

ORIENTATION MANUAL FOR PRELICENSURE STUDENT PRECEPTORS



CONTENTS

Ι.	Introduction	2
	School of Nursing Contacts & Resources	
III.	Laws and Regulations Related to Teaching	3
Α	N. Virginia Board of Nursing Regulations	3
В	. The Family Educational Rights and Privacy Act (FERPA)	4
IV.	Preparation for Clinical Teaching and Precepting	4
Α	. Orientation	4
	Preceptors	4
В	Roles: BSN and CNL (Direct Entry) Courses	5
	Clinical Courses in a Precepted Model	5
٧.	Mission, Purpose, Objectives	6

This orientation manual is available on the Preceptor webpage: https://www.nursing.virginia.edu/academics/preceptors/

Updated 7/2023

I. INTRODUCTION

Welcome to clinical teaching in the UVA School of Nursing! Your contributions in providing clinical guidance and supervision for students are invaluable to our mission of creating top-notch new nurses for the profession! We wish to provide you with ample information, resources, and support as you initiate and then continue to develop your skills as a clinical educator.

- ➤ Clinical faculty includes individuals who contract with the School of Nursing to teach and supervise student learning activities in clinical settings. Clinical faculty include experienced clinicians as well as PhD or DNP students. Clinical faculty oversee the clinical activities for assigned clinical groups of students and work closely with the assigned course professor.
- Preceptors are clinicians who provide direct teaching and supervision for one (sometimes two) students in the clinical area. Preceptors provide invaluable guidance and mentoring to students over an extended period of time, and work closely with the assigned clinical faculty to ensure appropriate student progress and achievement.

While this manual provides important guidance, all preceptors and clinical faculty are encouraged to make use of a wide array of resources to support your clinical teaching efforts and development.

II. SCHOOL OF NURSING CONTACTS & RESOURCES

Program Directors:

- BSN Program Director: Sara Hallowell, DNP, RN, CPNP, CNL
- Clinical Nurse Leader Co-Directors: Ha Do Byon, PhD, MS, MPH, RN; and Richard Ridge, PhD, RN, MBA, NEA-BC

Clinical sites for student learning are coordinated by the course professor working with the academic clinical coordinator (ACC) (if one is assigned to the program/course). The academic clinical coordinators are:

- Acute Care: Elizabeth Taliaferro-Jones, MSN, RN
- Community Care: Susan Goins-Eplee, MSN, RN, CNL, HEC-C

Assistant Department Chairs:

- Gina DeGennaro, DNP, CNS, RN, AOCN, CNL
- Barbara Reyna, PhD, RN, NNP-BC

Department Chair:

Cathy Campbell, PhD, RN

III. LAWS AND REGULATIONS RELATED TO TEACHING

A. VIRGINIA BOARD OF NURSING REGULATIONS

The Virginia Board of Nursing regulates both nursing practice and nursing education. As you begin your clinical teaching activities it is imperative to understand the regulations associated with clinical teaching and clinical learning. A snapshot of the nursing specific regulations can be reviewed below. The full regulations can be access through the Virginia Board of Nursing website at: https://www.dhp.virginia.gov/Boards/Nursing/PractitionerResources/

Virginia Board of Nursing: Related Regulations – A Snapshot

18VAC90-27-110. Clinical practice of students.

A. In accordance with § 54.1-3001 of the Code of Virginia, a nursing student, while enrolled in an approved nursing program, may perform tasks that would constitute the practice of nursing. The student shall be responsible and accountable for the safe performance of those direct client care tasks to which he has been assigned.

- B. Faculty shall be responsible for ensuring that students perform only skills or services in direct client care for which they have received instruction and have been found proficient by the instructor. Skills checklists shall be maintained for each student.
- C. Faculty members or preceptors providing onsite supervision in the clinical care of clients shall be responsible and accountable for the assignment of clients and tasks based on their assessment and evaluation of the student's clinical knowledge and skills. Supervisors shall also monitor clinical performance and intervene if necessary for the safety and protection of the clients.
- D. Clinical preceptors may be used to augment the faculty and enhance the clinical learning experience. Faculty shall be responsible for the designation of a preceptor for each student and shall communicate such assignment with the preceptor. A preceptor may not further delegate the duties of the preceptorship.
- E. Preceptors shall provide to the nursing education program evidence of competence to supervise student clinical experience for quality and safety in each specialty area where they supervise students. The clinical preceptor shall be licensed as a nurse at or above the level for which the student is preparing.
- F. Supervision of students.
 - 1. When faculty are supervising direct client care by students, the ratio of students to faculty shall not exceed 10 students to one faculty member. The faculty member shall be on site in the clinical setting solely to supervise students.
 - 2. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students. *In utilizing preceptors to supervise students in the clinical setting, the ratio shall not exceed two students to one preceptor at any given time.*During the period in which students are in the clinical setting with a preceptor, the faculty member shall be available for communication and consultation with the preceptor.

- G. Prior to beginning any preceptorship, the following shall be required:
 - 1. Written objectives, methodology, and evaluation procedures for a specified period of time to include the dates of each experience;
 - 2. An orientation program for faculty, preceptors, and students;
 - 3. A skills checklist detailing the performance of skills for which the student has had faculty-supervised clinical and didactic preparation; and
 - 4. The overall coordination by faculty who assume ultimate responsibility for implementation, periodic monitoring, and evaluation.

B. THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

Just as there are laws governing patient privacy (HIPAA), similar laws exist to protect student privacy. Student records are confidential and protected under the Family Educational Rights and Privacy Act (FERPA). As a general rule, faculty and preceptors should approach student privacy much in the same manner that clinicians approach patient privacy. *Conversations about student progress and achievement are appropriate among the educational team but should otherwise be treated as confidential. Student papers and faculty documentation and evaluation of student progress (e.g., grades) are treated as confidential.* School of Nursing resources can be contacted for any questions about student privacy issues. In addition, the University of Virginia FERPA policy is available at http://uvapolicy.virginia.edu/policy/STU-002.

IV. PREPARATION FOR CLINICAL TEACHING AND PRECEPTING

The Curriculum

Understanding the overall program of study for the student is essential to effectively guiding the student through the assigned course. The program of study can be accessed on the School's <u>website</u>, and you will be provided a copy as a part of your orientation. The clinical courses provide the student with an opportunity to demonstrate developing competency in applying nursing knowledge and skills to clinical practice environments.

A. ORIENTATION

PRECEPTORS

Once arrangements for a precepted experience have been confirmed, there are required orientation activities for preceptors to ensure success for both the preceptor and the student.

1. Academic Program Orientation

Preceptors must be knowledgeable about the academic program(s) in which they are precepting, and complete introductory training related to clinical teaching.

- Visit the School of Nursing webpage for new clinical faculty and preceptors at https://www.nursing.virginia.edu/academics/preceptors/ for the required training presentation.
- Provide an updated resume/CV to the School of Nursing or submit an updated preceptor profile (an online form available on the preceptor webpage).
- Submit the SON Preceptor Agreement Form.

2. Course and Clinical Orientation Requirements

One of the most important aspects of precepting a student is understanding the objectives, content, and required activities associated with the assigned course. The course professor, academic clinical coordinator, and assigned clinical faculty are the best resources for gaining this information.

Preceptors should complete following orientation activities before the beginning of the student preceptorship:

- Meet with the clinical faculty member to orient to the following:
 - Course syllabus, which includes the objectives, content, required learning activities, and student evaluation methods.
 - The skills for which the student has had faculty-supervised clinical and didactic preparation.
 - Processes for documenting student performance and progress. The course professor is the primary resource for any unexpected or unsatisfactory student behaviors.
- Obtain the academic schedule for the semester and develop the associated student clinical schedule, including the student orientation plan.

B. ROLES: BSN AND CNL (DIRECT ENTRY) COURSES

All faculty members (course professors, clinical faculty, and graduate teaching assistants) are expected to adhere to the *Guidelines for Course and Clinical Faculty*, available in the SON <u>Faculty/Staff Handbook</u> (section #1.02.1). Faculty roles are documented in the *Guidelines*, preceptor roles are delineated below, and student expectations are articulated in the course syllabus.

CLINICAL COURSES IN A PRECEPTED MODEL

PRECEPTOR ROLE

- a. Provides direct clinical supervision and guidance of students (1 to 2 students)
 - Orients the student to the clinical setting, patient population, health care team, and key aspects of nursing care delivery in the environment.
 - Meets with the student to discuss their personal learning objectives.
 - Reviews all medications prior to student administration.
 - Directly supervises all clinical skills the first time they are performed, and until preceptor is comfortable that student can perform the skill unsupervised.
 - o Fosters critical thinking by questioning students about the rationale for the plan of care.
 - Immerses and engages students in clinical practice experiences, integrating them into the practice setting.
- b. Assists in the assessment of student performance
 - Gives verbal feedback to the student at the end of each clinical day, following performance of procedures, and as needed.
 - Notes progress toward meeting established objectives. Completes an evaluation of student performance at midterm and at the end of the semester.
 - o Informs clinical faculty of student progress on an ongoing basis and informs clinical faculty about issues and concerns in a timely manner.

V. MISSION, PURPOSE, OBJECTIVES

School of Nursing Mission and Vision Statement

The School of Nursing transforms lives by promoting health and the quality of health care. We will cultivate the SON's diverse and inclusive community of scholars and researchers; create innovative models of education and practice; foster well-being and collegial spirit in a healthy work environment.

End of Program Terminal Objectives

The **BSN** program prepares graduates to:

- Provide evidence-based nursing care consistent with American Nurses Association foundation documents (The Nursing Scope and Standards of Practice and The Code of Ethics for Nurses with Interpretive Statements) and to incorporate professional values;
- Partner with interprofessional teams and/or others to promote health and reduce health risks for individuals, families, communities, and diverse populations;
- Advocate for the evolving role of nursing within the context of historical and contemporary issues as they impact the health status of individuals, families, communities, and diverse populations in national and/or global healthcare systems;
- Use effective health information technology and research findings to deliver and/or evaluate the safety and quality of person-centered care across the continuum of health care systems; and
- Accept personal and professional responsibility/accountability demonstrated through professional leadership, self-care, and participation in activities for professional well-being, growth and development; and
- Coordinate resources to provide holistic, culturally sensitive, and equitable care to diverse populations.

The **MSN** program prepares graduates to:

- Integrate theoretical and research based knowledge as a generalist leader or in an advanced nursing practice specialty.
- Provide care and comfort to individuals, families and groups experiencing complex health care needs.
- Provide care that reflects sensitivity to differences among culturally and ethnically diverse populations.
- Assume a leadership role in establishing and monitoring standards of practice to improve patient care in collaboration with other nursing experts.
- Use ethical principles to guide decision-making in nursing practice.
- Evaluate clinical practice in relation to professional practice standards and relevant statutes and regulations.
- Apply the research and/or quality improvement processes to improve evidence based clinical practice and contribute to knowledge development.
- Engage in self-directed and purposeful activities in seeking necessary knowledge and skills to enhance career goals.
- Examine economic, political, and social forces affecting nursing care delivery in complex health care systems.
- Promote interprofessional collaboration to ensure quality, cost effective care.
- Contribute to the development of peers, colleagues, and others to improve patient care and foster the growth of professional nursing.

• Act as change agents to create environments that promote effective nursing practice and patient outcomes.

Graduates of the MSN APRN specialties are further expected to:

professional standards of advanced nursing practice specialties.

- Demonstrate evidence-based diagnostic reasoning and clinical decision making within the scope of practice.
- Be prepared to function as a licensed practitioner within the role and specialty population focus. These core characteristics are in accordance with national guidelines for the Clinical Nurse Leader and