Introduction

A clinical preceptorship/fellowship is a supervised clinical experience that allows students to apply knowledge and skills in a practice setting. Based on their experience and education, each student enters the experience with a varied amount of knowledge, clinical experience, and technical competence. Clinical learning opportunities to enhance the student's individual learning needs are determined with input from the student, the faculty, and the preceptor. The purpose of the Preceptor Handbook is to provide Cizik SON DNP preceptors with information to optimize student learning.

School of Nursing Mission

As part of a comprehensive health science university, the mission of the Cizik SON is to educate nurse clinicians and scientists, discover and translate advances in the biomedical and social sciences, and model best practices and innovation in clinical care regionally, nationally and globally. We pursue this mission in order to improve quality of care and the health and well-being of individuals, groups and communities.

Philosophy

Our philosophy reflects the beliefs of the faculty and supports the mission of the SON. Faculty members contribute to the University’s mission of education, research, and practice, which includes care of individuals, groups, and communities. The faculty believes people, health, and nursing are interrelated in a dynamic global environment.

We view people as holistic beings with inherent dignity and worth who participate in decisions that affect their health across the lifespan. Values, beliefs, and perceptions, as well as ethical, legal, cultural, spiritual, social, political and economic forces all influence health decisions.

Health is a dynamic continuum of wellness and illness in individuals, groups, and communities. Health care is an interdisciplinary effort focused on health promotion, disease prevention, illness-care, rehabilitation and palliative activities through partnerships between clients and health care providers.
Nursing as a health profession contributes to the management of health issues of individuals, groups and communities in diverse environmental settings. Nurses are prepared as members of an interdisciplinary team to work with others to deliver safe client-centered care emphasizing evidence-based practice, quality improvement approaches and emerging technology.

Education for nurses supports learning as a lifelong process. Undergraduate education prepares entry-level generalists to provide safe and quality care to diverse client populations in a variety of settings. Graduate education at the master’s level prepares specialists in advanced clinical practice roles. Doctoral education prepares clinical practice and research scholars who function at the highest level of professional practice and contribute to the body of scientific knowledge. Continuing education promotes learning experiences for nurses to update and advance nursing knowledge and skills, thus fostering the professional development and improvement of health care.

Research supports and advances nursing science, the evolving body of knowledge that serves as the basis of the profession. Cizik SON fosters an environment that promotes research that includes, but is not limited to, bio behavioral, clinical, and translational research.

The American Association of Colleges of Nursing (2004) defined advance practice nursing as

… any form of nursing intervention that influences health care outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and health care organizations, and the development and implementation of health policy. Preparation at the practice doctorate level includes advanced preparation in nursing, based on nursing science, and is at the highest level of nursing practice. (p.3)

Community based-practice and service contribute to health promotion, disease prevention, and the well-being of individuals, groups and communities.

Vision

We are pacesetters in education, research, and clinical practice. We educate nurse clinicians and scientists within a diverse interdisciplinary environment to meet the dynamic work force and health care needs of our national and global societies. We contribute to nursing knowledge via bio behavioral, clinical and translational research. We are national leaders in clinical practice with innovative models of clinical excellence. We provide a creative environment that fosters scholars and visionaries for the health care system.

DNP Program Objectives

Graduates of the Doctor of Nursing (DNP) program will be able to:

1. Critically evaluate and translate evidence into practice to support high quality outcomes.
   a. Practice at the highest level of advanced practice nursing or nursing administration providing expanded health care access to individuals, groups, populations, and communities to address complex health care needs.
   b. Critically evaluate and translate evidence into practice to ensure patient safety and achieve high quality outcomes.
c. Utilize evidence-based knowledge, research, ethical standards, technology, and high-level clinical judgment to advance quality of care and health outcomes for individuals and populations.

2. Use Leadership and interprofessional collaboration skills to deliver safe, effective, comprehensive, seamless, and cost-effective care.
   a. Assume high-level clinical and executive leadership roles in nursing, health care organizations, and other health related settings.
   b. Demonstrate achievement of all DNP Essentials as published by the American Association of Colleges of Nursing.

3. Evaluate and influence health care policies, organizations, and systems.
   a. Utilize evidence-based knowledge, research, ethical standards, technology, and high-level clinical judgment to advance quality of care and health outcomes for individuals and populations.
   b. Design and evaluate innovative programs and models of care for individuals and populations based on best science and evidence, which address prevention, health promotion, treatment, and management of health needs.
   c. Integrate quality improvement and translational science and strategies to create and sustain change at the population, system, and policy levels.

DNP Faculty Responsibilities

1. Prior to the initiation of the clinical preceptorship/fellowship the DNP faculty or designee will:
   a. Communicate with the clinical site and request clinical placements for a student(s) for the upcoming semester. Faculty members are responsible for approval of clinical sites and preceptors.
   b. When indicated, send a verification letter/form to the preceptor and clinical site with the name of the student and contact faculty member, and the dates in which the student will be completing a rotation at the clinical site. Comply with any requirements of the clinical agency.
   c. Provide a copy of the course syllabi, which includes the course objective and the appropriate evaluation form to the preceptor and clinical site.
   d. Ensure that a current contract/letter of agreement exists between the clinical agency and the SON.

2. The SON faculty member and all preceptors will jointly evaluate the DNP student’s performance in the clinical setting, but the faculty member is ultimately responsible for student evaluation and grade assignment. The student will provide evaluation/documentation forms used throughout and upon completion of the clinical preceptorship.

3. The SON faculty will be available for consultation as requested by the student, preceptor, and/or clinical site.

4. The SON faculty will retain final authority for determining when the graduate student has successfully met requirements for satisfactory completion of the clinical experience and course requirements.

5. DNP program faculty evaluates clinical sites and preceptors periodically. The Cizik SON will verify advanced practice status and current nursing licensure prior to the student initiating a contract.

6. The DNP faculty member will be responsible to the student for:
   a. Assistance in scheduling clinical experiences to meet the course and student objectives.
b. Periodic evaluations as determined by the faculty and student.
c. Consultation at the clinical site as requested by the student and/or preceptor.

Clinical Site Selection Criteria and Responsibilities

1. Clinical site selection criteria
   a. The clinical settings chosen shall provide experiences appropriate to the DNP student’s educational need and goals.
   b. The clinical settings chosen shall have mechanisms in place, which provide medical authority for Advanced Practice Registered Nurse practice or nurse administration, as appropriate. Such mechanism may include, but are not limited to, protocols, policies, practice guidelines, or other orders. When utilizing these mechanisms to provide such authorization, the physician(s) and APRN should jointly develop the mechanism and jointly sign. The physician and APRN shall review and sign these protocols/policies/practice guidelines at least biennially and maintained them in the practice setting of the APRN (Texas Board of Nursing, 2020).

2. Clinical site responsibilities
   a. Provide access to space in which to practice (examination room, classroom, office workspace, and/or conference room).
   b. Provide orientation to utilized electronic health record system, as appropriate.
   c. Provide adequate resources for diagnostic services and appropriate resources for referral.
   d. Provide adequate resources for diagnostic services and appropriate resources for referral.
   e. Provide adequate resources for educational instruction, communication, and documentation.
   f. Provide policies, procedures, and/or advanced practice protocols specific to the setting and role.
   g. Mentor the student in the performance of the required activities appropriate to their clinical specialty and role.
      i. APRN: The clinical settings chosen for the NP student shall provide an environment that permits both observation and active participation of the student in the delivery of care. The site shall provide activities which include, but are not limited to:
         1. Opportunities to practice primary, secondary, and/or tertiary care.
         2. Reasonable time for student learning.
         3. A variety of learning experiences in relation to age (as appropriate), clinical complexity, and diagnoses.
         4. Opportunity to formulate differential diagnoses and management plans.
         5. Opportunity to implement and evaluate management plans.
      ii. Nurse executive students will perform management activities based on their objectives for their specific role. These activities include, but are not limited to:
         1. Participation in the administration of selected aspects of a health care agency/system.
         2. Evaluation of the role of nurses and other health care providers in the administration of a health care agency/system.
3. Analysis of current issues in health care systems with emphasis on the role of nurse administrators in developing creative solutions.

iii. Nurse informatics students upon completion of the preceptorship should be able to:
1. Apply knowledge of nursing science and informatics to provide information to support and improve outcomes for individuals, populations, and organizations.
2. Contribute to selection of information systems/technology to evaluate programs of care, outcomes of care, and care systems.
3. Utilize information systems/technology to support best practice for health care delivery.
4. Apply best practices to manage individual and aggregate levels of information.

iv. Planned fellowship experiences provide opportunities for all students in indirect care activities to meet the DNP Essentials. Upon completion of the fellowship experience all students, regardless of DNP option, should be able to:
1. Participate in a mentored fellowship experience to expand competency in DNP Essentials.
2. Evaluate the DNP leadership role in translational science, innovation, and transformation with the context of clinical practice and health care delivery.
3. Analyze opportunities for innovation in health care delivery and practice related to health policy.
4. Evaluate the presence/extent of inter-professional collaborative practice within health care organizations.

Preceptor Selection Criteria and Responsibilities

1. Preceptor Section criteria shall include:
   a. An advanced practice nurse, physician or other health care professional acceptable to the Board of nursing who meets the following requirements:
      i. Holds an active, unencumbered license;
      ii. Is in current practice in the advanced specialty area;
      iii. Is committed to the concept of the advanced practice nurse; and
      iv. Functions as a supervisor and teacher and evaluates the student’s performance in the clinical setting. (Texas Board of Nursing, 2020)
   b. Appropriately credentialed (i.e. national certification as appropriate)
   c. Terminal degrees are preferred but other categories of people with or without doctoral education with special expertise may serve as preceptors
   d. Minimal of one year practice experience in clinical specialty and role.
   e. Functioning within the scope of the legal parameters for professional practice acts as appropriate.
   f. Willingness to participate actively in the education and evaluation process of the graduate student.

2. Preceptor responsibilities
   a. Orientation.
      i. The DNP student should arrange to meet with the identified preceptor for orientation at the initiation of the actual clinical experience.
ii. During orientation to the clinical setting, the graduate preceptor(s) should:
   1. Communicate general guidelines utilized for preceptor/student interactions and for review and feedback of student performance.
   2. Review policies, procedures, and advanced practice management protocols specific to the setting and role as appropriate.
   3. Review policies, procedures, and advanced practice management protocols specific to the setting and role as appropriate.
   4. Review expectations for documentation as available.
   5. Discuss overall plan for student progression.
   6. Review student’s previous learning experiences and current clinical objectives.
   7. Complete the Clinical Learning Contract with the student.
   8. Encourage student to identify strengths and areas for continued professional growth.
   9. Perform initial assessment of student’s current level of proficiency through observation of student performance and through directed guided questioning.
  10. Involve student in assessment/validation/decisions about learning strategies employed by the preceptor.
  11. Review clinical site educational and licensure documentation, parking, dress code, etc.
  12. Negotiate a clinical schedule with the graduate student. To optimize the clinical experience, all graduate students are required to arrange their clinical schedules to assure continuity of clinical experiences as applicable to the specific clinical specialty and role.
  13. If the student will be absent on a scheduled clinical day, the student is responsible for notifying the graduate preceptor and the faculty prior to the clinical day or in the case of illness before the start of the clinical day.

b. Clinical supervision and teaching, the preceptor should:
   i. Provide timely and necessary input to student regarding student's ability to meet course objectives throughout the clinical practicum.
   ii. Assess the competence of the graduate student in providing role responsibilities to clients and populations.
   iii. Ensure that the graduate student's performance is consistent with standards set forth in clinical site policies, procedures, and advanced practice protocols for patient care, education, and administration duties.
   iv. Direct the progression of student assignments based on both the preceptor’s and graduate student’s evaluation of readiness, knowledge, and skill competencies
   v. Directly mentor the graduate student in the performance of role responsibilities. The preceptor ultimately assumes responsibility for the client, and thus remains available to the student for consultation and ongoing evaluation throughout the entire preceptorship.
   vi. Provide feedback on the accuracy and completeness of the student's documentation
   vii. Review the DNP student's documentation and make constructive suggestions for improvement. Students will sign all paper notations with their first name,
last name, title, and school. Preceptor must co-sign all documentation in accordance with clinical site policies. The preceptor is responsible for signing any electronic entries in compliance with clinical site policies.

viii. Schedule regular meetings with the DNP student to discuss specific learning objectives and experiences. These meetings should review:

1. The student's role responsibilities and ability to accurately document clinical findings
2. Ability to complete advanced practice skills/activities.
3. The student's ability to develop client-focused intervention strategies, including rationales for clinical decisions.
4. The student's ability to communicate and collaborate effectively with preceptors, clients, families, nursing staff, and other health care professionals.
5. Professional issues related to advanced practice role implementation.

c. Evaluation of DNP student performance

i. Assess DNP student’s progress through a formal, written evaluation at the completion of the clinical experience. The preceptor evaluation is a component of the student's grade (as specified on the student's clinical evaluation form).

ii. Inform the supervising faculty of any concerns related to:
   1. Unsafe clinical practice by the student.
   2. Student difficulties in meeting the requirements of the clinical experience.

DNP Student Responsibilities

The student is responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in the selected role. The student will:

1. Discuss specific clinical objectives and negotiate a mutually agreeable schedule with the preceptor prior to the actual preceptorship.
2. Mutually negotiate Clinical/Practicum Learning Contract with Preceptor and Faculty.
3. Provide the clinical site with the necessary licensure, educational, and/or immunization information as requested.
4. Complete orientation and forms as required by the clinical agency.
5. Demonstrate professional behaviors at all times.
6. Demonstrate accountability for thoroughness and timeliness in completing assigned responsibilities.
7. Maintain a log of experiences attended throughout the duration of the clinical experience.
8. Demonstrate progressive independence and competency in the chosen role and specialty area.
9. Actively seek input into evaluation process, participate in self-evaluation of strengths, and identified areas for professional growth with faculty member and preceptor.
10. Complete clinical preceptor and site evaluations and provide feedback to preceptor.
11. Maintain personal records of all evaluation forms.
12. The student is responsible for notifying the graduate preceptor and the faculty prior to missing any clinical day or in the case of illness before the start of the clinical day.
References
