preceptor. **This complete document should be returned to Clinical Faculty.** Preceptors will receive a copy for their files.

| Preceptor Name: _ | | |
|-------------------|------|------|
| Student Name: | | |

Course: ______ Semester: ______ Year: _____

Clinical Instructor's Name:

| Date of Clinical | Hours Completed | Preceptor Initials | Student Initials | |
|-----------------------|-----------------|---------------------------|------------------|--|
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| | | | | |
| | | | | |
| | | | | |
| Total Hours Completed | | | | |

I. CLINICAL ACTIVITY DOCUMENTATION FOR FNP STUDENTS

Students are required to document their clinical activities using the Typhon Nurse Practitioner Student Tracking Software for every clinical experience. Course fees associated with the first clinical course in the FNP program covers student access to this information management system for all of the clinical specialty courses.

To access the tracking system, students must register and pay for NFNP 3624- Advanced Health Assessment. They must then complete the Student Data Entry Video tutorials which will be available through a link in their course shell. Upon completion of the tutorial, students will obtain access to Typhon Clinical Student Tracking.

Clinical and course faculty will guide students through the documentation requirements for each of the courses. All correspondence related to the course, clinical, or lecture sections should occur through the university email system.

1. Clinical Log Instructions: FNP Students

Students will enter each patient encounter when they conduct history and physical assessments in Typhon Group's Nurse Practitioner Student Tracking (NPST) System. Students will enter demographics, clinical information, diagnosis and procedure codes, skills, medications and clinical SOAP notes. In addition, students will document their work using ICD-9 and CPT codes.

Because the application is hosted at Typhon's Group's offices, users can login from anywhere and receive the latest upgrades and features automatically without installing any software. The web application works with any web browser without any additional software (including the iPhone). Clinical faculty will review the entries and provide comments as needed with approval or disapproval of the note. Students are expected to correct the notes as directed.

Typhon Group's Nurse Practitioner Student Tracking (NPST) System is compliant with HIPAA regulations.

J. CLINICAL ACTIVITY DOCUMENTATION: NADM STUDENTS

Students are required to document their competencies and management activities using the Typhon Student Tracking software for each clinical day. Documents will be uploaded into Typhon. Clinical and course faculty will guide students through the documentation requirements for each of the courses. All correspondence related to the course, clinical or lecture sections, should occur through the course shell email tool.

1. Clinical Log Instructions: NADM Students

Students will enter information related to each administrative encounter in Typhon Group's Nurse Practitioner Student Tracking (NPST) System at <u>http://www.typhongroup.com/</u>. Students will upload a word document that provides: (limit one page)

- 1. Agency site information (where encounter occurred)
- 2. Specific person with whom experience occurred
- 3. Competency(s) accomplished
- 4. Student(s) involved
- 5. Whether competency was observed or done
- 6. What action was taken and was it documented (as appropriate)
- 7. Who was involved in the action
- 8. Executive summary of the event (see outline provided in Angel at Clinical Documents)

Because the application is hosted at Typhon's Group's offices, users can login from anywhere and receive the latest upgrades and features automatically without installing any software. The web application works with any web browser without any additional software (including the iPhone). Clinical faculty will review the entries and provide comments as needed with approval or disapproval of the note. Students are expected to correct the notes as directed.

Typhon Group's Nurse Practitioner Student Tracking (NPST) System is compliant with HIPAA regulations.

K. REQUIRED CLINICAL EVALUATIONS

Students are responsible for insuring all evaluations are completed at the end of the course. The title of each form should assist students to determine who completes which form. Evaluations should be returned, as directed to clinical faculty, upon completion of the course.

FNP program evaluations include:

- *MSN-FNP Student Evaluation of Preceptor/Agencies Form* should be completed by each MSN student for every preceptor.
- *Clinical Evaluation Form for MSN: Family Nurse Practitioner* should be completed by the preceptor for every student precepted.

Nursing Administration evaluations include:

Students are responsible for insuring all evaluations are completed at the end of a course. The evaluations will be in Typhon and each student will receive an invitation through Typhon (TAMIU e-mail used) to enter and complete the evaluation.

NADM program evaluations include:

- o NADM Student Evaluation of Preceptor and Agency Form
- \circ Evaluation of NADM Student by Faculty & Preceptor

TAMIU: College of Nursing and Health Sciences MSN-FNP Student Evaluation of Preceptor/Agencies

Semester/Course Number/Name: ______

Preceptor Name: ______Site: _____

Key: Please mark an X in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.

| Frequently | | Sometimes | Seldom | Not Observed |
|------------|---|-----------|--------|--------------|
| 4 | 3 | 2 | 1 | 0 |

| | PRECEPTOR | 4 | 3 | 2 | 1 | 0 |
|-----|---|---|---|---|---|---|
| 1. | The preceptor's professional experience was appropriate. | | | | | |
| 2. | The preceptor was available to the student for clinical assistance. | | | | | |
| 3. | The preceptor allowed the student to formulate a plan of care for clients based on the science of nursing and related disciplines. | | | | | |
| 4. | The preceptor allowed the student to use cognitive, affective, perceptual, and psychomotor skills to promote health with clients of diverse cultural backgrounds. | | | | | |
| 5. | The preceptor allowed the student to practice collaborative skills in conjunction with other members of the health care team in order to provide comprehensive care to clients. | | | | | |
| 6. | The preceptor encouraged the student to assume increasing clinical responsibility during the semester. | | | | | |
| 7. | The preceptor communicated clear expectations for student learning. | | | | | |
| 8. | The preceptor provided immediate and adequate feedback with questions and client presentations. | | | | | |
| 9. | The preceptor was supportive and accessible for consultation. | | | | | |
| 10. | The preceptor led student through decision making rather than giving own impressions. | | | | | |

| 11. | The preceptor allowed student to assess client, make diagnoses, and suggest interventions and plan care. | | | | | |
|-----|--|---|---|---|---|---|
| 12. | The preceptor offered constructive comments to student regarding assessment, diagnosing, planned interventions and care. | | | | | |
| 13. | The preceptor provided an environment for critical thinking and decision making for the student. | | | | | |
| | AGENCY/CLINICAL SETTING | 4 | 3 | 2 | 1 | 0 |
| 1. | The clinical setting provided opportunities for the student to meet the clinical objectives. | | | | | |
| 2. | The host personnel fostered and encouraged student participation on the health team. | | | | | |
| 3. | The agency/facility meeting areas (A/V equipment, facilities, etc.) were adequate and accessible. | | | | | |
| 4. | The agency/facility had supplies, materials, and equipment that met student needs. | | | | | |
| 5. | The agency/facility was well-equipped to handle the client visits. | | | | | |
| 6. | The agency/facility provided the student with good learning experiences to meet clinical objectives. | | | | | |
| 7. | The agency/facility provided the student with an environment that stimulated ideas for research. | | | | | |
| 8. | The agency/facility personnel demonstrated an understanding of professional responsibility through adherence to legal and ethical standards of practice. | | | | | |

COMMENTS:

1. STRENGTHS OF PRECEPTOR:

2. WEAKNESSES OF PRECEPTOR:

3. STRENGTHS OF AGENCY:

4. WEAKNESSES OF AGENCY:

| Student: | Date: | |
|--------------------|-------|--|
| Reviewed by: | | |
| Faculty of Record: | Date: | |

Texas A&M International University College of Nursing and Health Sciences NADM Student Evaluation of Preceptor and Agency:

Semester/Course Number/Name: _____

Preceptor Name: ______Site: _____

Key: Please mark an X in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.

| Frequently | uently Sometimes | | | Seld | om | No | erved | |
|---|---------------------|------------------------------------|---|------|----|----|-------|--|
| 4 | 3 | 2 | | 1 | | 0 | | |
| | Preceptor Charact | eristic | 4 | 3 | 2 | 1 | 0 | |
| Participate in planni with me. | | | | | | | | |
| Willingly completed written agreements between the program, affiliating agency, and preceptor to specify the responsibility of the program to the agency and the responsibility of the preceptor and agency to the program. Oriented me to the clinical agency. | | | | | | | | |
| Participated with mo | e in meeting compet | tencies. t the competencies for | | | | | | |
| successful experience | • | t the competencies for | | | | | | |
| Provided me with co during the precepto | | regarding my performance | | | | | | |
| Advised me when a meeting between my clinical faculty and my preceptor (or other agency personnel) would be of benefit for discussing competency achievement or planning for activities that might fall outside of the competencies but augment my management learning experience | | | | | | | | |
| Provided work space for me to review documents, meet with appropriate members of the management team or health care team, meet with clinical faculty, and complete activities related to the preceptor experience. | | | | | | | | |
| Willingly spent time with me to answer competency related questions. | | | | | | | | |

| Demonstrated management characteristics that I could compare with AONE competencies and ANA Standards and Scope of Practice | | | | | |
|--|---|---|---|---|---|
| Provided me with at least formative (approximately mid-term) and summative (end of experience) evaluations using the Competency Evaluation form. | | | | | |
| Communicated with me using respect and formulated a relationship where succession planning characteristics* were evident. | | | | | |
| Guided me in the application of didactic information to practice | | | | | |
| Facilitated beginning autonomy in a specific role for nurses with advanced preparation | | | | | |
| Promoted my self-confidence that lead to administrative competency | | | | | |
| Agency Characteristics | 4 | 3 | 2 | 1 | 0 |
| The agency where I worked (through the preceptor) retained the ultimate responsibility for all administrative duties | | | | | |
| The preceptor's work schedule was flexible and my preceptor was available a sufficient amount of time to meet my learning needs. | | | | | |

COMMENTS:

1. STRENGTHS OF PRECEPTOR:

2. WEAKNESSES OF PRECEPTOR:

3. STRENGTHS OF AGENCY:

4. WEAKNESSES OF AGENCY:

Student: _____ Date: _____

Reviewed by:

Faculty of Record: _____Date: _____Date: _____Date: ______Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: ______Date: _____Date: ______Date: _____Date: ______Date: ______Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: ______Date: ______Date: ______Date: ______Date: ______Date: _____Date: ______Date: _______Date: ______Date: ______Date: ______Date: ____

Texas A&M International University College of Nursing and Health Sciences Evaluation of NADM Student by Faculty & Preceptor

| Student name:P | | | otor | nar | ne: | | |
|----------------|--|------|------|-----|------|--------|--------------------|
| Evalu | ation by: Self Preceptor | Fa | cult | У | | Cc | ourse #: |
| Cour | se Title:Clinical ł | nour | s co | mp | lete | d prio | r to evaluation: |
| Midt | erm Final | | | | | | |
| | KEY: Fail 1 & 2 | | | | | Pa | ass 3 & 4 |
| | 1 Does not meet standard | | | 3 | | | ets standard |
| | 2 Inconsistently meets standard | | | | 4 | Ex | ceeds standards |
| | | | | | | | N/A Not applicable |
| | IPETENCIES & CRITICAL ELEMENTS | _ | _ | | | | |
| | IPETENCY 1: Communication and | 1 | 2 | 3 | 4 | N/ | Comments |
| | tionship Building | | | | | Α | |
| 1.1 | Makes oral presentations to diverse | | | | | | |
| | audiences on nursing, health care and | | | | | | |
| | organizational issues | | | | | | |
| 1.2 | Identifies how preceptor incorporates | | | | | | |
| | caring about people as individuals and | | | | | | |
| | demonstrating empathy and concern, | | | | | | |
| | while insuring organizational goals and | | | | | | |
| 1.2 | objectives are met | | | | | | |
| 1.3 | Identifies how the preceptor rewards | | | | | | |
| | appropriate behaviors and confronts and | | | | | | |
| 1.4 | manages inappropriate behaviors Defines diversity in terms of gender, race, | | | | | | |
| 1.4 | religion, ethnic, sexual orientation, age, | | | | | | |
| | etc. | | | | | | |
| 1.5 | Engages staff and others in decision- | | | | | | |
| 1.5 | making | | | | | | |
| 1.6 | Identifies how the preceptor represents | | | | | | |
| 1.0 | the organization to non-health care | | | | | | |
| | constituents within the community | | | | | | |
| 1.7 | Collaborates with physicians to determine | | | | | | |
| | patient care equipment and facility needs | | | | | | |
| 1.8 | Determines current and future supply and | | | | | | |
| | demand for nursing care | | | | | | |
| | COMPETENCY 2; KNOWLEDGE OF THE | | | | | | |
| | HEALTH CARE ENVIRONMENT | | | | | | |
| 2.1 | Maintains knowledge of current nursing | | | | | | |
| | practice and the roles and functions of | | 1 | | | | |
| | patient care team members | | | | | | |

| 2.2 | Articulates various delivery systems and | | | | |
|-----|---|--|--|--|--|
| | patient care models and the | | | | |
| | advantages/disadvantages of each | | | | |
| 2.3 | Articulates federal and state payment | | | | |
| | systems and regulations, as well as private | | | | |
| | insurance issues, which affect the | | | | |
| | organization's finances | | | | |
| 2.4 | Interprets impact of legislation at the state | | | | |
| | or federal level on nursing and health care | | | | |
| | organizations | | | | |
| 2.5 | Articulates the role of the governing body | | | | |
| | of the organization in the following areas: | | | | |
| | Fiduciary responsibilities; Credentialing; | | | | |
| | and Performance management | | | | |
| 2.6 | Disseminates research findings to patient | | | | |
| | care team members | | | | |
| 2.7 | Monitors clinical activities to identify both | | | | |
| | expected and unexpected risks using | | | | |
| | informatics and healthcare technology | | | | |
| 2.8 | Articulates the organization's decision- | | | | |
| | making for the utilization/case | | | | |
| | management model adopted by the | | | | |
| | organization. | | | | |
| 2.9 | Defines metrics as related to process | | | | |
| | improvement | | | | |
| 2.1 | Identifies areas of risk/liability | | | | |
| 0 | | | | | |
| | | | | | |

| CON | IPETENCY 3: Leadership | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 3.1 | Recognizes one's own method of decision- making and the role of beliefs, values and inferences | | | | | | |
| 3.2 | Assesses one's personal, professional and career goals and do career planning | | | | | | |
| 3.3 | Synthesizes and integrate divergent viewpoints for the good of the organization | | | | | | |
| 3.4 | Develops a succession plan for one's own position | | | | | | |
| 3.5 | Utilizes change theory to plan for the implementation of organizational changes | | | | | | |

| COM | PETENCY 4: Professionalism | 1 | 2 | 3 | 4 | N/ | Comments |
|-----|---|---|---|---|---|----|----------|
| | | | | | | Α | |
| 4.1 | Answers for the results of own behaviors and | | | | | | |
| | actions | | | | | | |
| 4.2 | Develops own career plan and measure | | | | | | |
| | progress according to that plan | | | | | | |
| 4.3 | Articulates the application of ethical principles | | | | | | |
| | to operations | | | | | | |
| 4.4 | Advocates use of documented best practice | | | | | | |
| 4.5 | Role models the perspective that patient care | | | | | | |
| | is the core of the organization's work | | | | | | |
| 4.6 | Participates in at least one professional | | | | | | |
| | organization | | | | | | |

| CON | IPETENCY 5: Business Skills | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 5.1 | Educates patient care team members on financial implications of patient care decisions | | | | | | |
| 5.2 | Identifies clinical and leadership skills necessary for performing job related tasks | | | | | | |
| 5.3 | Understands what organizations should measure in order to balance the financial perspective | | | | | | |
| 5.4 | Analyzes marketing opportunities | | | | | | |
| 5.5 | Recognizes the utility of nursing involvement in the planning, design, choice and implementation of information systems in the practice environment | | | | | | |

Provide additional Comments as needed:

Faculty: Provide a summary of the clients evaluated with the student.

FACULTY / PRECEPTOR SIGNATURE

DATE

STUDENT SIGNATURE

DATE

Do you recommend this preceptor for continued use?

Yes: ______Strengths: ______

Weaknesses (if any): ______ No: _____ Rationale: _____

Texas A&M International University FNP CLINICAL EVALUATION FORM Preceptor Evaluation/Faculty Evaluation/FNP Self-Evaluation Form

Instructions: This form is to be used to evaluate student performance and for FNP student's self-evaluation. Satisfactory clinical performance requires a score of "3 or 4" on the questions items.

| Midterm | Final |
|---------|-------|
|---------|-------|

| Student name: | | | | |
|---------------------|-----------|--------------------------|-----------|--|
| Evaluation by: Self | Preceptor | Faculty | Course #: | |
| Course Title: | | Clinical hours completed | | |

KEY: Fail 1& 2

Pass 3 & 4

1Does not meet standard3Meets standard2Inconsistently meets standard4Exceeds standardsN/A Not applicable (Advanced Health Assessment Practicum)

COMPETENCIES & CRITICAL ELEMENTS

| COM | PETENCY 1: Practice Health Promotion, Health | 1 | 2 | 3 | 4 | N/ | Comments |
|-------|---|---|---|---|---|----|----------|
| Prote | ection, Disease Prevention & treatment | | | | | Α | |
| 1.1 | Performs comprehensive organized history and | | | | | | |
| | physical examinations. | | | | | | |
| 1.2 | Perform periodic focused history and physical | | | | | | |
| | examinations. | | | | | | |
| 1.3 | Differentiate between normal and abnormal findings | | | | | | |
| 1.4 | Develop differential diagnoses by priority. | | | | | | |
| 1.5 | Plan appropriate diagnostic strategies & testing. | | | | | | |
| 1.6 | Performs appropriate diagnostic strategies and | | | | | | |
| | technical skills. | | | | | | |
| 1.7 | Diagnoses complex acute, critical, and chronic physical | | | | | | |
| | and mental illness | | | | | | |
| 1.8 | Formulate plan of care to address client's needs | | | | | | |
| 1.9 | Prescribes appropriate pharmacologic therapy. | | | | | | |
| 1.1 | Prescribes appropriate non-pharmacologic therapies. | | | | | | |
| 0 | | | | | | | |
| 1.1 | Promote safety and risk reduction. | | | | | | |
| 1 | | | | | | | |
| 1.1 | Initiates appropriate referral and consultations with | | | | | | |
| 2 | specialist & support services. | | | | | | |

| 1.1 | Performs therapeutic interventions & procedures to | | | |
|-----|--|--|--|--|
| 3 | stabilize acute & critical health problems. | | | |
| 1.1 | Accurately documents comprehensive evaluation, | | | |
| 4 | assessment and plan of care. | | | |

| CON | IPETENCY 2: Nurse Practitioner-Patient Relationship | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 2.1 | Maintains confidentiality and privacy. | | | | | | |
| 2.2 | Builds therapeutic relationship with clients & families. | | | | | | |
| 2.3 | Develops mutually acceptable plan of care | | | | | | |
| 2.4 | Facilitates client and family decision-making regarding complex and critical treatment decisions | | | | | | |

| CON | IPETENCY 3: Teaching-Coaching and Professional Role | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 3.1 | Educates clients, families and caregivers regarding current health problems, treatment, complications, health promotion, and disease prevention as appropriate. | | | | | | |
| 3.2 | Utilize an evidence-based approach to care using current standards. | | | | | | |
| 3.3 | Collaborate effectively with members of the health care team. | | | | | | |
| 3.4 | Provides care recognizing professional limitations. | | | | | | |
| 3.5 | Accepts feedback and constructive criticism. | | | | | | |
| 3.6 | Demonstrates self-direction and seeks opportunities to assist other health care team members | | | | | | |
| 3.7 | Utilizes time effectively and efficiently | | | | | | |
| 3.8 | Demonstrates professional approach to clients, families and colleagues. | | | | | | |

| CON | IPETENCY 4: Managing & Negotiating Health Delivery | 1 | 2 | 3 | 4 | N/ | Comments |
|------|---|---|---|---|---|----|----------|
| Syst | Systems & Quality Practice | | | | | Α | |
| 4.1 | Works collaboratively to manage transitions across the healthcare delivery system. | | | | | | |
| 4.2 | Promote efficient, cost effective use of resources. | | | | | | |
| 4.3 | Identifies how situations related to access, cost, efficacy and quality influence care decisions. | | | | | | |
| 4.4 | Demonstrate responsibility in monitoring practice for quality of care | | | | | | |
| 4.5 | Functions with credentialing and scope of practice. | | | | | | |

| CON | IPETENCY 5: Demonstrate Cultural Competence | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 5.1 | Show respect for the inherent dignity of every human being regardless of age, gender, religion, socioeconomic class, sexual orientation and ethnicity. | | | | | | |
| 5.2 | Recognize cultural issues and interact with clients in culturally sensitive ways. | | | | | | |
| 5.3 | Provide appropriate educational materials that address the language and cultural beliefs of the clients. | | | | | | |
| 5.4 | Incorporate cultural preferences, health beliefs, behaviors and practices into management plan. | | | | | | |

| CON | IPETENCY 6: Ensure the quality of health care practice | 1 | 2 | 3 | 4 | N/ A | Comments |
|-----|--|---|---|---|---|---------|----------|
| 6.1 | Assume accountability for practice. | | | | | | |
| 6.2 | Engage in self-evaluation concerning practice and use evaluation information to improve. | | | | | | |
| 6.3 | Collaborate and/or consult with members of the health care team about variations in health outcomes. | | | | | | |

Provide additional Comments as needed:

Faculty: Provide a summary of the clients evaluated with the student.

FACULTY / PRECEPTOR SIGNATURE

DATE

STUDENT SIGNATURE

DATE

TEXAS A&M INTERNATIONAL UNIVERSITY College of Nursing and Health Sciences Canseco School of Nursing FNP Faculty Evaluation of Preceptor and Agency

| Course Number/Name: _ | |
|-----------------------|--|
| Preceptor Name: | |
| Site: | |
| Completed by: | |
| Semester: | |
| | |

Key:

- 1. Please mark an "X" in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.
- 2. Space is provided after each statement if you choose to add any comments.

| Frequently | Fairly | Sometimes | Seldom | Not |
|------------|--------|-----------|--------|-----|
| 4 | 3 | 2 | 1 | 0 |

| | PRECEPTOR | 4 | 3 | 2 | 1 | 0 | Comments |
|-----|--|---|---|---|---|---|----------|
| 1. | The preceptor's professional experience was appropriate. | | | | | | |
| 2. | The preceptor was available to the student for clinical assistance. | | | | | | |
| 3. | The preceptor allowed the student to formulate a plan of care for clients based on the science of nursing and related disciplines. | | | | | | |
| 4. | The preceptor allowed the student to use cognitive, affective, perceptual, and psychomotor skills to promote health with clients based on the science of nursing and related disciplines. | | | | | | |
| 5. | The preceptor allowed the student to practice collaborative skills in conjunction with other members of the healthcare team in order to provide comprehensive care to clients. | | | | | | |
| 6. | The preceptor encouraged the student to assume increasing clinical responsibility during the semester. | | | | | | |
| 7. | The preceptor communicated clear expectations for student learning. | | | | | | |
| 8. | The preceptor provided immediate and adequate feedback with questions and client presentations. | | | | | | |
| 9. | The preceptor was supportive and accessible for consultation. | | | | | | |
| | The preceptor led student through decision making rather than giving own impressions. | | | | | | |
| 11. | The preceptor allowed student to assess client, make diagnoses, and suggest interventions and plan care. | | | | | | |

| 12. | The preceptor offered constructive comments to | | | | |
|-----|---|--|--|--|--|
| | student regarding assessment, diagnosing, planned | | | | |
| | interventions and care. | | | | |
| 13. | The preceptor provided an environment for critical | | | | |
| | thinking and decision making for the student. | | | | |
| | AGENCY/CLINICAL SETTING | | | | |
| 1. | The clinical setting provided opportunities for the | | | | |
| | student to meet the clinical objectives. | | | | |
| 2. | The host personnel fostered and encouraged student | | | | |
| | participation on the health team. | | | | |
| 3. | The agency/facility meeting areas (A/V equipment, | | | | |
| | facilities, etc.) were adequate and accessible. | | | | |
| 4. | The agency/facility had supplies, materials, and | | | | |
| | equipment that met student needs. | | | | |
| 5. | The agency/facility was well-equipped to handle the | | | | |
| | client visits. | | | | |
| 6. | The agency/facility provided the student with good | | | | |
| | learning experiences to meet clinical objectives. | | | | |
| 7. | The agency/facility provided the student with an | | | | |
| | environment that stimulated ideas for research. | | | | |
| 8. | The agency/facility personnel demonstrated an | | | | |
| | understanding of professional responsibility through | | | | |
| | adherence to legal and ethical standards of practice. | | | | |

Do you recommend the clinical site for continued use?

Yes_____ Stipulations (if any) ______ No_____ Rationale_____

This site is appropriate for (check all that applies):

Advanced Health Assessment_____ Wellness and Health Promotion _____

Diagnostic Lab_____ Acute & Chronic Part 1_____ Acute & Chronic II______

Integrated Clinical Practicum_____

Strengths of site:

Weaknesses (if any) of site:

Texas A&M International University

College of Nursing and Health Sciences Conseco School of Nursing

NADM Faculty Evaluation of Preceptor and Agency

| Course Number/Name: | |
|------------------------|---|
| Preceptor Name: | |
| Clinical Faculty Name: | |
| Site: | |
| Completed by : | |
| Semester: | |
| Date of Completion: | _ |

Key:

- 1. Please mark an X in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.
- 2. Space is provided after each statement if you choose to add any comments.

| All of the | Most of the time | Sometimes | Seldom | Other: Please specify |
|------------|------------------|-----------|--------|------------------------------|
| 4 | 3 | 2 | 1 | 0 |

| Preceptor Characteristic | Ranking | | Comments |
|--|---------|--|----------|
| Provided all needs that students must | | | |
| meet for student participation in a | | | |
| preceptorship at the health agency at | | | |
| a pre-planning meeting. | | | |
| Participated in planning with the | | | |
| student and clinical faculty the | | | |
| management experience . | | | |
| Completed all written agreement | | | |
| forms between the program, | | | |
| affiliating agency, and preceptor in a | | | |
| timely manner. | | | |
| Oriented me to the clinical agency. | | | |
| Participates with the student in | | | |
| identifying what activities will meet | | | |
| required competencies. | | | |
| I s amenable to meeting with both | | | |
| clinical faculty and students for mid- | | | |
| term and final evaluations. | | | |
| Discussed both areas where student | | | |
| excelled and where student needed | | | |
| extra work in meeting the | | | |
| competencies or related behaviors in | | | |
| the precepted environment. | | | |

| Provided resources (other personnel, suggested actions, readings, manuals, agency documents, etc) for the student to use to attain information needed to be successful in meeting course objectives. Provided work space to meet with | | | |
|---|--|--|--|
| clinical faculty during evaluations and for the student in completing work associated with preceptorship. | | | |
| Expressed management ideas and that were progressive and compatible with AONE competencies and ANA Standards and Scope of Practice | | | |
| In-depth participation during mid and final evaluation sessions with examples of competency level attained and suggestions appropriate for progression. | | | |
| Communicated in a manner that demonstrated precepting graduate administration students was important to the future of health care. | | | |
| Facilitated beginning autonomy in specific role for the graduate level student appropriate for the level of the student. | | | |
| Credential(s)/experience of the preceptor was/were appropriate for the preceptor role | | | |
| The preceptor showed an interest in the curriculum, program, and student. | | | |
| AGENCY CHARACTERISTICS | | | |
| The agency retained the ultimate responsibility for all administrative duties | | | |
| The preceptor's work schedule allowed sufficient time* to meet the learning needs of the student. | | | |
| The agency facilitated student placement by working with student, university, and clinical faculty. | | | |

*'Sufficient time' is interpreted with the knowledge that the masters' level student is responsible for their own learning, asking questions, and retrieving data after limited suggestions and explanations.

Other evaluatory comments appropriate to preceptorship.

COMMENTS:

- 1. STRENGTHS OF PRECEPTOR:
- 4. WEAKNESSES OF PRECEPTOR:
- 3. STRENGTHS OF AGENCY:
- 4. WEAKNESSES OF AGENCY:

Other comments as needed.