



MSN CLINICAL HANDBOOK

Handbook is for students and preceptors in all Practicums

**MISSOURI VALLEY COLLEGE - SCHOOL OF NURSING
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PRECEPTOR'S WELCOME

The faculty and staff at Missouri Valley College School of Nursing thank you for your willingness to serve as a clinical preceptor for Family Nurse Practitioner graduate students. We realize that as preceptors, you not only dedicate your time and energy, but you are also challenged with patience as you help students learn new skills that will help them navigate the path of becoming an advanced practice nurse. Your leadership skills along with your expertise, self-confidence, and role modeling will help students gain knowledge and skills necessary to safely care for diverse patients in a variety of clinical settings. The faculty appreciates these valuable learning experiences and look forward to working with you as we improve our program and work with other disciplines to meet the demands of an ever changing health care system.

Please read the handbook as it will help you understand your role as a preceptor. If you have questions, don't hesitate to contact the administrative assistant or the program director. Emails and phone numbers can be found under faculty profiles in the handbook. Also, if you would like communication at specific times regarding the student's performance, please contact the administrative assistant or instructor/professor with how and when you would like to be contacted. It is our desire to make this a positive experience for all parties while still meeting the students' clinical objectives.

Once again, thank you for agreeing to share your skills and expertise with our graduate students. The faculty and administration from Missouri Valley College and the School of Nursing recognize and appreciate your contributions to our College and to the profession of nursing.

THE MISSION AND PHILOSOPHY OF THE MVC NURSING PROGRAM

MISSION: The mission is to advance the art and science of nursing through innovative teaching, research, and clinical practice. To educate and train diverse groups of nursing professionals to interact with interdisciplinary teams thus promoting optimal health outcomes in individuals, families, and global communities while promoting a culture of lifelong learning.

PHILOSOPHY: The foundation for professional nursing education is embedded in the natural sciences, social sciences, and humanities which enhances critical thinking and reasoning, while promoting high ethical standards in providing holistic care for individuals, families, global communities, and societies. The baccalaureate of science in nursing prepares a nurse generalist and lays the foundation for graduate education to promote personal, professional and intellectual growth. The graduate of the School of Nursing will be able to assimilate theory, concepts, research, and leadership to help reshape the future of nursing practice while meeting the demands of an ever-changing healthcare environment.

FACULTY BELIEFS: Nursing is both an art and a science. The practice of nursing occurs in dynamic and changing healthcare environments. Patient's individual needs are met by using the holistic approach and through the use of the nursing process. Professional nurses are part of interprofessional healthcare teams that care for diverse populations across the lifespan. Nurses must be caring and compassionate, have critical thinking skills and sound clinical judgment, be competent, be self-directive, be ethical, practice within their scope, practice with cultural sensitivity, promote health and wellness across the lifespan, be a lifelong learner, and also be a patient advocate.

FACULTY COMMITMENT: The faculty is committed to academic and clinical excellence in preparing students to become professional nurses. Nursing educators are committed to a learner-centered process which uses knowledge gained from general education courses and knowledge and skills gained from nursing courses to prepare the nurse to practice safely and competently. Acquisition of knowledge and skills are achieved through various means such as the teaching-learning process, research, instructional design/methodologies, and internal and external resources. The faculty members are lifelong learners and instill this trait in their students. Lifelong learning increases knowledge, skills, professionalism, and is beneficial for medical communities in caring for diverse populations with complex needs in a variety of health care settings.

PROFESSIONAL NURSING STANDARDS

Professional Standards The School Of Nursing Adheres To:

- *National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Competencies (2016);*
- *National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Competencies [NP Core Competencies Content Work Group] (2017);*
- *NTF Criteria for Evaluation of Nurse Practitioner Programs (2016);*
- *MSBoN Regulations, Chapter 2, Nursing Education (2021);*
- *AACN Essentials of Master's Education (2011);*
- *CCNE Accreditation Standards (2018);*
- *The Essentials of Master's Education for Professional Nursing Practice (2011) and the*
- *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (2008).*

**Student Learning Outcomes were developed utilizing AACN Essentials of Master's Education (2011) and The Essentials of Master's Education for Professional Nursing Practice (2011). All didactic and clinical courses are planned following the guidelines of the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Competencies (2016) and National Organization of Nurse Practitioners (NONPF) [Content Work Group] (2017).*

NURSING CURRICULUM DESIGN

The Family Nurse Practitioner (FNP) curriculum is designed to prepare registered nurses (RNs) to work in a more advanced role in the medical domain/community. It is scholarly, evidence-based, context relevant, and is unified. The MSN curriculum is congruent with the SON mission and is designed to “build and expand on the baccalaureate education in nursing” (AACN, 2011). This allows graduates to practice at a higher level in a variety of clinical settings and also to commit to being a lifelong learner. Should the advanced practice nurse desire a terminal degree, the master’s in education will promote a smoother transition into a doctorate degree.

The Family Nurse Practitioner (FNP) curriculum provides theoretical and evidenced-based clinical components that prepare the registered nurse to undertake a more advanced practice/ specialized role requiring a higher level of thinking to provide patient-centered care in the health care setting, especially primary care across the lifespan. In addition, course work focuses on enhancing professional skills such as education, counseling, managing, mentoring, leadership, licensed independent practice, collaboration, using research and technology to monitor and make changes in practice patterns, and advocating for patient’s health care needs chronic and acute. The course work/instruction is online making it possible for students to advance their education while balancing their personal and professional lives. The curriculum also prepares graduates to be eligible to sit for the American Nurses Credentialing (ANCC) and the American Academy of Nurse Practitioners (AANP) certification exams. They are eligible for licensure as an FNP in the state of Missouri. However, other state requirements may vary. Students need to check with their state of licensure/certification before applying to the program.

The practicum component of the curriculum enhances awareness, and understanding of other cultures/ethnic groups to promote cross cultural diversity and sustainability within the academic and practice setting. They also support interprofessional collaboration between disciplines to improve population health outcomes.

Total course work for the MSN-FNP is 44 hours. Clinical hours are a total of 600. * Beginning January 2024, clinical hours will increase to 750 to meet new NONPF guidelines.

[MSN-FNP Website](#)

PROGRAM STUDENT LEARNING OUTCOMES

Upon graduation, students shall meet the following student learning outcomes:

MSN PSLO 1: Evaluates research, theory, and principles of scientific inquiry to identify gaps and inequities in care while using best practices to influence public policy and improve care across the healthcare spectrum.

MSN PSLO 2: Modifies leadership skills based on advanced knowledge, nursing science, emerging trends, and critical skills/decision making to guide professional practice, encourage life-long learning, promote advocacy efforts, while advocating for policies that evaluate the effectiveness of complex health care systems.

MSN PSLO 3: Plans ethical, culturally sensitive advanced nursing care in collaboration with multidisciplinary teams and at the systems level to avoid bias and barriers that can impact achieving health equity, cost, and health outcomes.

MSN PSLO 4: Integrates advanced scientific knowledge when planning care that is affordable, accessible, cost-effective, and of high quality to diverse patient populations, while influencing health policy to transform health care and improve population outcomes.

MSN PSLO 5: Collaborates effectively at the provider level, and with all disciplines while using regulatory standards within the information systems/technology to manage care, improve care, evaluate care, control of cost of care, and to reduce adverse effects, mitigate risk, while improving outcomes and safety.

MSN PSLO 6: Develop strategies to coordinate care that is respectful, compassionate, respectful of differences and needs while promoting self-care management, and building relationships with patients and families, and fostering partnerships with community organizations to improve population health outcomes.

**Student Learning Outcomes were developed utilizing AACN Essentials of Master's Education (2011) and The Essentials of Master's Education for Professional Nursing Practice (2011). All didactic and clinical courses are planned following the guidelines of the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Competencies (2016) and National Organization of Nurse Practitioners (NONPF) [Content Work Group] (2017).*

NURSE PRACTITIONER CORE COMPETENCIES (NPCC)

At completion of the program, the following NP-CCs demonstrate entry level competencies for the family nurse practitioner.

1. Scientific foundations
 2. Leadership
 3. Quality
 4. Practice Inquiry
 5. Technology and Information Literacy
 6. Policy
 7. Health Delivery Systems
 8. Ethics
 9. Independent Practice
- (NONPF, 2016)

MSN PROGRAM GOALS

The goals of the Master in Science in Nursing degree program are to:

1. Advance the education for the baccalaureate prepared nurse to serve in leadership roles in practice setting, advanced nursing practice, nursing education, and/or administrative roles.
2. Prepare graduates for advanced practice nursing to meet the healthcare needs of diverse populations (individuals, families, groups and communities) in multiple health care settings such as primary care, hospital inpatient/outpatient, managed care organizations, and governmental organizations.
3. Prepare nurse practitioners qualified and dedicated to provide culturally sensitive and competent primary health care to diverse people.
4. Use research-based/ best practices from nursing and other disciplines to advocate for policy changes that will improve the health outcomes of individuals, families, communities, and aggregate populations.
5. Promote a systems perspective to deliver high quality, cost effective, and safe care by working collaboratively with organizational leadership.

FACULTY PROFILES

SON Staff Office Hours: 8:00 PM – 4:30 PM CT Monday-Friday SON Faculty

- Student Virtual online (48-72 hours response time). Phone or virtual conferencing by appointment.
- Refer to course syllabi for individual faculty availability.

<i>Name</i>	<i>Credentials</i>	<i>Title</i>	<i>Contact Info</i>	<i>Contact: Phone</i>
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PRACTICUM STUDENT LEARNING OUTCOMES/OBJECTIVES—COURSES

NURS 561 PRIMARY CARE PRACTICUM I (150 patients, can see both peds and adults)

***Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.**

Upon successful completion of the practicum the student will be able to:

1. Complete comprehensive history taking, physical exams, and documents physical and psychosocial findings on primary care patients across the lifespan.
2. Analyze assessment data from the history and physical exam and/or procedures to order diagnostic testing, make differential diagnoses/final diagnosis, and implement cultural sensitive and evidence-based treatment plans.
3. Modify treatment plans for acute and chronic illnesses based on effectiveness and the patient changing health care needs.
4. Integrate health promotion, disease prevention, anticipatory guidance, ethical guidance, and health education into the plans of care for diverse populations while promoting/building professional relationships with families.
5. Develop collaborative and professional relationships with all interdisciplinary health teams to use technology in providing quality, accessible, and cost-effective care to improve health outcomes.
6. Value the role of the nurse practitioner in health care and refers patients outside scope of practice.
7. Evaluate theory and research and use findings relevant to practice in caring for patients across the lifespan in primary care settings.
8. Use informational technology to enhance clinical judgment, support collaborative practice, stay current in emerging health trends, and implement organizational policies to help manage resource allocations in provision of safe and competent patient care.
9. Presents patient assessment data/needs in a clear, concise, compassionate, and professional manner to the preceptor.

NURS 571 PRIMARY CARE PRACTICUM II (250 patients, can see both peds and adults)

***Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.**

Upon successful completion of the practicum the student will be able to:

1. Complete comprehensive history taking, physical exams, and documents physical and psychosocial findings on primary care patients across the lifespan.
2. Analyze assessment data from the history and physical exam and/or procedures to order diagnostic testing, make differential diagnoses/final diagnosis, and implement cultural sensitive and evidence-based treatment plans.
3. Modify treatment plans for acute and chronic illnesses based on effectiveness and the patient changing health care needs.
4. Integrate health promotion, disease prevention, anticipatory guidance, ethical guidance, and health education into the plans of care for diverse populations while promoting/building professional relationships with families.
5. Develop collaborative and professional relationships with all interdisciplinary health teams to use

- technology in providing quality, accessible, and cost-effective care to improve health outcomes.
6. Value the role of the nurse practitioner in health care and refers patients outside scope of practice.
 7. Evaluate theory and research and use findings relevant to practice in caring for patients across the lifespan in primary care settings.
 8. Use informational technology to enhance clinical judgment, support collaborative practice, stay current in emerging health trends, and implement organizational policies to help manage resource allocations in provision of safe and competent patient care.
 9. Presents patient assessment data/needs in a clear, concise, compassionate, and professional manner to the preceptor.

NURS 580 PRIMARY CARE PRACTICUM III (200 patients and can see both peds and adults; can do 125 in a speciality area if approved by the director/dean)

***Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.**

Upon successful completion of course requirements, the student should be able to:

1. Complete comprehensive history taking, physical exams, and documents physical and psychosocial findings on primary care patients across the lifespan.
2. Analyze assessment data from the history and physical exam and/or procedures to order diagnostic testing, make differential diagnoses/final diagnosis, and implement cultural sensitive and evidence-based treatment plans.
3. Modify treatment plans for acute and chronic illnesses based on effectiveness and the patient changing health care needs.
4. Integrate health promotion, disease prevention, anticipatory guidance, ethical guidance, and health education into the plans of care for diverse populations while promoting/building professional relationships with families.
5. Develop collaborative and professional relationships with all interdisciplinary health teams to use technology in providing quality, accessible, and cost-effective care to improve health outcomes.
6. Value the role of the nurse practitioner in health care and refers patients outside scope of practice.
7. Evaluate theory and research and use findings relevant to practice in caring for patients across the lifespan in primary care settings.
8. Use informational technology to enhance clinical judgment, support collaborative practice, stay current in emerging health trends, and implement organizational policies to help manage resource allocations in provision of safe and competent patient care.
9. Presents patient assessment data/needs in a clear, concise, compassionate, and professional manner to the preceptor.

GENERAL INFORMATION: CLINICAL/PRECEPTOR PROGRAM

PURPOSE: To assist the student in making a timely and smooth transition from the student role to the advanced practice nurse role (APRN).

IMPORTANCE: Students need the opportunity to see nurse practitioners in action. A preceptor program provides the opportunity for APRNs to mentor/precept students that will become future health care leaders of tomorrow. Students must come prepared to take advantage of every learning experience. Mentors/preceptors can assist students to think and perform at a higher level, improve communication skills, find ways to handle role conflict, work as effective team members, learn collaborative skills, become better clinicians by using best practices, use critical thinking skills to help in priority/decision making, and also to improve time management and organizational skills. This experience allows students to see first-hand the need for peer networking and support of the nursing profession. It also builds professional and personal friendships that can last a lifetime.

PRECEPTOR: An experienced, competent, caring, certified APN, MD, DO who agrees to serve as a role model, leader, consultant, mentor, and teacher, helping students to bridge the gap between academia and what can be expected in the “real world” of caring for diverse patients in a variety of clinical settings.

PRECEPTEE: A licensed registered nurse (RN) student who will spend time with a preceptor (1:1) to increase learning opportunities through realistic advanced practice nursing experiences in a designated clinical setting/environment.

AGENCY: Clinical setting that is approved by the School of Nursing (SON) and where the student will do the clinicals/practicum. The SON and the agency reserve the right to decline. The students will follow the agency's policies and procedures when in the clinical setting. Agency affiliations are done on a semester by semester basis. However, they are reviewed on an annual basis.

FACULTY ADVISOR: Nursing instructor/professor who oversees the experience and works closely with the preceptor to assure the student's success.

PRECEPTOR CRITERIA: Must hold a current unencumbered license to practice in the state where the practicum site is located.

1. Preceptors should hold a Master of Science in Nursing from an NLNAC or CCNE accredited program and have at least one-year clinical experience.
2. Preceptors who are not master's prepared but are certified by ANCC or AANP and have a minimum of 2-5 years of full-time clinical experience may also be considered.
3. As stated in the NTF (2016) Criteria for Evaluation of Nurse Practitioner Programs, criterion IV.B3 “A preceptor has educational preparation to his/her area(s) of supervisory responsibility and at least one year of clinical experience.” To be eligible to sit for the ANCC or AANP certification, you must have at least one documented experience with an APRN during your practicum experiences. Our faculty recommend a minimum of 600 hours during your three (3) practicums. The clinical experiences/practicums are necessary to achieve the course objectives/SLOs of the FNP program. Spending hours with both a physician and NP will help you develop your own management/leadership style that will help you master time management and provide cost effective and EB care which will help you be successful in your new career as an NP.

4. Physician preceptors should hold a medical or osteopathic degree from an accredited program and must be board certified or board eligible in primary care.
5. Physician assistants (PAs) are not allowed for practicum experiences.
6. Immediate supervisors/bosses at the student's workplace may not serve as preceptors.
7. Preceptors may not be related to the student, husband/wife, partner, boss/supervisor, or significant other of the student.

FACULTY PRESENCE: There will not be a faculty member at the clinical/practicum site. The faculty member will communicate with the preceptor and the student to assure learning course objectives are being met and that lines of communication are open. If the preceptor or faculty feel a site visit is necessary, it will be conducted at the earliest time frame possible. The cost of the site visit will be charged to the student.

STUDENTS AS ADULT LEARNERS: Our students are adult learners (both traditional and nontraditional) that want to learn, be self-directed, use life experiences in the learning process, and are motivated to achieve personal and professional goals by returning to school. Faculty at this college realize that not all students are alike and learn the same way, thus we support the diversity found in our student population while creating positive learning environments/experiences allowing students to reach their educational/professional goals.

COLLABORATION: Faculty members work with the clinical agency staff to decide on the appropriate preceptors for each student. The course instructor/professor is responsible for developing the Clinical Practicum Learning Objectives. He or she will share these with the preceptor. However, nursing faculty are responsible for the final evaluation of the student with input of the preceptor if indicated.

FEEDBACK IS IMPORTANT: Constructive feedback helps students grow professionally. It is encouraged and needed for students to take advantage of new and challenging learning opportunities and to also enhance practice methods. Feedback should be specific and done in a positive/constructive and timely manner. Provide specific examples of what they have done well and not so well. For things not done so well, educate the student on how to use best practices to improve patient care and health outcomes. Create a positive learning environment to promote positive learning that assures accountability and responsibility within the APN role.

PRECEPTOR EVALUATION OF THE STUDENT/EXPERIENCE: The preceptor will be asked to evaluate the student's performance in the clinical setting at midterm and at the end of the practicum. A copy of the form(s) can be found on the LMS.

STUDENT EVALUATION OF EXPERIENCE/PRECEPTOR: Before the clinical experience ends, the student will evaluate the experience/site and the preceptor. A copy of the form(s) can be found on the LMS.

CLINICAL LOG FORM: The preceptor shall document and sign the form attesting to the number of clinical hours/patients seen while the student is in the agency. The student is responsible for providing you with this form and obtaining your signature. A copy of the form(s) can be found on the LMS.

STUDENT ADEQUATE PLACEMENT

POLICY: Students must successfully complete the following courses before being allowed placement in the practicum courses, NURS 510: NURS 520: NURS 530: NURS 540: NURS 541: NURS 550: and NURS 560 before taking NURS 561: and NURS 561 before taking NURS 571: and must successfully complete NURS 561 and NURS 571 before taking NURS 580.

NURS 561: PRIMARY CARE PRACTICUM I (REQUIRED 150 HRS.)

*Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.

- Students **cannot** begin practicum hours before the starting date of the term.
- Students completing their Primary Care I experience in a primary care setting/ office with a physician or a NP will need to see 150 patients and do 150 hours during this rotation.
- No specialty hours are allowed during the Primary Care Practicum I.

NURS 571: PRIMARY CARE PRACTICUM II (REQUIRED 250 HRS.)

*Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.

- Students **cannot** begin practicum hours before the starting date of the term.
- Primary Care Practicum II experiences may be completed in family practice or internal medicine offices that are not just a specialty clinic.
- Students completing their Primary Care II experience in a primary care setting such as family practice or internal medicine with a physician or a NP will need to see 250 patients and do 250 hours during this rotation.
- No specialty hours or pediatric hours are allowed during the Primary Care Practicum II.

NURS 580: PRIMARY CARE PRACTICUM III (REQUIRED 200 HRS.)

*Beginning January 2024, clinical hours will increase to 750 based on NONPF guidelines, this will lead to an increase to 250 patients and 250 hours seen in each practicum.

- Students **cannot** begin practicum hours before the starting date of the term.
- The Primary Care Practicum III should occur in a primary care office or an internal medicine office that provides care to all age groups and see 200 patients and complete 200 clinical hours.
- Students may complete a maximum of 100 specialty hours at an approved specialty clinic. However, extra documentation may be needed. All specialty hours are subject to approval. See below:
- Approved clinics with telemedicine
- Acute care settings
- Emergency Departments
- Diagnostic Specialty Clinics, i.e. Women's Health, Cardiac, OB, Diabetic/Wound Centers, Pediatrics, Dermatology, Dialysis, etc.
- Hospitalist

PATIENT CONTACT TIME

1. Students are allowed eight hours of observation to learn your leadership style and ways of managing patient care.
2. Over the next week, the student should begin to increase time in patient interaction, completing a history, review of systems, HPI, physical exam, and developing treatment plans. As the student's skills increase, it is expected that the student will develop a list of differential diagnoses, make an appropriate diagnosis, and present a comprehensive treatment plan.
3. Clinical experiences include direct patient contacts which provide learning opportunities and improve clinical knowledge/skills. In the beginning students will spend more time with each patient encounter. As the student progresses, the student time will decrease and the student should see 1-2 patients per hour. Students are not expected to see as many patients as their preceptors.
4. Because the practicums are guided learning experiences, we expect the student to ask questions, use evidence-based practice, including cost, to improve patient outcomes, thus allowing them to see the need for continual learning now and throughout their career.
5. Clinical time/experiences do not include seeing patients not outlined in the course, unless approved by lead faculty.
6. Students must see a minimum of 150 patients in Primary Care Practicum I, 250 patients in Primary Care Practicum II, and 200 patients in the Primary Care Practicum III.

PRACTICUM HOUR REQUIREMENTS

There are three separate practicum courses (12 sh) that includes a total of 600 hours of practicum experience(s) 150 hours in Primary Care Practicum I, 250 in Primary Care Practicum II, and 200 hours during the Primary Care Practicum III. Students enrolled in practicum courses should expect to spend a minimum of 16-24 hours per week in the clinic setting. Keep in mind, the preceptor may take a day off for a CME, vacation, illness, early closures, or holidays. Please plan in advance to avoid problems with completing hours on time.

PNP practicum hours must be completed within the assigned semester, and only 1 practicum can be taken per semester. We request that all hours be completed by the end of week 12-14, in order to allow time for evaluation and grading. Students should contact their instructor as early as possible if this will be an issue. If the student does not complete the practicum within the assigned semester, an incomplete grade may be granted, if approved by the SON Dean and Program Director. If approved, the student must complete the course in the following semester, and the student will not be allowed to progress in the program until the incomplete work has been completed. Refer to the following link: [MVC Catalog & Handbook](#) for Incomplete Grades.

DRESS/ATTIRE CODE CLINICAL SETTINGS

POLICY: Students must meet standards of professional dress/attire while representing MVC Nursing Program in participating/attending clinical experiences.

PROCEDURE: (Failure to comply with this policy will result in student being sent home)

1. Identification: MVC nursing students must include the school photo ID badge.
2. Shoes: Shoes must be enclosed at both the heel and the toe. Students may wear street shoes, athletic shoes, or dress shoes.
3. Lab Jackets/Coats: A white lab jacket/coat must be worn unless against clinical facility policy. No other type of sweater or jacket is permitted over the attire.
4. Nails: Nails must be clean and trimmed to a length no longer than the tip of your finger. Clear nail polish may be acceptable in certain areas, please check on hospital/agency policy first. No acrylic/artificial nails are to be worn in the hospital setting as they can harbor germs that can cause infections and place patients at risk.
5. Hair: Hair is to be off the shoulders, clean, and styled for the work setting. Mustaches, sideburns, and/or beards must be neatly trimmed and clean.
6. Jewelry: No hoop-or dangling earrings are allowed. One small stud or post earring per ear is allowed. No visible body piercing, including tongue rings are allowed. Necklaces, bracelets, pendants, or large watches are not allowed. Med alert bracelets are allowed.
7. Body Art: Body art or tattoos must be covered by professional clothing. A professional white T-Shirt may be worn to cover tattoos extending down the arms/or to the wrists.
8. Make-Up/Perfume: Makeup must be professional and kept to a minimum. No perfume, cologne, or aftershave is to be worn in the patient care areas and worn in moderation in non-patient care areas.
9. Miscellaneous: Students are to be bathed and smell clean, including tobacco smoke/vaping. Fragrance-free deodorant is to be worn at all times unless you have a note from the provider that you are unable to do so due to health reasons. Teeth are to be clean and breath free from odor including tobacco products. Contact lenses should be a natural eye color.
- 10. If there is a dress code policy at the clinical site, this supersedes the school policy.**

ROLES AND RESPONSIBILITIES

NURSING STUDENT

ORIENTATION:

- Participate in the agency and unit orientation.
- Become familiar with the skills and orientation lists.
- Become familiar with the policies and procedures of the agency.
- Schedule hours early with a preceptor to guarantee required hours will be met by the end of the semester.
- Provide accurate information on past learning/working experiences.
- Provide the preceptor with the **Course Objectives** to help plan the clinical learning experience and in meeting the course requirements.

PRACTICE:

- Follow agency policies and procedures.
- Provide safe/EB, competent, and ethical nursing care.
- Ask for assistance from your preceptor/supervisor when needed/indicated to perform care safely.
- Document patient information/data in an accurate and timely manner.
- Demonstrates use of best practices, priority setting, and organizational skills.
- Reports patient status or changing status to appropriate medical/APN preceptor.
- Completes comprehensive assessment, makes differential diagnoses, accurate diagnosis, orders and interprets diagnostic work-ups, implements and evaluates EB treatment plans.
- Assesses patients and modifies care according to nursing and legal standards.
- Effectively collaborates/communicates with all disciplines to assure positive patient outcomes.
- Portrays a professional image at all times including communication, attendance, dress code, and working with all disciplines.
- Accepts responsibility for own behavior and looks for opportunities to learn and improve nursing practice.
- Adheres to scope of practice.

COMMUNICATION:

- Communicate early with your preceptor/clinical instructor/professor any needed schedule changes, tardiness, or sickness.
- Post Clinic Report Sheets in the gradebook in a timely fashion/as outlined in the course syllabus. Must be signed by the student and preceptor.
- Communicate schedule changes with instructor and preceptor before making changes in previously approved schedule.
- Provide frequent and objective feedback to your preceptor regarding learning experience/ask for feedback on how to improve practice.
- Complete all course, self, site, instructor, preceptor evaluations.
- Complete graduate exit survey and satisfaction survey.

ROLES AND RESPONSIBILITIES

ADMINISTRATIVE ASSISTANT (AA) AND PROGRAM DIRECTOR

ORIENTATION:

- The Administrative Assistant will be responsible for sending all preceptors a letter.
- Approves preceptor and works with AA/and MSN Program Director and preceptor for a positive learning experience.
- Assure that agency, preceptor and department supervisors are ready for the student to begin learning experience(s).
- Provides the preceptor with all necessary material/information for the student's learning experiences.
- Assures questions have been answered to the preceptor's expectations.
- Assure that the clinical agency will have appropriate supervision for the student should the preceptor be absent.
- Faculty ratio is 1-8 for the practicum courses.
- Preceptor ratio for students is 1-1 for practicum courses.

FACULTY SUPERVISION:

- Assumes overall responsibility for educating and evaluation of the student.
- Works with AA to assure students are compliant with immunizations.
- Works with AA to assure students are compliant with CPR certification and professional liability insurance coverage.
- Serves as a liaison to the preceptor in evaluating the student's performance of clinical skills and in taking advantage of learning/educational opportunities while in the clinical setting.

COMMUNICATION:

- Collaborates/communicates with nursing students and preceptor and/or designee to make sure all understand the performance expectations, personal goals/objectives, and need to meet student learning outcomes.
- Provides guidance to assure the student's learning needs are being met in a timely manner.
- Serves as a resource to the nursing student and preceptor.
- Assures the student evaluation is completed by the preceptor in a timely fashion.
- Monitors students progress throughout course work/practicums so students can complete/pass the course.

FACULTY EVALUATION OF CLINICAL EXPERIENCE:

- Reviews the students evaluation of the clinical site to assure a positive experience and can use the site for future students.
- Use data from evaluations/surveys, if indicated, to make program improvements.
- The midterm evaluation has met, in progress, and not met. If the student has any not mets, the student must design an action plan and share it with the professor/instructor and preceptor within seven business days to assure there are no not mets by the end of the rotation.
- To pass the course, the student must make an 80% on the preceptor final evaluation of the student. However, the student must receive 100% on the four core questions. This will be worth 25% of the grade.

- To pass the course, the student must make 80% on the Faculty Evaluation of the Clinical Experience. This will be 25 % of the grade.

ROLES/RESPONSIBILITIES

PRECEPTOR

Demonstrate/role models understanding of the FNP role in a primary care setting.

1. Orient the student:
 - a. Facility and staff
 - b. Preceptor expectations
 - c. Plans for the learning/clinical experience
 - d. Collaboration in patient care management
 - e. Channels of communications
3. Serve as a role model/mentor helping the student to integrate theory into clinical practice.
4. Direct student learning experience to help achieve goals/objectives.
5. Promotes student responsibility/accountability to progress through practicum.
6. Provide immediate and constructive feedback allowing students to build more confidence in their clinical skills.
7. Creates an environment conducive to learning and solving complex problems.
8. Performs informal teaching related to standards of care/best practices.
9. Supports students through clinical reasoning/decision making based on EBP.
10. Review differential diagnosis, diagnostic work-up, recommended treatments, changes in plans of care, and/or referral patterns.
11. Co-sign any/all records and orders written by students, if allowed in practice setting.
12. Co-sign the student's clinical journal every **50 hours**.
13. Complete mid-term and final evaluation within the online school selected electronic database.
14. Collaborate and communicate with MVC faculty, as needed, and when the student's performance is in question.
15. **Final grade decision rests with the nursing faculty. Consideration will be given to feedback from the clinical/practicum site personnel.**

HEALTH CARE AGENCY

- Retains ultimate responsibility for all patient care and needs.
- Retains responsibility for the preceptor's salary, benefits, and liability.

Developed: 7/2019; Revised 1/2020; 5/2020; 10/2020; 12/2020; 9/2021, 11/2021; 12/2021; 3/2022; 7/2022, 8/2022; 9/2022;11/2022; 5/2023; 7/2023