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Preceptor Handbook

Associate Degree Program



Table of Contents

Tuble of dontents	
Introduction to Preceptor Handbook	3
Faculty Contacts.	3
Information about Northwest Florida State College Associate Degree Program.	4
Northwest Florida State College ADN Nursing Philosophy Model	5
Precepting the Student	6
Nursing Preceptor Requirements	8
Preceptor Responsibilities.	9
Nursing Student Responsibilities	10
Clinical Nursing Faculty Responsibilities	11
Student Policies: NWFSC Handbook link: Nursing Program Performance Standards Student Health Clinical Requirements Student Health/Pregnancy Student Health: Illness/Injury Clinical Impaired Student Policy Dress Code	12
Frequently Asked Questions about Precepting	13
Med-Surg Skills at A Glance Quick Reference	16
Appendix 1: Clinical Performance Evaluation Tool NUR 2811 QSEN competencies. Appendix 2: Complete Skills List across Curriculum. Appendix 3: Forms. Preceptor's Evaluation of the Preceptorship Experience. Evaluation of Student by Preceptor with Associate Degree Competency references. Student Evaluation of the Preceptorship Experience. Student Timesheet – validated by Preceptor at end of practicum. Critical Incident Sheet – to be completed by Instructor	18 21 22 25 25 28 29 30
if incident should occur in practicum setting	ונ

I. Introduction to Preceptor Handbook

Dear Nursing Colleague and Preceptor,

The Northwest Florida State College nursing faculty would like to thank you for agreeing to be a preceptor for our Associate Degree Nursing student. Your nursing supervisor has recommended you for the preceptor experience. This handbook is provided for you to assist you in the role of preceptor. The information provided includes information regarding faculty, preceptor, and nursing student responsibilities. Additionally, information is included related to the skills sets the nursing students were exposed to various semesters. We have both traditional track and LPN-RN students completing the practicum experience.

The Clinical Nursing Faculty will contact you to provide information regarding the start and conclusion of the practicum experience, learning needs of the students, expected professional behavior on the part of the student in the clinical setting, information about the associate degree nursing curriculum, clinical faculty, and introduction to the assigned student in order to provide a meaningful clinical experience.

The faculty contact phone numbers and email addresses are available to you and can be located in the folder with the paperwork. Communication of student progress and concerns with clinical faculty, the clinical performance evaluation tool used by clinical faculty, clinical faculty contacts and visits, and skills sets are addressed in this handbook. You will have access to this handbook through our college website.

Again, we appreciate you volunteering to provide an invaluable clinical experience to our final semester nursing students. We hope this opportunity to mentor an upcoming graduate nurse is a rewarding experience.

Sincerely,

NWFSC Nursing Faculty for NPIV

Northwest Florida State College Associate Degree Program Main Nursing Office: 850-729-6400

II. Information about Northwest Florida State College Associate Degree Program

Mission of Northwest Florida State College:

Northwest Florida State College improves lives. We deliver outstanding educational programs that are relevant, accessible, and engaging for students of all ages and provide exceptional cultural, athletic, and economic development activities for the communities served. We commit to excellence, creativity, integrity, and service.

Values:

Opportunity – Meeting each student's educational need at his or her level of ability

Excellence – Achieving the highest standards

Learning – Acquiring new skills, insights, and ideas

Success – Preparing students for the future

Creativity – Finding innovative ways to accomplish our objectives

Community – Listening and responding to community needs

Teamwork – Supporting and respecting each other and those we serve

Northwest Florida State College is accredited by the SACSCOC Southern Association of Colleges and Schools Commission on Colleges, and the ADN Program operates under the legal authority of and is fully accredited by the Florida Board of Nursing. The Nurse Practice Act as defined in The Florida Legislature, Title XXXII, Regulations of Professions and Occupations.

Chapter 464.B9-2.015 (Standards of Nursing Education) addresses Nursing Program and Preceptorship hour supervision.

This nursing education program is accredited by the Accreditation Commission for Education in Nursing (ACEN). Our accreditation status is posted on the ACEN web site at http://www.acenursing.us/accreditedprograms/programsearch.asp

III. Philosophy Model and ADN Competencies of NWF State College

The following model shows the concepts that are developed and reflected in the ADN curriculum. The curriculum progresses from simple to complex with the outcome of the professional behaviors and clinical competencies to meet client needs in the health care environment. The full nursing philosophy can be found in this handbook in Appendix 1 – Student Syllabus NUR2811L.



Course Description of 2811L

This course provides a time during the last four weeks of the nursing program in which students begin to transition from the student role into the graduate role as associate degree nurses. Students work with an experienced registered nurse preceptor to provide holistic nursing care for a limited number of clients with potentially life-threatening health problems. Clinical experiences may take place in a variety of clinical settings and work schedules. Students develop team-leading skills in the clinical setting, delegating and evaluating aspects of care to other health team members. Focus is on demonstration of all professional behaviors and competencies expected of the associate degree registered nurse graduate at entry level.

IV. Precepting the Student

As a preceptor to an associate degree-nursing student in their final semester from Northwest Florida State College, you have the opportunity to make an impact in nursing as a professional role model. You have been selected as a preceptor by your Nurse Manager because of your expertise and experience as a professional registered nurse. Your willingness to serve as a role model and mentor to an upcoming graduate of our nursing program is invaluable in the student's formation of their role as a Registered Nurse.

Knowledge and clinical expertise are imperative to the development of competencies and professional behavior of our nursing students. Previous student evaluations of the preceptor process have revealed the practicum experience helped them synthesize learned theory and clinical skills into the practice setting. The preceptor evaluations, which are done at the end of the practicum hours, have revealed that they were happy with the opportunity to share their knowledge and expertise with an upcoming graduate.

One student will be assigned to you to complete 128 clinical hours over a four-five-week period. Sixteen of the 128 hours may be elected by the student to complete ACLS certification. The student will be contacting you to set up a meeting to arrange their schedule with you. The student will then submit the calendar of days to the clinical faculty member. The student rotates with you on your schedule, on your shift, and floats with you if you are reassigned to a different nursing unit. The student is to begin the shift with you and end the shift with you. The required hours are 32-36 hours each week.

Working with one preceptor is best, however, given that schedule changes may require the occasional reassignment to an alternate preceptor, this is allowed provided the nurse manager or charge nurse and faculty member approves the change. The student will alert the faculty member of the needed change in the preceptor at the beginning of the shift. The alternate preceptor must be a registered nurse with a minimum of 12 months experience. Clinical faculty may visit with the alternate preceptor during the shift.

As a preceptor, the student will work with you directly in the planning, providing, and evaluation of client care under your supervision. Clinical faculty members will not be on site with you but will always be available by phone during the shift (24/7). The clinical faculty member will visit you and the student periodically through the process to discuss the student progress and to answer any questions. The preceptor is always welcome to call on the clinical faculty at any time there are questions, concerns, or changes that need to be addressed. Cell phone numbers of faculty are provided at the beginning of the course to the preceptors.

Policies, Protocols, Standards and Guidelines: All hospital policy, protocols, and procedures are to be followed by the student. In regard to charting the nursing assessment, this can be done with you and signed by you. If computerized client charting is utilized by your facility, the student may not sign in under their name for nursing assessment. The student may sign in to chart vital signs, Accu-checks, and ADLs. Additionally, all medications administered require preceptor initials on the MAR. We also encourage the students to learn techniques related to calling a physician or taking verbal orders, but the student cannot accomplish these tasks without strict supervision (i.e. the preceptor must also listen on the phone when a physician is giving a telephone order). Students cannot take a physician order by

themselves because they are not licensed!!! The FAQ section of this handbook is provided as a reference for your convenience and reference.

The NWF State College ADN program incorporates professional standards, guidelines, and competencies (i.e., Florida Department of Education Curriculum Framework (FDPE), 2010 NLN Outcomes and Competencies for Graduates of ADN Programs, Joint Commission National Patient Safety Goals, Quality and Safety Education for Nurses (QSEN), Occupational Safety Health Administration (OSHA), Health Insurance Portability, and Accountability ACT (HIPAA) of requirements of practice in its curriculum and student learning outcomes. Students have also completed required hospital orientation.

Evaluation:

The clinical faculty member is responsible for the final evaluation of the student with preceptor feedback. Emphasis of your evaluation of the student includes your observation of student behaviors of **professionalism**, **communication**, **assessment**, **clinical decision making**, **caring interventions**, **teaching & learning**, **collaboration**, **and managing care**. Constructive feedback to the student should be timely of assigned client care of these competencies on an ongoing basis.

On the final day of practicum, you will complete the "Evaluation of Student by Preceptor". Please review this evaluation with the student so that you will have an opportunity to reinforce positive and constructive feedback provided by you during the practicum experience. In addition, the "Preceptor Evaluation of the Preceptor Experience" is to be completed by you to help us improve our practicum experience. Please place these forms in the envelope provided for you. The student will return the sealed envelope for the final summative evaluation process to the clinical faculty member.

Discussions between you and the clinical faculty member regarding the student's progress will be ongoing during the practicum. We appreciate your willingness to participate as a preceptor and we will be sending you a "Certificate of Appreciation" for your professional portfolio. We hope that you will enjoy the practicum experience with the student, and it will contribute to your professional growth as well.

V. Preceptor Requirements:

Nursing preceptors must be licensed registered nurses in the State of Florida who are academically and experientially qualified as a Registered Nurse in the medical-surgical, ICU, or emergency practice setting. Minimum educational requirements of preceptors are associate degree preparation. The nurse's manager or director must approve the preceptor. Preceptors will directly work with associate degree nursing students in their final semester before graduation to attain the objectives of the Nursing Practicum Experience of NUR 2811L.

The Northwest Florida State College faculty members will work with the nurse managers, charge nurses, and nursing education in the selection of preceptors for students. Preceptors are then asked by their managers and faculty of their agreement to serve as a preceptor.

The preceptors serve as a role model and work directly with an assigned student. Preceptors work jointly with the clinical faculty members to ensure the objectives of the practicum are met. The clinical faculty member maintains the responsibility of the final evaluation of the student after receiving evaluation input from the preceptor.

VI. PRECEPTOR RESPONSIBILITIES

The Preceptor will:

- 1. Assist with orientating assigned student to the practicum prior to beginning the preceptorship rotation (including agency policies & procedures applicable to the practicum experience).
- 2. Meet with assigned student prior to the beginning of the preceptorship rotation to discuss course objectives and student's learning needs.
- 3. Share with the student and clinical nursing faculty all contact information necessary to assure optimal communication.
- 4. Agree to work with assigned student during own work week for the allotted time set for completing the course.
- 5. Consult with the student and their clinical nursing instructors on any matter pertaining to successful completion of the practicum.
- 6. Meet with the student and/or clinical nursing instructor as needed to maintain effective communication to help assure success of the student in the course.
- 7. Serve as a positive role model and resource person for the student.
- 8. Assist the student to develop role as a patient advocate.
- 9. Assist the student to consider political processes as they affect agency-specific healthcare.
- 10. Submit to the clinical nursing instructors an evaluation of course competencies met by the student. Clinical nursing instructor will coordinate a method of collecting this information.
- 11. Submit to the clinical nursing faculty a 2811L preceptor evaluation at the end of the Practicum experience.
- 12. Validate student timesheet.

VII. NURSING STUDENT RESPONSIBILITIES

The nursing student will:

- 1. Meet with preceptor prior to beginning of practicum to discuss achievement of course objectives and student's learning needs.
- 2. Meet with preceptor and nursing instructor as needed to maintain effective communication throughout the course.
- 3. Submit projected work schedule for practicum period to clinical instructor prior to the start of practicum.
- 4. Communicate any changes to submitted work schedule to clinical instructor for coordination/approval. Communication of changes may be accomplished via cell phone or text message, with the exception of same day or next day changes; those <u>MUST</u> be communicated to the clinical instructor via cell phone.
- 5. Be on time to all scheduled clinical days.
- 6. Be prepared to care for patients as directed by the preceptor.
- 7. Notify preceptor <u>and</u> instructor if unable to attend a scheduled clinical day.
- 8. Demonstrate professional behaviors reflective of the NWF State College nursing program philosophy.
- 9. Apply critical thinking skills in providing bedside, comprehensive, holistic nursing care of a limited number of hospitalized or institutionalized adults or children.
- 10. Incorporate ethical-legal principles and nursing care standards in role as a team member of an interdisciplinary health care team.
- 11. Demonstrate cost-effectiveness in managing patient/client care through resource management principles.
- 12. Using an effective collaborative approach, provide for continuity of care through referral/other interventions as a multidisciplinary team member.
- 13. Adhere to standards outlined in the Florida Nurse Practice Act and other published standards of care as evidenced in role as a team leader in assigned nursing care management practicum setting.
- 14. Identify lifelong learning needs as a nursing program graduate.
- 15. Complete and submit electronic weekly reflection form and time sheet log, as well as end of the course student evaluation.

VIII. Clinical Nursing Faculty Responsibilities

- 1. Northwest Florida State College nursing faculty develops the practicum requirements for the preceptor to follow.
 - a. Clinical faculty member will meet with nursing managers to obtain preceptors and their willingness to participate in the process.
 - b. Once determined, the clinical faculty members will communicate with nursing education of the facility to ensure that all orientation, health requirements and clinical requirements are completed by the students prior to beginning of the practicum experience.
- 2. Conduct a student orientation to the practicum.
- 3. Meet with preceptors for all students prior to the beginning of the practicum to discuss objectives, expectations, course policies, the evaluation process, and provision of Preceptor Handbook.
- 4. Visit the student and preceptor during the preceptorship rotation and be available by phone for consultation as needed to assure optimal communication, problem-solving and other matters pertaining to successful completion of the course.
- 5. Confer with the preceptor and the student regularly to monitor student progress.
- 6. Consult with the preceptor in evaluating each student's performance.
- 7. Assign a final grade ("P" or "F") to each student completing the practicum.
- 8. Provide constructive criticism via written performance evaluation for each student completing the practicum.
- 9. Elicit from each preceptor and agency representative an evaluation and suggestions for improvement of the preceptorship experience.

IX. Student Policies

NWFSC students abide by all policies as published in the NWFSC Nursing Handbook. Specific to the clinical area are, but not limited to, performance standards, conduct, student health, and dress code in the clinical setting. The handbook may be accessed online to view the nursing policies at:

https://www.nwfsc.edu/academics/degrees-offered/nursing/

Included in the Nursing Student Handbook:

- The nursing program performance standards
- Clinical Health and Safety Policy and pregnancy policy
- Dress Code

Preceptor should notify Faculty of any concerns or issues.

X. Frequently Asked Questions

- 1. What are the clinical evaluation competencies of the associate degree nurse?
 - Professional behaviors
 - Communication
 - Assessment
 - Clinical decision making
 - Caring interventions
 - Teaching & learning
 - Collaboration
 - Managing care
- 2. If I am reassigned to another unit, does the student move with me to that unit as well?
 Yes. We want the student to have the opportunity of the practice setting as it occurs.
 You will need to orient the student to the assigned unit and plan activities accordingly for safe patient care.
- 3. How many hours are required to complete the practicum?

Students will complete a total of 128 hours over the course of 4-5 weeks. Students rotate with you on your schedule and your shift. (16 of these hours may be selected by student to complete ACLS certification).

- 4. What requires direct supervision?
 - Charting the nursing assessment: this can be done with you and signed by you. If computerized client charting is utilized by your facility, the student *may* not sign in under their name for nursing assessment. The student may sign in under their own name to chart vital signs, Accu-checks, and ADLs.
 - All medications. Medications administered require preceptor initials on the MAR. If facility uses electronic MAR, the student may not sign in under their own name.

- Skills: Invasive skills including (but not limited to) IV insertions, blood administration, NG tube insertions, urinary catheter insertions.
- 5. What do we do in case of student incident or accident?

If any incident or injury occurs during clinical, the preceptor and student will notify the clinical faculty member as soon as possible. Appropriate documentation and care will be completed. Students are aware of the policies regarding Personal Assumption of Responsibility for Disease and/or Injury, and Pregnancy, as outlined in the NWFSC Nursing Student Handbook. Students must comply with OSHA standards for hazardous materials control, infection control and exposure to harmful substances, including, but not limited to, blood or other body fluids. They are responsible for their own health care. If the incident involves patient care, the **critical incident form** will also be completed.

- 6. What clinical skills can the student perform?
 - A "quick reference of med-surg skills at a glance" follows this section. A complete list of skills is provided for you in the Appendix 3 of this handbook. These skills have been taught across the curriculum of the Nursing Program. These skills have been taught in a laboratory setting and when the opportunity arisen in the clinical setting, the student was able to perform on a client. Therefore, not all skills may have presented itself in the clinical setting. However, a student should be able to tell you the critical steps of these skills taught before you allow the student to perform the skill.
 - While we like for students to assume responsibility and become independent, the student will need direct supervision with invasive skills, blood administration, medication administration, assessments of new admissions, and physician interaction.

 Skills such as vital signs and Accu-checks may be performed without direct supervision once the Preceptor is satisfied that the student can safely provide nursing care.

7. Can the student telephone the physician?

You may allow the student to telephone non-emergent information to the physician while you listen on an additional phone line. Have the student practice with you using SBAR format before telephoning the physician. The RN who is precepting the student must input and write the telephone order if the physician does not do it.

XI. Med-Surg Skills at a Glance

(For a complete list of fundamental and medical surgical skills, see Appendix 2 of this handbook)

Hygiene & Basic Care of Patient

Performing Mouth Care for the Unconscious or Debilitated Client

Shampooing Hair of a Bedridden Client

Shaving a Client

Removing Fecal Impaction Digitally

Giving a Change-of-Shift Report

Care of the Body After Death

Assisting the Adult Client with Oral Nutrition

Communication with the Anxious Client

Performing Range of Motion Exercises

Placing a Client on a Support Surface Mattress or other

"Specialty" Bed

Assisting with Warm Soaks & Sitz Baths

Caring for Clients Under Isolation Precautions

Reporting Incidents

Vital Signs & testing on Floor

Measuring and Recording Intake and Output

Measuring Blood Glucose level

Measuring Body Temperature (oral, tympanic, axillary

& rectal)

Assessing a Client's Apical Pulse & Radial Pulse

Assessing a Client's Respirations

Obtaining occult Blood in the Stool

Measuring Oxygen Saturation (Pulse Oximetry)

Collecting Nose & Throat Specimens for Culture

Collecting Sputum Specimens

Assessment, Discharge & Documentation

Performing a General Physical Survey/Basic Client Interview

Head-to-Toe Physical Assessment of the Adult Assisting with Discharge Teaching Instructions Head-to-toe Physical Assessment

Assisting with Procedures

<u>Blood</u>

Initiating Blood Therapy with RN

Monitoring Blood Therapy

Monitoring for Transfusion Reactions

Discontinuing Blood Therapy

Nasogastric Tube

Inserting a Nasogastric or Naso-intestinal Feeding Tube

Inserting and Maintaining an NG Tube for Gastric

Decompression

Irrigating a Feeding Tube

Verifying Tube Placement

Dressings

All dressing changes

Respiratory Interventions

Applying a Nasal Cannula or Oxygen Mask

Performing Endotracheal Tube Care

Performing Nasal Pharyngeal & Nasal Tracheal

Suctioning: Adult

Performing Oral Pharyngeal (Yankauer) Suctioning

Performing Tracheostomy Care

Using Metered Dose Inhalers

Assess the cuff on an Endotracheal or Tracheostomy

tube

Assisting with Mechanical Ventilation

IV

Initiating Intravenous Therapy

Caring for the Client Receiving Central Venous

Placement for Central Parenteral Nutrition

Caring for Vascular Access Devices

Changing a Peripheral IV Dressing

Changing Intravenous Solutions

Changing Intravenous Tubing

Regulating Intravenous Flow Rate

Discontinuing Central Venous Lines with RN

supervision

Discontinuing Peripheral Intravenous Access

Medication Administration

Administering an Enema

Administering Enteral Feedings via Nasogastric Tube

Administering intramuscular injections

Administering Intravenous Medications by Intermittent

Infusion Sets & Mini-infusion Pumps

Administering Medications (oral, via nasogastric tube, skin, eye drops, ear drops, nasal instillations, vaginal

instillations & rectal suppositories)

Administering Medications by Intravenous Bolus

Administering subcutaneous injections

Educate pts on medications

Catheters

Care and Removal of the Indwelling Catheter

Care of the Indwelling Catheter

Obtaining Catheterized Specimens for Residual Urine

Inserting a Straight or Indwelling Catheter

Applying a Condom Catheter

Collecting a Midstream (Clean-Voided) Urine

Collecting a Sterile Urine Specimen from

Indwelling Catheter

Appendix

APPENDIX 1

Northwest Florida State College Nursing Program

Preceptors do not need to complete

CLINICAL EVALUATION TOOL: Faculty member completes.

EVALUATION CRITERIA FORMATI SUMMATIV COMMENTS

QSEN

- 1. Patient-Centered Care
- 2. Teamwork & Collaboration
- 3. Evidence-Based Practice
- 4. Quality Improvement
- 5. Safety

EVALUATION CRITERIA			E	E		COMMENTS	6. Informatics
CORE COMPETENCY	QSEN	M	NI	S	U		
1. ASSESSMENT							
A. Collects information from multiple							
sources.	3, 4, 6						
B. Assesses patient's health status by							
completing a health history.	1, 6						
C. Performs the following assessments:							
c. Terrorms the following assessments.	1,3,4,5						
(1) Physical							
(1) Thysical							
(2) Functional							
(2) Tanetional							
(3) Cognitive/Developmental							
(-)							
(4) Psychosocial/Emotional							
(),							
(5) Cultural & spiritual influences on							
health status							
(6) Learning needs (strengths,							
capabilities, & barriers)							
(7) Ability to access available							
community resources							
(8) Environmental factors that may							
impact patient's status							
D. Compares assessment data to established	3, 4						
norms.	3,4						
E. Documents and reports assessment	1,2,4,6						
findings using appropriate terminology.	1,2,4,0						
2. ANALYSIS							
A. Analyses assessment findings as basis	3						
for nursing diagnoses.	3						
B. Prioritizes relevant assessment data							
appropriately based on the patient's	1, 3						
condition.							
C. Integrates nursing interventions with							
relevant assessment data; correlates them	1, 3						
with the appropriate nursing diagnoses.							
3. PLANNING							
A. Identifies actual and/or potential nursing							
diagnoses that reflect core needs of assigned	1						
patients.							
B. Selects from approved list of NANDA	1						
approved nursing diagnoses.	1						
C. Develops goal statements for patients	1, 4						
that reflect patient involvement.	, .						

1. Patient-Centered Care 2. Teamwork & Collaboration 3. Evidence-Based Practice 4. Quality Improvement 5. Safety **OSEN** NI U COMMEN 4. CARING INTERVENTIONS 6. Informatics A. Maintains physical and psychosocial 1, 3, 4, safety in all interventions, including 5 prioritization decisions. B. Performs nursing skills competently. 3, 5 C. Follows standards of medical asepsis. 3, 5 D. Communications therapeutically with patients & support persons. 1, 2 E. Communicates relevant, accurate, & 2, 4, complete information clearly & concisely: 5, 6 (1) Verbal (2) Written (including electronic) F. Demonstrates empathy: 1 (1) Interacts with patients other than when performing skills. (2) Keeps commitments. (3) Demonstrates respect for individuality & diversity. (4) Displays sensitivity for patient's values, ethics, & beliefs. (5) Maintains patient's privacy & confidentiality. (6) Encourages patient's/support person's collaboration in care. G. Assists patient/support persons to cope with/adapt to health changes. H. Assists the patient to achieve optimum 1 comfort & functioning. I. Adapts care in considerations of the 1, 3 patient's values & preferences. J. Delegates appropriate aspects of care. 1, 2, 3, 4, 5 K. Works cooperatively with others to 2, 4 achieve patient & facility outcomes. L. Teaches patient/support persons information needed to make choices 1, 5 regarding health. M. Provides scientific rationale for all 3 interventions OSEN Approved 12051 1. Patient-Centered Care

NWFSC ADN Nursing Preceptor Handbook NUR2811L Revised Oct 2020

5. EVALUATION

QSEN

M

NI

5. Safety

6. Informatics

COMMENTS

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U

2. Teamwork & Collaboration3. Evidence-Based Practice4. Quality Improvement

A. Evaluates progress of patient toward achievement of identified goals.	1, 3			
B. Evaluates the effectiveness of care in	3, 4			
meeting patient outcomes.	,			
C. Modifies care based on evaluation of	3			
patient progress.				
D. Recognizes errors in care & corrects	3, 5			
them.				
E. Reports all changes in patient condition.	2, 6			
6. PROFESSIONAL BEHAVIORS				
A. Follows ethical, legal, & regulatory				
standards of professional nursing practice.	3, 5			
B. Reports unsafe practices of healthcare				
providers using appropriate channels of	2, 5			
communication.	_, -, -			
C. Demonstrates accountability for nursing				
care given by self.	4, 5			
D. Advocates for patient rights.				
_ · · · · · · · · · · · · · · · · · · ·	1, 2			
E. Maintains organizational & patient	1.4.6			
confidentiality.	1, 4, 6			
F. Practices within the parameters of				
individual knowledge & experience as a	2, 5			
nursing student enrolled in NURL.	, -			
G. Recognizes own learning needs.	_			
	5			
H. Maintains appropriate, professional	1			
nurse/patient relationships.	1			
I. Adheres to dress code for NWFSC	2			
Nursing Program.	2			
J. Adheres to all NURL course	5			
policies:	3			
(1) Attendance/Tardiness				
(2) Clinical preparation requirements				
(3) Assignment submissions				
K. Forms effective professional				
relationships with agency staff, instructors,	2			
peers, & the public.		 <u> </u>		
L. Remains free of any impairment (mental,				
physical, emotional) that could threaten the	5			
safety of others (patients, peers, & staff).				

Approved 120511

Clinical Evaluations Using KSAs (QSEN)

Uses all of the knowledge, skills, attitudes (KSA's) published by QSEN as a key template in the basis of a clinical evaluation tool. Hence, the tool is accurate in reflecting the clinical capabilities of each student in an objective, quantitative fashion with a focus on quality and safety in health care. Each competency is described below with the student objects defined.

- 1. Provides Patient-Centered Care
 - a. Demonstrate and elicit patient professional and caring values to clients as expressed in the process recordings, and complete health assessment.
 - b. Elicit and communicate with patients, as related to the patient's needs, values, and preferences. Express these effectively with confidentiality to other members of health care team.
 - c. Complete a comprehensive health history incorporating and appraisal of psychosocial and physiologic issues.
 - d. Assess levels of physical and emotional comfort.
- 2. Exhibits Teamwork and Collaboration
 - a. Demonstrate awareness of own strengths and limitations as a team member.
 - b. Functions with assistance and direction as a member of the health care team.
 - c. Initiate requests for help when appropriate to situation.
 - d. Communicate with team members, in professional manner. Communicates in effective verbal and written manner, adapting one's own style of communication and adapting that style to needs of the team and situation.
- 3. Incorporates Evidence-Based Practice
 - a. Demonstrate knowledge of basic scientific methods and processes in basic nursing skills (examples: Infectious Disease prevention, Body Mechanics).
 - b. Base individualized plan of care on patient values, clinical expertise and scientific evidence.
 - c. Read evidence-based reports related to area of practice and implement the same effectively.
- 4. Understands & Applies Quality Improvement Methods
 - a. Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice.
 - b. Recognize that nursing and other health professions students are parts of systems of care and care processes that affect outcomes for patients and families.
 - c. Recognize that there can be tension between professional autonomy and system functioning in providing quality patient care.
 - d. Recognize that there are different approaches for changing processes of care.
- 5. Promotes Safety
 - a. Demonstrate effective use of technology and standardized practices that support patient safety and quality (body mechanic skills, infectious disease management, etc.).
 - b. Demonstrate effective use of strategies to reduce risk of harm to self or others.
 - c. Use of appropriate strategies to reduce reliance on memory (such as, forcing functions, checklists).
 - d. Communicate observations or concerns related to hazards and errors to the instructor, members of the health care team, patients, and families.
- 6. Understands & Utilizes Informatics
 - a. Explain why information and technology skills are essential for safe patient care.
 - b. Obtain access to the electronic health record.
 - c. Document patient care in an electronic health record.
 - d. Recognize the time, effort, and skill required for computers, databases and other technologies to become reliable and effective tools for patient care.

Approved 120511

APPENDIX 3 Northwest Florida State College Med-Surg Skills across the curriculum

Med-Surg Skills across the curriculum Administering an Enema Hand Washing Administering Enteral Feedings via Nasogastric Tube Head-to-toe Physical Assessment—child/adult Administering intramuscular injections Health History Administering Intravenous Medications by Intermittent Helping Clients with Self-Medication in the Home Infusion Sets & Mini-infusion Pumps Environment Administering Medications (oral, via nasogastric tube, Initiating Blood Therapy skin, eve drops, ear drops, nasal instillations, vaginal instillations & rectal suppositories) Initiating Intravenous Therapy Administering Medications by Intravenous Bolus Inserting a Nasogastric or Naso-intestinal Feeding Tube Administering subcutaneous injections Inserting a Straight or Indwelling Catheter Administering/ Assisting with Mechanical Ventilation Inserting and Maintaining an NG Tube for Gastric Decompression Applying a Condom Catheter Inserting and Maintaining the Nasogastric Tube Applying a Dry Dressing Intubating the Client with a Small-Bore Nasogastric or Applying a Moist Hot Compress to an Open Wound Naso-intestinal Feeding Tube Applying a Nasal Cannula or Oxygen Mask Irrigating a Feeding Tube Applying a Pressure Bandage Maintaining Body Alignment Applying a Transparent Dressing Making a Bed (occupied & unoccupied) Applying a Wet-to-Dry Dressing Measuring and Recording Intake and Output Applying an Abdominal Binder Measuring Blood Glucose level Applying an Elastic Bandage Measuring Body Temperature (oral, tympanic, axillary & Applying Aquathermia & Heating Pads Applying Cold Applications Measuring Oxygen Saturation (Pulse Oximetry) Applying External Fetal Heart Monitor Monitoring Blood Therapy Applying Plastic Stockings Monitoring for Transfusion Reactions **Aspiration Precautions** Moving and Positioning Clients in Bed Assessing a Client's Apical Pulse Non-Pharmacologic Aids to Promote Comfort Assessing a Client's Radial Pulse Obtaining Catheterized Specimens for Residual Urine **Obtaining Stool Specimens** Assessing a Client's Respirations Obtaining Urine Specimens: clean catch, catheter Assessing Arterial Blood Pressure Obtaining Wound Drainage Specimens Assisting a Client to Use a Urinal Patient-Controlled Analgesia

Assisting the Adult Client with Oral Nutrition

Assisting the Client to Use a Bedpan

Performing a General Physical Survey/Basic Physical

Examination

Assisting the Pregnant Client in Labor

Assisting with Abdominal Paracentesis

Assisting with Ambulation

Assisting with Angiography (arteriography)

Assisting with Endoscopy

Assisting with Lumbar Puncture

Assisting with Magnetic Resonance Imaging

Assisting with Medical Emergencies, i.e., Cardiopulmonary Arrests

Assisting with Emergency Cardioversion

Assisting with Emergency Defibrillation

Assisting with Suturing of Lacerations

Assisting with Warm Soaks & Sitz Baths

Auscultating Fetal Heart Sounds

Basic Patient Care Management Skills (patient care assignments, admitting, discharge & transfer of clients; conducting team meetings & delegation of duties to nursing team)

Bathing a Client

Bathing, clothing and grooming the Neonate

Brushing Teeth

Care and Removal of the Indwelling Catheter

Care of the Body After Death

Care of the Indwelling Catheter

Caring for Clients Under Isolation Precautions

Caring for Clients with Chest Tube Connected to Disposable Drainage Systems Caring for the Client Receiving Central Venous Placement for Central Parenteral Nutrition

Caring for Vascular Access Devices

Changing a Peripheral IV Dressing

Changing Infusion Tubing

Changing Intravenous Solutions

Changing Intravenous Tubing

Performing Cardiopulmonary Resuscitation

Performing Catheter Irrigation

Performing Discharge Teaching Instructions

Performing Drainage Evacuation

Performing Endotracheal Tube Care

Performing Mouth Care for the Unconscious or

Debilitated Client

Performing Nasal Pharyngeal & Nasal Tracheal

Suctioning: Adult

Performing Nutritional Assessment

Performing Oral Pharyngeal (Yankauer) Suctioning

Performing Postoperative Care of the Surgical Client

Performing Postpartum Care of the Mother

Performing Range of Motion Exercises

Performing Safe and Efficient Lifting Techniques

Performing Suture & Staple Removal

Performing Tracheostomy Care

Performing Wound Irrigation

Peritoneal Dialysis and Continuous Ambulatory

Peritoneal Dialysis: assist with

Placing a Client on a Support Surface Mattress or other

"Specialty" Bed

Postoperative Autotransfusion

Pouching a Non-continent Urinary Diversion

Preparing a Client for Surgery

Preparing a Sterile Field

Preparing the Surgical Site

Providing Perineal Care

Regulating Intravenous Flow Rate

Regulating IV Flow Rate

Removing Fecal Impaction Digitally

Reporting Incidents

Seizure Precautions

Changing IV Solutions

Cleaning Dentures

Client Interview

Collecting a Midstream (Clean-Voided) Urine Specimen and a Timed Urine Specimen

Collecting a Sterile Urine Specimen from an Indwelling Catheter

Collecting Nose & Throat Specimens for Culture

Collecting Sputum Specimens

Communication with the Anxious Client

Demonstrating Postoperative Exercises

Disaster Preparedness

Discontinuing Blood Therapy

Discontinuing Central Venous Lines with RN supervision

Discontinuing Peripheral Intravenous Access

Discontinuing Peripheral IV Access

Documenting Nurses' Progress Notes

Donning a Sterile Gown & Gloves (Closed Gloving)

Emergency Triage of Clients in the Emergency Room

Establishing Communication Throughout the Phases of the Nurse-Client Relationship

Establishing Therapeutic Communication

Fall Prevention

Shampooing Hair of a Bedridden Client

Shaving a Client

Sterile Gloving

Surgical Hand Washing

Taking Care of an Artificial Eye

Taking Care of an In-the-Ear Hearing Aid

Taking Care of Contact Lenses

Teaching Home Tracheostomy Care & Suctioning

Teaching Medication and Medical Device Safety in the Home Environment

Teaching school-age children disease prevention (drugs & alcohol)

Treatment of Pressure Ulcers

Using Home Oxygen Equipment

Using Incentive Spirometry

Using Metered Dose Inhalers

Using Safe and Effective Transfer Techniques

Verbally Deescalating the Potentially Violent Client

Verifying Tube Placement for a Large or Small-Bore Feeding Tube

Giving a Change-of-Shift Report

Appendix 4

FORMS

- Preceptor's Evaluation of the Preceptorship Experience
- Evaluation of Student by Preceptor with Associate Degree Competency references.
- Student Evaluation of the Preceptorship Experience
- Student Timesheet validated by Preceptor at end of practicum.
- Critical Incident Sheet to be completed by Instructor if incident should occur in practicum setting.

Semester/Yr:

PRECEPTOR'S EVALUATION OF THE PRECEPTORSHIP EXPERIENCE

INDCL	TOR SEVILENTION OF THE TREEE TO	TO III	1 11/2 1	LIGHTOL
		Yes	No	Comments/Suggestions for Improvement
1.	The preceptorship experience provided the student with ample opportunities to meet the course objectives.			
2.	The expectations of the course were clear.			
3.	The clinical instructor was readily available to consult with me in working with the student to meet the course objectives.			
	The Preceptor Handbook and other course tools facilitated my role as preceptor.			
5.	I would be willing to serve as preceptor for this course in the future.			
Addition	onal comments/suggestions for improvement:			

NUR 2811L

Scale: 5- Strongly Agree 4- Agree 3- Undecided

Evaluation of Student by Preceptor

Please complete this form and preceptor evaluation form and place in the envelope provided. Seal envelope and sign name across the seal. Give the envelope to the student. Evaluate the student based on the scale provided. For additional information about each competency, see back of sheet. Any comments about the student's performance are welcome.

1- Strongly Disagree						
EDUCATIONAL COMPETENCIES:	(see Education	al Comp	petencie	s for de	scription of	f
areas)						
PROFESSIONAL BEHAVIORS	5	4	3	2	1	
COMMUNICATION	5	4	3	2	1	
ASSESSMENT	5	4	3	2	1	
CLINICAL DECISION MAKING	5	4	3	2	1	
CARING INTERVENTIONS	5	4	3	2	1	
TEACHING & LEARNING	5	4	3	2	1	
COLLABORATION	5	4	3	2	1	
MANAGING CARE	5	4	3	2	1	
<u>COMMENTS</u> :						
Preceptor Signature:			Date:			
Student Signature:(Student to sign duri	ng Summative F	Evaluati	Date on)	e:		

Associate Degree Nursing Competencies

PROFESSIONAL BEHAVIORS

- Practice within ethical, legal, and regulatory frameworks of nursing & standards of professional nursing practice
- Report unsafe practices of healthcare providers using appropriate channels of communication
- Demonstrate accountability for nursing care given by self &/or delegated to others
- Maintain organizational and client confidentiality
- Practice within the parameters of individual knowledge and experience

COMMUNICATION

- Report and document assessments, interventions and progress toward client outcomes
- Utilize appropriate channels of communication to achieve positive client outcomes

ASSESSMENT

• Assess the client's response to interventions by self and other team members

CLINICAL DECISION MAKING

- Make clinical judgments and management decisions to ensure accurate and safe care
- Evaluate the effectiveness in meeting client outcomes by self and other team members
- Participate in problem identification and data collection for research, quality control or improvement processes to meet client outcomes
- Use evidence-based information collected electronically or through other means to support clinical decision making

CARING INTERVENTIONS

- Demonstrate caring behaviors towards the client significant support person(s) peers, and other members of the healthcare team
- Perform nursing skills competently

TEACHING & LEARNING

- Evaluate the progress of the client and significant support person(s) toward achievement of identified learning outcomes
- Provide assistive personnel with relevant instruction to support achievement of client outcomes

COLLABORATION

- Coordinate the decision-making process and work cooperatively with the client, significant support person(s) and other members of the healthcare team to evaluate progress toward achievement of outcomes
- Interact creatively and openly with others to solve problems to achieve client goals and outcomes

MANAGING CARE

- Facilitate the continuity of care within and across healthcare settings
- Uses technology and standardized practices that support client safety and quality.
- Delegate aspects of client care to qualified assistive personnel
- Supervise and evaluate the activities of assistive personnel
- Adapt the provision of client care to changing healthcare settings and management systems
- Implement nursing strategies to provide cost efficient care

STUDENT EVALUATION OF THE PRECEPTORSHIP EXPERIENCE

		Yes	No	Comments/Suggestions for Improvement
	The preceptorship experience provided me with mple opportunities to meet the course objectives.			
2. T	The expectations of the course were clear.			
CO	The clinical instructor was readily available to onsult with me in working with the preceptor to neet the course objectives.			
	The clinical preceptor guided me in meeting ourse objectives.			
fa	The Practicum Worksheet and other course tools acilitated my role as preceptor.			
Addition	al comments/suggestions for improvement:			

STUDENT TIMESHEET

Student to fill out and have signed by Preceptor at the completion of Practicum

Date of shift	Unit Worked	Time in and Out	Hours Completed	Cumulative Total
TOTAL Hours				
Student Signature:				
Preceptor Signature:				
Faculty Signature:				

Northwest Florida State College Nursing Program

CRITICAL INCIDENT

Instructor to Complete in NUR2811L

Date of Incident:		
Location:		
Student:	-	
Faculty:	_ Course:	
Description of Event:		
Corrective Steps Taken:		
Clinical Competency Violated po	r Performance Report for NUR:	
Category (See Nursing NWFSC	Student Handbook for details):	
 Functioning outside scope Omitting safe, essential care Failure to observe nursing of confidentiality; falsifyith Committing acts that hare Abandoning clients Other: 	re to clients gethics & legalities (e.g., performing while impaired; brong information, etc.)	each
Recommendations:		
Student Comments:		
Student Signature:	Date:	
Faculty Signature:	Date:	