CNL Academic Policies and Procedures

2015 - 2016
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Degree Requirements

A full statement of the School of Nursing degree requirements for the Clinical Nurse Leader track in the MSN program is printed in the Graduate Record. The MSN-CNL program admits nurses seeking advanced nursing education focusing on point-of-care clinical leadership. In addition, individuals who are not nurses and have at least a four-year degree in another discipline may enter the accelerated Master’s entry MSN-CNL program and enter nursing at an advanced generalist level (Master’s entry).

The requirements for a Master of Science in Nursing degree through the Clinical Nurse Leader (CNL) track in the School of Nursing are:

Degree Requirements

1. Satisfactory completion of the stated program of study:
   a. A minimum of 34 credits for nurses who enter the program with a BS in Nursing (BSN).
   b. A minimum of 41 credits for nurses who enter the program with a BS/BA in a non-nursing discipline, and
   c. A minimum of 75 credits of approved graduate courses for students in the accelerated Master’s entry program,

2. Satisfactory completion of all course work as specified in the policy on grades, with a final cumulative grade point average of at least 3.0 (B).

3. Completion of all requirements for the degree within five calendar years after matriculation into the program.

4. Enrollment and payment of tuition and fees for no fewer than two regular semesters or the equivalent.
Plan of Study

PART I. REGISTERED NURSE ENTRY

The plan of study for Registered Nurses entering the Clinical Nurse Leader track of the MSN program is delineated below as a two-year part-time plan. Students may work with the academic advisor to develop a full-time plan of study if desired. Courses with an asterisk (*) are required for nurses who enter with a BS/BA in a non-nursing discipline, unless the student transfers in a course taken in the previous nursing education program.

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<th>Year 1</th>
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<td></td>
<td>Summer – 0-4 credits</td>
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<td>NUIP 4200  Pathophysiology*</td>
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<td>Fall – 7 credit hours</td>
<td>GNUR 6052  Epidemiology &amp; World Health (3)</td>
<td>GNUR 6010  Graduate Pathophysiology (4)</td>
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<td></td>
<td>Spring – 7 credit hours</td>
<td>GNUR 5410  Theory &amp; Evidence-Based Practice (4)</td>
<td>GNUR 5210  Care Environment Management I (3)</td>
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<th>Year 2</th>
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<tr>
<td></td>
<td>Summer – 5-8 credits</td>
<td>GCNL 5150  Clinical Practice &amp; Decision-Making: Community Health Nursing*</td>
<td>GNUR 6060  Culture and Health (2)</td>
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<td>GNUR 6056  Health Policy: Local to Global (3)</td>
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<td></td>
<td>Fall – 8 credit hours</td>
<td>GCNL 5240  Microsystem Assessment and Capstone Development (2)</td>
<td>GNUR 5220  Care Environment Management II (3)</td>
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<td>GNUR 6058  Ethics, Nursing, and the Larger Healthcare Arena (3)</td>
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<td></td>
<td>Spring – 8 credit hours</td>
<td>GCNL 5250  The CNL in the Healthcare System (3)</td>
<td>GNCL 5991  CNL Capstone &amp; CNL Role Immersion (5)</td>
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This plan of study generally requires on-site presence for one-to-two days per week during the fall and spring semesters, except for GCNL 5150 Community Health, which is offered in an accelerated executive format over one week.
Example of a full-time plan of study for students completing the BSN who wish to progress immediately into the MSN-CNL program (5th year MSN):

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<th>Year 1</th>
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<tr>
<td>Summer - 8 credits</td>
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<tr>
<td>GNUR 6060  Culture and Health (2)</td>
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<td>GNUR 6052  Epidemiology &amp; World Health (3)</td>
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<td>GNUR 5210  Care Environment Management I (3)</td>
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<td>Fall - 16 credit hours</td>
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<tr>
<td>GNUR 6010  Graduate Pathophysiology (4)</td>
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<tr>
<td>GCNL 5240  Microsystem Assessment and Capstone Development (2)</td>
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<tr>
<td>GNUR 5220  Care Environment Management II (3)</td>
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<td>GNUR 6058  Ethics, Nursing, and the Larger Healthcare Arena (3)</td>
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<td>GNUR 5410  Theory &amp; Evidence-Based Practice (4)</td>
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<tr>
<td>Spring - 11 credit hours</td>
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<tr>
<td>GCNL 5250  The CNL in the Healthcare System (3)</td>
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<td>GNCL 5991  CNL Capstone &amp; CNL Role Immersion (5)</td>
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<tr>
<td>GNUR 6056  Health Policy: Local to Global (3)</td>
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PART II. MASTER’S ENTRY (second-degree non-nurse entry):

Students are admitted to the Master’s entry CNL program once per year in May, and matriculate through the two year accelerated program as a cohort. The program provides the pre-licensure education and clinical training necessary for eligibility for licensure as a registered nurse. In addition, the program provides the graduate-level advanced nursing education required for advanced generalist nursing practice as a Clinical Nurse Leader.

Accelerated learning format: The Master’s entry CNL program is an accelerated program. Didactic content and clinical learning activities normally presented over a longer period of time are condensed and presented over a shorter period of time and at an accelerated pace. In some courses didactic content may be presented in an executive format full-time over one or two weeks with a final exam at the end of the class. The program moves quickly and is ideally suited for students who readily grasp new concepts and new techniques. Students who find the accelerated learning format is not a match for one’s individual learning style are encouraged to seek immediate assistance from the academic advisor or Dean Carroll in the Office of Admissions and Student Services.

Clinical Immersion: A unique feature of the Master’s entry CNL program in comparison to other pre-licensure programs is the approach to clinical learning. All clinical learning experiences are conducted through preceptorships in the various clinical learning environments. This preceptor-based model accelerates clinical learning in the care environment and provides increased opportunities to acquire, develop, and perfect clinical abilities. Clinical abilities include the theoretical knowledge base for practice, safe application of psychomotor skills, and effective professional communication with others. Students in the Master’s entry CNL program complete
approximately 500 clinical hours in the pre-licensure coursework, as well as 500 synthesis practicum/capstone clinical hours during the final two semesters. Carefully review the policies and procedures related to pre-licensure clinical experiences in the master’s entry CNL program.

**Progression Examination:** Prior to starting clinical hours in GCNL 5180, Capstone Practicum, in the final fall semester, all students in the Master’s entry program must demonstrate fundamental preparedness to deliver safe and effective care. This assessment is conducted through the progression examination offered at the beginning of the semester. Specific policies regarding the progression examination are communicated via the GCNL 5180 course syllabus.

**Preparation for NCLEX and Licensure as a Registered Nurse:** After completion of the Master’s entry CNL program, graduates are eligible to apply for licensure as a registered nurse and sit for the licensing examination (NCLEX). Students should carefully review the policies and procedures related to NCLEX preparation support in the program.

The Master’s Entry plan of study is as follows:

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<tr>
<td><strong>Summer - 11 credits</strong></td>
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<tr>
<td>GCNL 5100 Health Assessment and Clinical Interventions (4)</td>
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<td>GNCL 5120 Clinical Practice and Decision Making: Nursing Care of Children and Families</td>
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<td>NUIP 4200 Pathophysiology</td>
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<td><strong>Fall - 16 credits</strong></td>
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<td>GCNL 5110 Clinical Practice &amp; Decision-Making: Nursing Care of Adults &amp; Older Adults (4)</td>
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<td>GCNL 5160 Clinical Practice &amp; Decision-Making: Persons with Psychiatric Illness (3)</td>
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<td>GCNL 5210 Nursing Leadership and the Health Care System (2)</td>
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<td>GNUR 6010 Graduate Pathophysiology (4)</td>
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<tr>
<td>GCNL 5020 Principles of Pharmacology (3)</td>
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<td><strong>Spring - 14 credits</strong></td>
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<tr>
<td>GCNL 5130 Clinical Practice &amp; Decision-Making: Adults with Common Health Problems (3)</td>
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<td>GCNL 5170 Clinical Practice &amp; Decision-Making VII: Complex Health Problems (3)</td>
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<td>GCNL 5220 Leading Teams (1)</td>
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<td>GNUR 5410 Theory &amp; Evidence-Based Practice (4)</td>
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<td>GCNL 5120 Clinical Practice &amp; Decision-Making: Nursing Care of Children &amp; Families (3)</td>
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<td><strong>Fall - 14 credits</strong></td>
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<td>GCNL 5240 Nursing Leadership Seminar (1)</td>
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<td>GNUR 5220 Care Environment Management II (3)</td>
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<td>GCNL 5180 Clinical Practice &amp; Decision-Making: Synthesis Practicum (4)</td>
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**Leadership**

Leadership development is integrated throughout the MSN-CNЛ program. The leadership framework includes 1) self-awareness and emotional intelligence regarding interpersonal patterns, 2) effective teamwork and collaboration, including delegation, and 3) organizational competencies, including deep understanding and application of leadership principles in complex adaptive health care delivery organizations. Students are expected to model exemplary leadership behaviors at all times towards patients and families, peers, faculty, and health care delivery colleagues.

**Capstone**

During the final two semesters all students demonstrate emerging CNL role competencies through the clinical capstone immersion practicum. During the fall semester in GCNL 5240, Microsystem Assessment and Capstone Development, students plan for the spring capstone by networking with unit and organization stakeholders and conducting a comprehensive point-of-care (microsystem) clinical performance assessment. Findings from microsystem assessment help students identify opportunities for the capstone practicum role immersion and capstone project in the assigned practicum unit.
The Capstone Project

The capstone project is developed using established microsystem assessment and analysis strategies and enacting point of care team leadership capabilities. Capstone projects generally focus on improving patient safety, quality care delivery, and/or the professional practice environment. The capstone project proposal is developed with the guidance of the preceptor and is approved by the faculty prior to implementation. The student implements and evaluates progress of the project over the course of the spring role immersion.

The Capstone CNL Role Immersion

The capstone CNL role immersion occurs in the final spring semester in conjunction with GCNL 5991, CNL Capstone Practicum. Students demonstrate and document effective implementation of CNL role competencies and required clinical experiences as defined by the American Association of Colleges of Nursing’s CNL White Paper (2007).

CNL® Certification Examination

Upon completion of the program all students are eligible to sit for the Clinical Nurse Leader Certification exam prior to graduation. The examination is administered by the American Association of Colleges of Nursing and additional information, including cost, can be found at http://www.aacn.nche.edu/. The examination will be scheduled on-site during the final two weeks of the program.

Professional Standards in the MSN-CNL Program

Consistent with the student’s development as a leader, students are expected to exhibit consistent adherence to fundamental standards for professionalism during all program-related activities.

Preparation. The student is consistently prepared to engage in course and clinical activities. Preparation includes physical, emotional, cognitive, and material readiness to enter the course or clinical setting in order to apply principles and skills already learned, as well as expand knowledge and skill acquisition. This includes being well rested, and nourished, and for clinical, being oriented to the setting and with all necessary student sign-in codes (MIS, Accucheck, etc.) available for use.

Attendance and punctuality. The student arrives on time for all classes, clinical conferences, and clinical learning experiences. In addition, all written work is submitted to faculty on time. Students are required to be present for each class and clinical experience as arranged. Students are strongly encouraged to develop a pattern of arriving to clinical at least 15 minutes prior to the appointed time.

Absences. In the event of serious illness necessitating absence from class or clinical, the student must inform the appropriate person in advance (course professor, clinical faculty, preceptor, and/or unit) Unplanned absence from clinical will be evaluated in regard to the student’s
progress in meeting the clinical objectives. Repeat unplanned absence from clinical is considered unprofessional and unsatisfactory clinical behavior. Clinical faculty and preceptors are under no obligation to provide additional or supplemental experiences of any kind for students who cancel clinical experiences or need additional time to demonstrate achievement of the professional and/or clinical objectives. Any student experiencing difficulty meeting clinical objectives should speak with the academic advisor for guidance.

**Clinical Attire.** The student is professionally attired for all clinical experiences as directed by the School of Nursing student uniform policy, the UVA Medical Center (or appropriate agency) policy on attire, and any additional instruction by the preceptor and/or clinical faculty. The hospital ID is required whenever entering the hospital environment. The clinical faculty and course professor are the final authority regarding acceptable professional and clinical attire. Non-standard attire is considered unprofessional and unsatisfactory clinical behavior. Professional attire, including lab coat, is required for any presence in the clinical setting for activities other than precepted clinical activities.

**Professional demeanor.** The student maintains a professional demeanor during all classroom and clinical preparation and care experiences. The student does not bring personal issues into the classroom or clinical experiences. The student maintains professional boundaries at all times.

**Legal and personal limits.** The student recognizes and functions within legal and personal limits as a student. The student seeks help appropriately to deliver care. The student recognizes learning needs and actively seeks to fulfill identified learning needs outside of clinical (consultation with the preceptor, clinical faculty, or time in the simulated learning lab). The student maintains accountability for all actions.

**Time utilization in the clinical setting.** The student uses clinical time to focus on and enhance learning. The student recognizes when clinical learning opportunities are decreased (fatigue, quiet unit, etc.) and reschedules time with the preceptor appropriately.

**Confidentiality.** The student maintains confidentiality of all patient information and protects the privacy of patients according to institutional and HIPAA guidelines.

**Clinical Experiences for Master’s Entry Students**

As a Master’s entry Clinical Nurse Leader program, students simultaneously meet pre-licensure requirements while also advancing their nursing knowledge and skills beyond the baccalaureate level. Clinical courses and experiences within those courses are designed by the course faculty within curricular guidelines established by the entire faculty. Students should confer with course faculty regarding the specific experiences for each course. The course faculty, not the academic advisor, designs and approves the clinical experiences.

The amount of time required for practicum experiences is based on a ratio of four clock hours per credit hour per week. Therefore, a three-semester hour practicum requires 168 hours of time based on a 14-week semester. Students are responsible for all expenses, including travel.
incurred in clinical experiences. Students in all clinical experiences are responsible for their own travel to clinical sites in Albemarle and surrounding counties.

Clinical activities provide pre-licensure students the opportunity to apply assessment, technical, communication, and clinical reasoning skills in the clinical setting under the guidance of the clinical faculty and the direct supervision of a registered nurse clinician preceptor. Students also expand clinical learning through required written work and clinical conferences in addition to the time spent in direct care with the preceptor. The clinical faculty and preceptor facilitate additional learning opportunities for the student as appropriate. Students are accountable for adhering to professional standards and scope of practice as directed by the faculty and preceptor.

Precepted Clinical Activities
In most courses, the student is assigned a preceptor for all course-related clinical activities. Classes and clinical conferences are generally scheduled on Thursdays and Fridays in order to facilitate 24-7 availability of students for clinical learning activities between Saturday and Wednesday each week. The student develops the clinical schedule based on the preceptor’s established schedule. Students are expected to develop a clinical schedule in which clinical activities occur at a pace of 8-12 hours per week, and provide adequate time for reflection, post-clinical logs and worksheets, and faculty/preceptor feedback prior to the next experience. All clinical requirements must be met by the last day of classes.

Preceptors
In accordance with the Commonwealth of Virginia Board of Nursing regulations, preceptors are identified, recruited, and trained to serve in a preceptor capacity. Because of this, students are not permitted to work with other nurses who wish to “fill-in” when the assigned preceptor is not available. If a student arrives on the unit and the preceptor is unavailable, the student must notify the clinical faculty immediately, leave the unit, and reschedule the hours for another time.

Faculty Notification of Student Clinical Schedule
To comply with Commonwealth of Virginia Board of Nursing regulations, the clinical faculty must be available to the student and the preceptor during all clinical activities. The student is responsible for apprising the clinical faculty of all scheduled clinical hours at least 24 hours in advance of the scheduled clinical time. Engaging in clinical activities without clinical faculty awareness constitutes illegal student practice and places the student, preceptor, faculty, School of Nursing, and host institution at risk. Engaging in clinical activities without the clinical faculty’s advance knowledge is considered unprofessional behavior, and the student will earn a clinical unsatisfactory grade, and the time and activities will not be considered in fulfillment of the course objectives. Repeat of unsatisfactory performance of any kind may lead to failure of the clinical.

To meet the schedule notification requirements, all students are required to maintain an updated clinical schedule on the course or clinical collaborative website as directed by the clinical faculty. Additional information will be provided during clinical conferences. The School of Nursing uses the TYPHON NSST system for student portfolio development.
and student clinical activity tracking throughout the CNL curriculum. Access to this system is required for all students. For pre-licensure students, there is a one-time $50.00 access fee that students pay using a credit card at the time of the first log-on to the system. Students will have free access to their TYPHON materials for up to three years after graduation. Additional access is available for a fee through the TYPHON Group.

Clinical Faculty Site Visits
During each clinical rotation, the clinical faculty will visit the unit when the student is present to provide student learning support, preceptor teaching support, and assess student progress. The frequency and duration of the clinical site visits varies depending on the course, clinical, and location, but generally includes a minimum of two site visits per rotation. Students are encouraged to request a clinical faculty site visit if extra assistance is needed.

Clinical Conferences
All students are required to attend weekly one- to two-hour group clinical conferences with the clinical instructor. The clinical conference provides students the opportunity to share clinical learning, debrief clinical experiences, and explore other clinical learning opportunities.

Medication Administration Policy
All students are expected to be prepared to administer all medications to all assigned patients during each clinical day. It is the student’s responsibility to insure that all medication administration is directly supervised by the preceptor. Under no circumstances is any drug to ever be administered without first being checked by the preceptor for all of the “rights.” Failure to adhere to this requirement represents illegal student practice and constitutes unsatisfactory clinical performance.

Course Professor, Practice Partner, Clinical Faculty, Preceptor, and Student Roles in the CNL Program

The MSN-CNL program represents a close partnership between faculty and practice colleagues. The faculty/preceptor relationship should be characterized by mutual learning and reciprocal guidance throughout the course experience as the faculty has much to offer preceptors and vice versa. These guidelines describe the various roles involved in the clinical component of the CNL program.

The Course Professor
1. Overall responsibility for ensuring that students meet the course objectives.
2. Responsible for the structure and sequencing of course content and assignments.
3. Assigns final course grades.
4. Resource as needed for clinical faculty and preceptors in problem solving student issues.
Course Practice Partner Role
1. Recruits qualified preceptors for student experiences.
2. Provides basic preceptor orientation to the CNL program, mission, and goals.
3. Facilitates preceptor participation in CNL events/retreats.
4. Provides updated information on preceptor activities to the CNL program director for entry into the preceptor database.
5. Coordinates CNL preceptor activities in practice area, including communication with practice area managers and staff.
6. Along with clinical faculty, serves as a resource and general support for the preceptor during the student rotation through the practice area.
7. Serves on the CNL steering committee.
8. Acts as a liaison to the course professor, clinical faculty, and preceptor as needed with regard to preparing for student clinical experiences.
9. Collaborates with the course professor in relevant course(s) regarding didactic course content, case study development, and other activities as appropriate.
10. Advises students interested in their specialty area regarding synthesis practicum and capstone course opportunities and/or overall career goals.

Clinical Faculty Role
1. Serves as a resource to student and preceptor
   - Is available to preceptor and student by phone or pager during all clinical hours.
   - Observes/meets with the student and preceptor in the clinical setting once every two weeks or more often as needed.
   - Assumes primary responsibility for problem solving student issues.
   - Evaluates preceptor, including reviewing student evaluations of preceptor.
2. Ensures that clinical objectives are met (learning contracts may be used to guide student experiences)
   - Assists students in establishing appropriate objectives for each clinical experience, based on opportunities in the clinical setting, student strengths and deficits, and general course objectives.
   - Guides the preceptor and student in the selection of alternative clinical experiences to support achievement of learning objectives and facilitates these experiences.
   - Meets with students at midterm to review progress toward individual and course objectives.
   - Meets with students, and preceptors when available, weekly in Clinical Conferences.
3. Assesses student performance for clinical component of the course grade
   - Reviews all student logs.
   - Assesses student’s clinical knowledge through discussions in the clinical setting, clinical conferences, and in midterm conference.
   - Assesses any written work by the student, such as plans of care, that reflect cognitive development.
   - Reviews preceptor evaluations of student and solicits verbal feedback about student performance from the preceptor and his/her colleagues.
Preceptor Role

1. Provides direct clinical supervision and guidance of students (one to two students per course)
   - 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.
   - Fosters critical thinking by questioning students about the rationale for nursing and medical interventions.
   - Immerses and engages students in clinical practice experiences, integrating them into the practice setting.
   - Negotiates clinical learning objectives prior to each clinical experience.

2. Assists in the assessment of student performance
   a. Gives verbal feedback to the student at the end of each clinical day, following performance of procedures, and as needed.
   b. Completes a written evaluation of student performance at midterm (if needed) and at the end of the semester that includes anecdotal feedback.
   c. Informs clinical faculty of student progress as well as issues and concerns related to student performance.

3. Assists the student to revise his/her objectives for the clinical experiences
   - Notes progress toward meeting established objectives.
   - In collaboration with clinical faculty, identifies additional clinical experiences to meet the student’s needs and enhance learning.

Student Role

1. Establishes individual objectives (learning contracts may be used)
   - Uses course objectives as a guide.
   - Appropriately identifies own areas of strength and deficits.
   - Collaborates with faculty and preceptor as needed in setting objectives.
   - Collaborates with preceptor to revise objectives as the particular clinical experience proceeds.

2. Schedules clinical hours
   - Contacts preceptor to determine a schedule for completing the required hours for each clinical course.
   - Informs clinical faculty of the schedule.
   - Informs preceptor and clinical faculty of any change to the schedule.
   - Attends weekly clinical conferences.

3. Utilizes clinical faculty and preceptor appropriately
   - Functions within legal and personal limitations in the student role.
   - Seeks guidance when needed.
   - Acknowledges deficits.

4. Participates in self-evaluation and evaluation of preceptor
   - Attends mid-term conference with clinical faculty