

Holy Names University
FNP Student Preceptorship
Handbook

for

Clinical Courses:

251A, 251B, 252, and 253

2016



Overview of Preceptor Placement Process

The clinical courses provide opportunities for students to apply knowledge, practice skills, plan, implement, and evaluate interventions and programs and to learn the full scope of the FNP role. Students must complete 624 hours of supervised clinical practice in four clinical courses. Each clinical course has specific objectives that must be met. Please read the course descriptions for each clinical course.

Clinical practicum sites are selected collaboratively by the Preceptor Coordinator and the student with a focus on obtaining a variety of primary care experiences with patients of all ages.

Arranging for preceptor placement takes considerable time and a cooperative effort. Students are responsible for seeking out and identifying potential preceptors. It is important for students to keep the Preceptor Coordinator informed about providers willing to be preceptors. The Preceptor Coordinator is a resource to help in this search, and communication is essential. The University makes the arrangements for clinical instruction and supervision for students, but it is the student's responsibility to participate actively in the identification of appropriate potential preceptors. The Preceptor Coordinator will evaluate those preceptors for suitability and either approve them or reject them as preceptors.

Some large facilities, such as county hospitals and public health departments, have a person in charge of student placements. Those large facilities prefer to communicate with the Preceptor Coordinator. They do not accept telephone calls or email messages from students. Requests for placement must be made by the University, and not by individual students. Students may ask for

the name of and contact information for the person in charge of student placements. The Preceptor Coordinator will communicate directly with this person on your behalf.

As soon as a student is aware of a potential placement, it is important to notify the Preceptor Coordinator immediately. Students who desire to remain with a preceptor for consecutive courses are responsible for obtaining the approval of the Preceptor Coordinator before beginning the next course.

Preceptor Approval

After identifying a willing preceptor, the student provides the name of potential preceptor and that person's address, phone number, email address, credentials and any title (i.e., MD, DO, NP, CMN etc.) to the Preceptor Coordinator. In addition the student obtains copies of the preceptor's resume and license, a signed Letter of Agreement (see documents following the Appendix) and the signature page of the clinical site's standardized procedures, bearing the signature of the preceptor. With all four documents in hand, the student requests preceptor approval using the E*Value system. Students upload all four documents to request preceptor approval. Please note: The Preceptor Coordinator makes the final decision after a review of the potential preceptor's resume and evidence of an unencumbered professional license. The student may not attend clinical until the preceptor and the 4 documents have been approved.

Some healthcare facilities require a formal contract before accepting students for clinical placements. The University has many existing contracts with healthcare facilities throughout California. However, if there is no existing contract, the staff will initiate a new contract. The student is responsible for providing the Preceptor Coordinator with the correct information about the facility: (1) name of the facility, (2) facility address, (3) contact person at facility and (4) contact person's phone number and email address. The process of executing a contract can take

months. Contracts are not valid until the University and the facility both sign the contracts. Students cannot begin their clinical hours until the facility signs and returns the contract to the University.

Criteria for Site and Preceptor

According to the California Board of Registered Nursing, Family Nurse Practitioner clinical placement sites must have sufficient clinical space to allow the student to see patients over a time frame appropriate to the beginning practitioner. The site's standardized procedures must be available to the student. If standardized procedures are not in place, a site may be considered for student placement **only** when appropriate standardized procedure documents have been signed by the preceptor and the student. Students should consult the faculty for their current clinical course should this situation arise. Clinical sites may be selected because they provide access to diverse and underserved patient populations. Every effort is made to supplement the professional experience of the graduate student. If a student's professional experience has occurred primarily in a specific health setting or with a specific population, clinical sites are sought to broaden the scope of his/her practice with diverse populations or by moving from a private to a public setting.

Preceptors provide direct clinical teaching to students in a range of clinical experiences that encompasses the scope of primary care Family Practice. An interdisciplinary mix of preceptors may provide the student with the best clinical experiences to meet program objectives. Students may have multiple preceptors for the same clinical course. However, each preceptor, both nurse practitioner and non-nurse practitioner preceptors, must be credentialed and licensed in the appropriate area of practice. In addition, this area of practice should be clearly relevant to meeting the objectives of the Family Nurse Practitioner program. A preceptor must have an unrestricted

license in the state, must be willing to provide specific instruction and clinical supervision relevant to meeting the objectives of the NP program and must be able to provide an experience appropriate for the role of the advanced practice nurse. During their four clinical courses, students must have at least one clinical experience with an APRN preceptor and preferably an NP with expertise in ambulatory primary care family practice.

- A physician (MD, DO) preceptor is a graduate of a nationally accredited medical school. Physician graduates of foreign medical schools, must have completed the required clinical residencies and received approval for a license to practice in the US. The physician is in general or family practice or in general medicine to serve as a primary preceptor or is in specialty practice, e.g., gerontology, pediatrics, to serve as a secondary preceptor. The experience in the field would be a minimum of one year.
- A nurse practitioner or APRN preceptor is a registered nurse and graduate of a nationally accredited (NLNAC or CCNE) school of nursing, or state approved school (if the state regulates APNs), has a minimum of an MSN or MS, and has a minimum of three years of clinical experience in primary care. If the NP does not have a minimum of an MSN or MS, the NP cannot serve as a primary preceptor. Other ARNPs such as a PNP, CNM, etc. may serve as preceptors for placements that focus on their specialty content, if they are nationally certified by the appropriate agency (i.e., AANC, AANP, NCBPNP, NAPNAP, NCC, ACNM). Nurse Practitioners function under Standardized Procedures pursuant to California Code of Regulations, Title 16, Division 14, Article 7, Sections 1470- 1474. The preceptor's Standardized Procedures must be available to the student.

Process for Arranging a Clinical Placement

A needs assessment for a preceptor should begin early in the educational experience and should cover the four terms when a preceptor is needed. This means the search should begin in

the Spring of the first year. If you are interested in arranging a particular clinical placement, and know of a physician or nurse practitioner who is willing to precept you during the course of the program, please supply the following information to the Preceptor Coordinator:

- Name of any potential preceptor known to the student and that person's address, phone number, email address, credentials and any title (i.e., MD, DO, NP, CMN etc.). Email addresses are particularly important because they make it much easier for the Preceptor Coordinator to be in touch with the potential preceptor and email addresses are required in E*Value.

When the Preceptor Coordinator has accepted a potential preceptor, the following additional information will be obtained by the student and provided to the Preceptor Coordinator:

- The preceptor's resume
- A copy of the preceptor's license to practice in California from the license verification page inCA BreZE: www.breeze.ca.gov
- The signature page for the Standardized Procedures in use in the preceptorship setting
- A signed Letter of Agreement with the preceptor's email address and phone number clearly noted

Students upload all four documents into E*Value for preceptor approval. All four documents must be uploaded at the same time. Follow the instructions, *How to Use E*Value*, to enter a request preceptor approval. The instructions are located on each student's E*Value homepage. All of this information must be submitted and approved **before** the student may attend any clinical hours with the preceptor.

Adaptability and flexibility in scheduling clinical days will allow for finding the best sites. Students may be delayed in progressing through their clinical curriculum if they are unwilling to accept an assigned site due to their personal schedule. Even though a placement close to home is desirable

it is not always possible. Students may need to travel a significant distance to obtain the required preceptorship experience. Many clinical sites are not convenient to public transit (buses, trains, etc.) Travel time is not part of the clinical practicum hours. Students are responsible for arranging their own travel to and from practicum sites and any overnight accommodations that may be needed.

A student may be transferred to a different practicum site at any time if the site is not able to meet the learning goals and objectives of the clinical course, but a student may not initiate a change of practicum site except in consultation with the Preceptor Coordinator.

Once a student accepts a clinical placement, the student is responsible for contacting the preceptor and agreeing on a date for the initial meeting. In addition, the student is responsible for completing any requirements the facility may have, such as immunization review and orientations. Some facilities require reading various health care topics and passing a battery of quizzes. It is the student's responsibility to complete all required materials on a timely basis.

At the initial meeting, student and preceptor should agree on a schedule of clinical days. The clinical schedule is entered in *Learning Modules* on the E*Value system. The Preceptor Coordinator reviews and approves clinical schedules. Students are expected to adhere to approved clinical schedules.

Occasionally there are changes beyond the student's control, such as an illness, preceptor absence or clinical closure. Notify the Preceptor Coordinator, if the clinical dates need to change. The schedule will need to be reviewed and re-approved.

Required Clinical Hours

Students are required to accumulate a total of 624 clinical hours in order to complete the FNP program. The first 312 hours should be devoted to obtaining a full scope of Family Practice

experience including Pediatrics, Women's Health and Adult Medicine. Ideally 104 clinical hours should be spent with each of these populations as a foundation for clinical practice. This may be accomplished in three individual sites, each serving one of these populations. Or, if a family practice setting can provide adult, geriatric, child (pediatric) care, and women's healthcare experience, it can be selected for three rotations totaling 312 hours in lieu of settings that focus only on specific patient population groups. That is, students may fulfill all clinical hours for the first three clinical assignments within one family practice setting, as long as it can provide proportionate experience that adequately covers Pediatric, Adult Primary Care, Geriatrics, and Women's Health populations.

Please note, experience in Pediatrics, Women's Health, and Adult Primary Care must be obtained **before** a specialty care site, such as Urgent Care, Orthopedics, or Dermatology may be scheduled. Students may be assigned to a specialty site if they will fulfill the course requirements for ambulatory primary care in their activities there (i.e. perform physical examinations, diagnose simple and episodic problems, co-manage chronic and complex problems). The clinical logs must demonstrate the successful completion of the care of adults, children and women (no distinction is made between gynecological and obstetrical patients) before a specialty care site is approved.

The plan for clinical hours is based on a 13-week schedule. Students are expected to be in clinic with their preceptor every week. For 251A and 251B students attend one eight-hour day each week. For 252 and 253 students attend two eight-hour days weekly. At the end of 13 weeks, students should have completed the minimum number of hours for each course. Please note that the number of hours/days devoted to clinical experience is established by the course curriculum. Student should expect to devote the appropriate number of clinical hours/days for the

course in which they are enrolled to their preceptorships each week and should plan their personal schedules accordingly.

Every week students submit their clinical hours in E*Value's *Time Tracking* module. In addition, students submit details of their patient encounters on a weekly basis in E*Value's *PxDx*. It is important to stay abreast of these two activities: (1) entering clinical hours and (2) entering patient encounters.

Please note: Clinical placements will not be held for students who are not attending their clinicals. Students absent from clinical for three consecutive weeks must surrender their clinical placements. Other students will be assigned to these placements. Students who are absent from clinical for six consecutive weeks for any reason are required to take a Leave of Absence from the FNP Program.

Required Documents for the Student's File

There are several documents that must be submitted to the Department of Nursing and they are kept in the student's file: Health and Safety Records, a copy(ies) of the Preceptor Letter of Agreement and accompanying documents, copy of the signature page of the clinical agency's Standardized Procedures, and copies of the student's clinical logs and site evaluations.

- Students are required to submit their current California RN license, proof of Student Nurse Practitioner malpractice insurance in the amount of \$1,000,000 per occurrence and \$6,000,000 aggregate, proof of AHA Healthcare Provider CPR certification, and proof of required immunizations to CertifiedBackground.com. A yearly background screening is also required and proof must be posted to CertifiedBackground.com. RN liability insurance does not satisfy the proof of insurance requirement. The insurance certificate must designate

student FNP status. On occasion a facility will request additional liability coverage. Notify the Preceptor Coordinator if additional insurance is requested.

- Before a student may begin a clinical placement, or enroll for clinical credit in the clinical courses students must collect and upload into E*Value the following four documents **for each preceptor:**
 1. A Letter of Agreement (LOA) signed by the preceptor
 2. A copy of the preceptor's resume
 3. A copy of the page from CA BreEZe (breeze.ca.gov) verifying the preceptor's license
 4. The signature page from the Standardized Procedures in use at the site of the clinical placement
- In order to complete the clinical courses and receive a grade, the following materials must be in the student's file for each clinical placement:
 - a. Clinical hours verified by the preceptor:
 1. Clinical hours are posted to the *Time Tracking* in E*Value and approved by the preceptor. E*Value records the date the preceptor approved the hours. Any unapproved hours must be resolved before the hours count toward the student's required clinical hours.
 - ii. .If a preceptor cannot verify hours in E*Value, contact the Preceptor Coordinator. Paper forms will not be accepted without prior approval from the Preceptor Coordinator.
 - b. Clinical logs are submitted weekly for all patient encounters. Clinical logs are entered and saved in *PxDx* on E*Value. Clinical logs are reviewed for completeness and accuracy. Students must notify the Preceptor Coordinator to add ICD-9/ICD-10 codes not currently in the database. Review the Course Descriptions for details on the number of patients student should be seeing daily by the end of each clinical course.

c. Four completed evaluations must also be on file before a student can receive credit for a clinical course:

i. The preceptor's evaluation of the student performance, Appendix A, B, C, or D

ii. The student's evaluation of the preceptor, Appendix F

iii. Two copies of the student's evaluation of the clinical site, Appendix G

iv. The Faculty Site Evaluator's evaluation of the student, Appendix E.

- Please note: If a student has multiple preceptors in one clinical course, each preceptor completes an evaluation (Appendix A, B, C, or D). In addition, students submit Appendix F, Evaluation of Preceptor by the Student, for each preceptor.

Progress **During Clinical** Experiences

Independence in the clinical experience varies and is dependent on many factors, however, it should be determined by both the student and the preceptor. The degree of independence appropriate of a student in any specific rotation is a cooperative decision but is dependent on how much help is needed by the student and how comfortable the preceptor is with the student's abilities. This basically means, in the beginning, the student may need to "shadow" the preceptor, observing the process of gathering information and making decisions, and observing patient encounters from start to finish. "Shadowing" is meant to be an introduction to the site and the preceptor's processes, and should not continue beyond the first few days of a clinical assignment.

In order to identify placements which are not productive of optimal learning, students are required to submit a copy of Appendix G: Evaluation Of Site By Student and Faculty Site

Evaluator after the first three days in a new clinical assignment. Appendix G is available *Evaluations, On-the-Fly* in E*Value. This document is to be completed after the third clinical day, and again at the time of the clinical site visit. Two Appendix G Evaluations must be completed for each course.

Paper evaluation forms will not be accepted without prior approval from the Preceptor Coordinator . It is the student's responsibility to report any difficulties preceptors have with accessing the online evaluations.

Acclimating to a new clinical site

Take time in the beginning of the clinical placement to learn where supplies are located , what paperwork is related to the patient encounter, what clinical reference materials available, who handles referrals, what patient education materials are available, what formularies are used, what insurances are accepted, and typical characteristics and demographics of patients population of clinical setting. Study the site's Standardized Procedures. Be sure to ask about the specific goals of the clinic and the preceptor. Find out how many patients the preceptor is expected to see daily.

Within a few days it is not unusual for the student to begin to see patients entirely alone for "well checks", reporting the findings and actions to the preceptor before the patient leaves the clinic. Even in the first clinical assignment, it is possible the student will be able to manage healthcare maintenance and the corresponding patient education early in the rotation. Within one or two days in a new setting, the student should be ready to gather the history on a patient, report that history to the preceptor, and then watch the preceptor do the physical exam. Alternatively, the preceptor may present a history and have the student determine what needs to be included in the physical examination. Then the student would perform the exam and report the findings back

so that together they can make decisions regarding diagnoses and management. This scheme of "co-caring" allows the student to gain experience while at the same time the preceptor can be seeing other patients and maintaining the normal clinical schedule. The amount of independence and degree of direct supervision by the preceptor, as well as the complexity of patient problems the student cares for is expected to increase throughout each rotation and as the student gains a greater fund of knowledge through classroom instruction during progress through the program.

It is also important to refer back to the course objectives during each term. The objectives indicate the degree of independence that is expected while proceeding through the term. If at any time the experience seems too slow or too fast, it is important to talk to the preceptor first and then to the faculty for the clinical seminar and to the Preceptor Coordinator if further assistance is needed. In the same manner, the preceptor would hopefully talk to the student and then contact the faculty if the student is not meeting expectations. Remember, the operative word here is PROGRESS.

There may be health conditions seen in the clinic before they have been explored in class because it is impossible to cover everything up front that may present in the clinic. It is important not to miss the opportunity to do and see anything that comes along. Simply let the preceptor know when something has not been covered in class. It is possible to gather a history and make an assessment anyway. The preceptor may suggest time be spent researching the topic using resources available at the clinical site, may explain the fundamentals, or may suggest another patient be seen. While becoming increasingly independent in diagnosis and management, the student will always need to present the cases to the preceptor for final approval before the patient leaves the clinical setting.

In conclusion, the clinical placement is a collegial experience with the student working with the preceptor and learning from the preceptor. Thus, it is absolutely essential the two are able to communicate effectively. It is essential that the student arrive on time and fulfill the commitment of the contract. Students who are absent, repeatedly tardy, or who change the schedule of their clinical assignments without faculty permission may be removed from the clinical setting at the discretion of the Preceptor Coordinator and/or the clinical course faculty. If at any time there is a problem related to the clinical site, the student should contact the Preceptor Coordinator and the lead faculty of the clinical course for help.

Students CANNOT provide care without supervision by the preceptor.

Site Evaluations

Faculty Site Evaluators are experienced nurse practitioners who visit students at their assigned clinical sites to evaluate students' clinical performance. They share their observations with the students and recommend areas to improve clinical performance. In addition, they meet with preceptors to validate their evaluations and recommendations. They prepare a written report of the evaluation, Appendix E, which is considered in determining students' "pass" or "fail" grade for each specific clinical course. The reports become part of students' official records.

Students are required to have at least one evaluation during each clinical course. Faculty Site Evaluators may decide to schedule additional evaluations if questions arise about students' progress in any clinical course. Any additional site visits are coordinated with preceptors and students. Because Faculty Site Evaluators are themselves providers currently active in a general or specialty practice, students need to be flexible enough to arrive at a site evaluation date agreeable to all parties. Every effort will be made to match the site evaluator to the requested

days as long as the student requests the site evaluation by the appropriate due dates for the course. (at the completion of 40 hours for courses 251A, 251B and 100 hours for 252, 253).

To request a site evaluation, students complete the form, "Request for Site Evaluation" and send it to the Preceptor Coordinator at benham@hnu.edu. The form is available on every student's E*Value homepage. The request form provides information for the Faculty Site Evaluator. **Students enrolled in 251A or 251B must request a site evaluation when 40 hours are completed. Students enrolled in 252 or 253 must request a site evaluation when 100 hours are completed.**

Please note: Students are not permitted to arrange their own site evaluations without prior approval from the Preceptor Coordinator.

Responsibilities of the University

The Department of Nursing provides several resources in support of students and preceptors:

- Verification, and in some cases provision, of required Standardized Procedures for Nurse Practitioners pursuant to California Code of Regulations, Title 16, Division 14, Article 7, Sections 1470- 1474.
- Designated staff – Preceptor Coordinator
- Provision for ordering and documenting comprehensive background checks
- System for Documentation and review of RN license, CPR certificate, immunizations, titers, and TB screening
- Classroom instruction, clinical seminars, and labs as a foundation for clinical practice,
- Evaluation forms based on standard clinical criteria

- Access to a systematic method to request preceptor approval, communicate the clinical schedule, describe patients encountered in clinic, record and track clinical hours, and complete evaluations.
- Orientation to Preceptorship
- Training on use of E*Value

HEALTH & SAFETY RECORDS

Instructions

All students are required to be in compliance with all the Health and Safety documents prior to the first day of classes. You will need all the requirements completed at least a week prior to the beginning of the school term. The FNP Program requires that all students utilize Certified Background and upload their health and safety documents onto Certified Background (fees for this must be paid by the student). After they are uploaded, documents must be reviewed and approved prior to beginning clinical assignments.

Malpractice Insurance

All students must have Nurse Practitioner Student insurance. RN insurance carriers frequently provide Nurse Practitioner student insurance. Nurses Service Organization (NSO), a professional nursing insurance service, can provide the necessary coverage. Visit the web site www.NSO.org to evaluate. The minimum required limits are \$1,000,000/incident and \$6,000,000/aggregate.

All students must complete a Background Screening and Student Immunization Tracker. Students will not be placed with a clinical preceptor or in a clinical setting until both the screening and the tracker have been completed.

Health and Safety Requirements:

1. Please make sure you have obtained all of your documents and have them ready for review and ready to upload to Certified Background. Prior to uploading your records to the Tracker, you will need to scan them onto your computer and save them as .pdf (Adobe Acrobat) files. **DO NOT SAVE YOUR FILES IN ANY OTHER FORMAT AS THE TRACKER WILL NOT BE ABLE TO VIEW THEM.** If you need to download Adobe Acrobat, you can find a free download here - <http://www.adobe.com/products/acrobat/>
2. Visit the web site www.certifiedbackground.com. Click the button labeled "Students".
3. In the Package Code box, enter package code: **HF86**
4. You will be shown a screen that reviews the package you are requesting.
Package: HF86
5. The background check results are usually returned within 3 to 5 days. If you need assistance, you can contact Certified Background at **888-914-7279** or cp servicedesk@certifiedprofile.com and a Student Support Representative will be available **Monday-Thursday 8am-8pm, Friday 8am-6pm & Sunday 10am-6:30pm EST.**
6. Please notify Nursing Department Office when your screening is complete.

Background Check – All FNP students (upon admission, prior to first day of school) *renewed annually*. See above.

Measles, Mumps & Rubella (MMR)

-There must be documentation of a positive antibody titer for all 3 components (lab reports required).

Varicella (Chicken Pox)

-There must be documentation of a positive antibody titer (lab report required).

Hepatitis B

-There must be documentation of a positive antibody titer (lab report required).

TB Skin Test

-There must be documentation of one of the following:

- 2 step TB Skin test (1-3 weeks apart)
- If positive results, provide a clear Chest X-Ray (lab report required)

Tetanus, Diphtheria & Pertussis (Tdap)

-There must be documentation of a Tdap booster within the past 10 years.

CPR Certification

-Must be the American Heart Association Healthcare Provider course. Copy must be front and back of the card, card must be signed.

Influenza

-Submit documentation of a flu shot administered during the current flu season.

Professional Liability

-Submit a copy of your current liability insurance coverage. Coverage limits for professional liability are: Minimum professional liability Insurance should be renewed annually should not be less than \$1,000,000 each claim and \$6,000,000 aggregate.

RN License

-Provide a copy of your current RN License or verification of licensure through the state website.

Acknowledgement of Health and Safety Requirements

-Upload your acknowledgement of the Health and Safety Requirements form.

Code of Conduct

-Upload your acknowledgement of receipt for Code of Conduct.

Some clinical facilities have additional requirements, such as N95 mask fit testing, drug testing, life scan, etc. These additional requirements will be addressed on an as needed basis and could be at the student's expense.

If you have any questions, you should **email Deidre Bean, Health and Safety Co-Ordinator: bean@hnu.edu**

If a Drug Test is required, the package code is **HF86dt** (only if required by a specific setting or assignment).

RN license, CPR certification, and Malpractice Insurance all have expiration dates. When your record expires, you will receive an email notifying you of the impending expiration date. Students who do not upload valid documents within 2 weeks of the expiration date risk having clinical hours invalidated due to incomplete records.

Students must renew their Immunization Trackers while enrolled at HNU. Once you have graduated from your program, you do not need to renew your tracker membership. Most students need only renew their tracker once more after the initial setup. Students do not need to reorder Background Screenings.

HOW TO USE E*VALUE

For Students

HNU MSN/FNP Program

Basic Instructions for Preceptor Approval and Clinical Documentation

A. Personal information Update on Homepage

1. Sign onto E*Value
2. Scroll down to bottom of your homepage
3. Click on "Edit" button
4. At first you will see a blank page
 - a. Scroll to the bottom left
 - b. Enter the languages you speak
 - c. Scroll up and down on the far right
 - d. Enter your contact information
5. Scroll to bottom of page
6. Important: Click on gray "Update" button before you leave the page to save your entries.

B. Preceptor Approval Process in "Schedules"

1. Student finds preceptor
 - a. Collect the 4 required documents
 - i. copy preceptor resume -
 - ii. copy of preceptor license
 - iii. signed LOA
 - iv. signed signature page from Standardized Procedures
 - b. When all documentation in hand, student is ready to submit request for preceptor approval
 - c. Important: Do not submit request until ALL documents are available for uploading.
2. Student signs onto E*Value
 - a. Clicks on "Schedules";
 - b. Click on the "Manage Requests"
 - c. Select correct "Course", not Clinical Schedule
 - d. Enters the Start and End dates for the clinical placement
 - e. Selects the clinical placement site from drop down list. Do not select HNU.
 - i. If site absent from list, clicks on green icon (to the right of box) to add facility
 - f. Selects preceptor from drop down list

- i. If preceptor absent from list, clicks green circle to add preceptor
 - ii Clicks on "Request Documents" to upload 4 documents:
 - copy preceptor resume -
 - copy of preceptor license-
 - signed LOA-
 - signed signature page from Standardized Procedures-
 - h. Enters any comments for the Clinical Coordinator
 - i. Clicks "Submit" to send approval request to Clinical Coordinator
- c. Enter Clinical Schedule in "Learning Modules"
1. Seven (7) days before 1st of month
 - i. Email reminder to submit clinical schedule
 - ii. Enter clinical schedule monthly
 2. Student signs onto E*Value
 3. Clicks on "Learning Modules"
 4. Clicks on "To Be Completed"
 5. Clinical Schedules identified by month and year, for example; ClinicalSchedule-February 2015
 5. Clicks on blue link next to ClinicalSchedule "[Click to Complete Coursework](#)"
 6. Form opens with space to enter date, course, preceptor, and time
 7. Enters clinical schedule
 8. Clicks on gray "Submit" button or gray "Save for Later" button at bottom of page
 - i. "Submit" sends schedule for approval
 - ii. No approval with "Save for Later"
 9. Schedule cannot be changed after approval.
- D. Enter ClinicalLog Information in PxDx
1. Log onto E*Value
 2. Select "PxDx" Tile
 3. Select "Add New"
 - a. Select the correct course number: 251A, 251B, 252, or 253, 451A, etc, from the drop down list
 - b. Select the correct site from the drop down list

- c. Enter the **date** of the patient encounter
 - d. Enter the **patient's initials**
 - e. Select the **patient's age**
 - f. **Select patient's gender** from drop down list
 - g. Select the **type of patient** from the drop down list
 - h. Select the **preceptor** from the drop down list ("**Supervisor**" = **Preceptor**)
 - i. **Highlight the name of the diagnosis** from the Diagnosis Box
 - i. Click one time on the name to highlight the diagnosis
 - ii. Enter the name of the diagnosis in the "Filter" box to locate the diagnosis more quickly in the Diagnosis Box
 - j. In the "**Role**" box select from the drop down menu the percent of patient encounter performed
 - k. Select the amount of **time spent** with the patient in minutes (or hours)
 - l. In the "**Notes**" section describe in words the care given Eg, HPI, exam, procedures, Rx, and when to RTC. **A note is mandatory.**
 - m. Click on the gray "**Add Diagnosis**" button
 - i. The diagnosis just submitted appears in a table immediately beneath the gray Add Diagnosis button
 - ii. To add additional diagnosis for same patient, highlight additional diagnosis before saving record or leaving the page
 - iii. Each new diagnosis is numbered and appears in the table
 - iv. The red circle to the right allows for deleting the diagnosis before saving the record
 - n. If you performed a procedure, select any **Procedures** given
 - o. Select the **Role** from the drop down list
 - p. Make a **Note** about the procedures
 - q. Click on the gray "**Add Procedure**" button
 - r. To link procedures with diagnosis for reporting purposes, click on the "**Relationship by Diagnosis**" button
4. Click on gray "**Save Record**" button to save all entries and complete the encounter,

E. Reporting Clinical Hours in "Time Tracking"

1. Student logs onto E*Value
2. Selects "**Time Tracking**" tile
 - a. Selects "**log2.0**"
 - b. Choose the correct "**Task**" from the drop-down menu
 - i. "Task" = the type of patient
 - ii. If placement is in Family Practice, then select the appropriate Family Practice patient
3. Selects the correct **course**: 251AI, 251BL, 252L, or 253L, 451AL, 451BL, etc
4. Selects the clinical **site** from the list
5. Selects the "**Supervisor**" = **name of your preceptor** from the list
6. Enters your **start time**
7. Enters your **stop time**
8. **Clicks on the calendar.** Clicks on the date in the large calendar. Clinical hours appear with name of site.
9. The time is saved after exiting from Time Tracking
10. Preceptor will receive a weekly email message to verify students' clinical hours
 - a. Preceptor receives email message with direct link to students' calendar in Time Tracking
 - b. Preceptor clicks on students' entries to approve students' clinical hours
 - c. Green check means preceptor approved hours
 - d. After approval hours cannot be changed

F. Evaluations

1. Submit Appendix G before third clinical day
 - a. Sign onto E*Value
 - b. Near the top of the page,click on the square labeled "Evaluations"
 - c. Select "On-the-Fly"
 - i. Appendix G should always appear as Evaluation Type
 - ii. "Who would you like to evaluate?" should always be "Not applicable"
 - iii. Select the course number from drop-down menu
 - iv. Select the correct name of the site from the drop-down menu
 - v. Select the timeframe, "Appendix G"
 - vi. Click on "Next".
 - d. Fill out form for Appendix G
 - e. At bottom of page,click "Submit"

2. "Sign-Off" for Appendix E,the site evaluation (How to Approve It)
 - a. Sign onto E*Value
 - i. Click on the square labeled "Evaluations"
 - ii. Click on "Trainee Reports"
 - iii. Click on "About Trainee"
 - b. Fill in the boxes with the correct selections
 - i. Filter Template:leave blank
 - ii. Start Date: enter the beginning date of the term
 - iii. End Date:defaults to "today's date"
 - iv. Date Type: always "Request Date"
 - v. Skip to Evaluation Type
 - vi. Select Appendix E.
 - vii. "Format Option" select "html"
 - viii. Click on "Next"
 - c. To open and read your evaluation,click on the link "View Evaluation"
 - d. Scroll to the top of the page.
 - i. Click on "Agree",if you accept the evaluation.
 - ii. If you do not accept the evaluation,click on "Disagree",enter comments in the box.
 - e. Click on "Submit" to complete Appendix E.

Please note: Students are required to notify the Preceptor Coordinator about any E*Value issues.

If the preceptor encounters problems,notify the Preceptor Coordinator promptly.

Course:

LETTER OF AGREEMENT FOR CLINICAL
NURSING EXPERIENCE BETWEEN HOLY
NAMES UNIVERSITY

AND Preceptor: _____

Preceptor's Name and Address:

Date: _____

Work Phone: _____

E-mail: _____

This letter is to confirm arrangements for _____ (the Student), Family Nurse Practitioner (FNP) student, to obtain clinical experience in your practice. The Student will spend ___ to ___ hours per week in your office during the _____ Semester(s), at times to be arranged depending on your office hours. Your responsibilities include clinical supervision and instruction, as needed, verification of the Student's clinical hours, and a written evaluation of the Student's performance at the end of each 13-week semester. Evaluation forms are available online. Instructions to access the online evaluations are found in the *Preceptor Handbook* along with instructions to verify the Student's clinical hours.

At least once per semester a Faculty Site Evaluator will visit your clinic to observe and evaluate the Student's clinical performance. The Faculty Site Evaluator's written evaluation is used to determine the Student's final clinical grade for each semester.

The Student will have successfully completed coursework in health assessment and health promotion before starting clinical training in your practice. Throughout the program the Student will continue to receive and complete classroom instruction for evaluation and management of common episodic illnesses and stable chronic diseases. The FNP Student functions under their Registered Nurse license within the stipulations of the Business and Professions Code Chapter 6, California Nursing Practice Act Article 2, Section 2725. The course content provides policies and protocols for FNP practice, which the Student is expected to understand and follow. However, in your office, the Student is expected to consult with you and follow your Standardized Procedures and your approaches to treatment. The signature page (only) of your practice' Standardized Procedures must become part of the student's records for the clinical experience and must be provided to the University. The Student maintains professional liability insurance.

This letter serves as an agreement between you and Holy Names University, unless there are other changes you desire. Should you have any questions about this clinical assignment, please do not hesitate to call 510-436-1204

Edith Jenkins-Weinrub, RN, Ed.D

Preceptor

Chair, Department of Nursing

Request for Site Evaluation

In order to prepare the site evaluator for your upcoming site visit, please fill out the information below. Email the information to the Preceptor Coordinator at this email address: benham@hnu.edu.

1.	Your Name and email address:
2.	Your phone number for day of visit:
3.	Course Number:
4.	Name of Preceptor:
5.	Indicate appropriate credential: MD NP DO PA CNM
6.	Type of practice:
7.	Address of clinical site
8.	Phone number at clinical site:
9.	Contact person at clinical site:
10.	Hours closed for lunch?
11.	Dates and times available for site evaluation:
12.	Expected last clinical day?
13.	Is preceptor aware of upcoming site evaluation?
14.	Other information important for your site visit e.g., parking?

On the day of the site visit, please print copies of Appendix E and Appendix G. Please have the paper forms available for backup. Samples of both forms are in the Preceptorship Handbook.

Acknowledgment of receipt



Acknowledgement of Receipt

I, _____, acknowledge that I have received and reviewed the FNP Student Preceptorship Handbook.

I am aware that these policies may be amended at any time and I will be notified of any changes in a timely manner. I will hold myself accountable for the new directives.

Furthermore, I am aware that it is my responsibility to adhere to these policies for the duration of the program.

Signature

Date

Appendices

The appendices are prepared by and filed in the Department of Nursing. Refer to those documents for a review of what is used to organize and implement the FNP preceptor experience at Holy Names University. The evaluations contained herein are strictly samples and are not meant for actual documentation of clinical experience.

Preview Form



Holy Names University
Family Nurse Practitioner

Subject:
Evaluator:
Site:
Period:
Dates of Course:
Course: N251A
Form: Appendix A - Evaluation by Preceptor 251A

Please evaluate the following competencies using this scale: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair/Improvement Needed; 1 = Inadequate.

CLINICAL KNOWLEDGE

Utilizing critical thinking and assessment skills, the student completes a health history and physical-psycho-social assessment and orders appropriate diagnostic tests

(Question 1 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Gathers appropriate health and illness history.	5.0	4.0	3.0	2.0	1.0	0
2. Does a focused physical examination appropriate to the purpose of the visit.	5.0	4.0	3.0	2.0	1.0	0
3. Develops logical differential diagnoses based on history of present illness and physical examination	5.0	4.0	3.0	2.0	1.0	0
4. Proposes appropriate strategies for plan of care	5.0	4.0	3.0	2.0	1.0	0
5. Evaluates results of therapeutic interventions	5.0	4.0	3.0	2.0	1.0	0
6. Student was well prepared.	5.0	4.0	3.0	2.0	1.0	0

Comments: *(Question 2 of 13 - Mandatory)*

EVIDENCE-BASED STANDARDS OF CARE

Utilizing standards of health promotion and preventative services, the student provides anticipatory guidance, counseling regarding wellness, and appropriate screening services while remaining cognizant of client age, development, risk, geographic location and culture.

(Question 3 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Identifies health maintenance needs appropriate to patients' age, sex, and health risks; and develops plans for selected health maintenance.	5.0	4.0	3.0	2.0	1.0	0
2. Includes psychosocial care and counseling when indicated.	5.0	4.0	3.0	2.0	1.0	0
3. Provides pertinent patient education regarding health promotion and disease prevention.	5.0	4.0	3.0	2.0	1.0	0
4. Evaluates and applies research pertinent to client care and outcomes.	5.0	4.0	3.0	2.0	1.0	0
5. Refers to clinical practice guidelines for health promotion and disease prevention.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 4 of 13 -Mandatory)

ROLE IDENTITY AND PROFESSIONAL RELATIONS

Student demonstrates professional comportment in communicating with staff, referring to research and guidelines when needed, dressed appropriately for the facility, and properly equipped for the clinical experience.

Utilizing therapeutic communication and family theory, the student establishes a caring and professional relationship with the client and family.

(Question 5 of 13 -Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate	NJA
1. Appropriate attire and equipment for clinical setting	5.0	4.0	3.0		2.0	1.0	0
2. Presents clients to preceptor in a clear, well-organized manner.	5.0	4.0	3.0		2.0	1.0	0
3. Develops effective relationships with patients, preceptors, staff and faculty.	5.0	4.0	3.0		2.0	1.0	0
4. Accepts responsibility and takes initiative for own learning.	5.0	4.0	3.0		2.0	1.0	0
5. Utilizes therapeutic techniques to elicit client and family's concerns.	5.0	4.0	3.0		2.0	1.0	0
6. Demonstrates appropriate level of empathy in communicating with clients and family.	5.0	4.0	3.0		2.0	1.0	0
7. Facilitates client decision making regarding plan of care.	5.0	4.0	3.0		2.0	1.0	0

Comments: (Question 6 of 13 -Mandatory)

USE OF TECHNOLOGY

Where electronic medical records (EMR) are available, student learns to use EMR to document patient health data and locate sections of medical records in order to provide continuity of care, reconciliation of medications, review of past medical history ordering of labs and imaging studies.

(Question 7 of 13 -Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate	NIA
1. Enters appropriate data into EMR	5.0	4.0	3.0		2.0	1.0	0
2. Checks entries for input errors	5.0	4.0	3.0		2.0	1.0	0
3. Knows where to locate past encounters, demographics, lists of chronic and episodic problems, and medication profile.	5.0	4.0	3.0		2.0	1.0	0
4. Uses appropriate communication media for patient advocacy and collaboration with healthcare team.	5.0	4.0	3.0		2.0	1.0	0

Comments: (Question 8 of 13 -Mandatory)

QUALITY AND SAFETY

Student demonstrates concern for patient safety and quality by reconciling medications to avoid adverse health outcomes, and identifies patient-centered and practice-centered barriers to safe medication management; provides effective patient education regarding drugs treatments, and devices.

(Question 9 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Reviews patients' medications per practice policy and updates patients' medical records.	5.0	4.0	3.0	2.0	1.0	0
2. Provides patients with list of medications.	5.0	4.0	3.0	2.0	1.0	0
3. Identifies barriers to patient-centered medication management	5.0	4.0	3.0	2.0	1.0	0
4. Recommends strategies to improve compliance with medication or treatment regimen.	5.0	4.0	3.0	2.0	1.0	0
5. Delivers appropriate patient education for drugs, treatments, and devices.	5.0	4.0	3.0	2.0	1.0	0
6. Promotes self-care to all clients, including those with disabilities.	5.0	4.0	3.0	2.0	1.0	0
7. Coaches patient and caregiver for positive behavioral changes.	5.0	4.0	3.0	2.0	1.0	0

Comments: *(Question 10 of 13 - Mandatory)*

(Question 11 of 13 - Mandatory , Confidential)

Preceptor Administrative Duties	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. How easy was it for you as preceptor to report required information about the student?	5.0	4.0	3.0	2.0	1.0	0

Feedback About Student- *(Question 12 of 13)*

Any feedback you would like the **MSN/FNP** Program to know about your student?

Program Feedback *(Question 13 of 13)*

Based on your observation of the student's clinical skills, what skills or topics should receive greater emphasis in the classroom?

Preview Form



**Holy Names University
Family Nurse Practitioner**

Subject:
Evaluator:
Site:
Period:
Dates of Course:
Course: N251B
Form: Appendix B- Evaluation by Preceptor 251B

Please evaluate the following competencies using this scale: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair/Improvement Needed; 1 = Inadequate.

CLINICAL KNOWLEDGE

Utilizing clinical knowledge, critical thinking, and assessment skills, the student will:

(Question 1 of 15 -Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Use a systematic approach to collect a complete or episodic history from physiological, psychological and social parameters pertinent to presenting acute and chronic problems and the client's developmental level.	5.0	4.0	3.0	2.0	1.0	0
2. Utilize techniques of physical diagnosis correctly, examining only those systems appropriate to the presenting complaint.	5.0	4.0	3.0	2.0	1.0	0
3. Accurately interpret physical findings and results of common diagnostic tests differentiating normal from abnormal.	5.0	4.0	3.0	2.0	1.0	0
4. Formulate appropriate differential diagnoses based on history and physical exam.	5.0	4.0	3.0	2.0	1.0	0
5. Be able to state the most probable diagnosis or diagnoses.	5.0	4.0	3.0	2.0	1.0	0
6. Presents appropriate justification for diagnostic and therapeutic interventions.	5.0	4.0	3.0	2.0	1.0	0
7. Student was well-prepared.	5.0	4.0	3.0	2.0	1.0	0

Comments: *(Question 2 of 15 - Mandatory)*

EVIDENCE-BASED PRACTICE

Utilizing standards of health promotion and preventative services, the student provides anticipatory guidance, counseling regarding wellness, and appropriate screening services while remaining cognizant of client age, development, risk, geographic location and culture.

(Question 3 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Identifies health maintenance needs appropriate to patients' age, sex, and health risks; and develops plans for selected health maintenance.	5.0	4.0	3.0	2.0	1.0	0
2. Includes psychosocial care and counseling when indicated.	5.0	4.0	3.0	2.0	1.0	0
3. Provides pertinent patient education regarding health promotion and disease prevention, including tertiary prevention.	5.0	4.0	3.0	2.0	1.0	0
4. Evaluates and applies research pertinent to client care and outcomes.	5.0	4.0	3.0	2.0	1.0	0
5. Refers to appropriate clinical practice guidelines for health promotion and disease prevention.	5.0	4.0	3.0	2.0	1.0	0
6. Identifies patients at risk and provides the appropriate education and referral for risk reduction.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 4 of 15 -Mandatory)

ROLE IDENTITY AND PROFESSIONAL RELATIONS

Student demonstrates professional comporment in communicating with staff, referring to research and guidelines when needed, dressed appropriately for the facility, and properly equipped for the clinical experience.

(Question 5 of 15 -Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate	N/A
1. Appropriate attire and equipment for clinical setting	5.0	4.0	3.0		2.0	1.0	0
2. Presents clients to preceptor in a clear, well-organized manner.	5.0	4.0	3.0		2.0	1.0	0
3. Interprets the Nurse Practitioner role to patients and other professionals	5.0	4.0	3.0		2.0	1.0	0

Comments: (Question 6 of 15 -Mandatory)

Utilizing therapeutic communications and family theory, the student establishes and caring professional relations with the client and family.

(Question 7 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate	N/A
1. Develops effective relationships with patients, preceptors, staff and faculty.	5.0	4.0	3.0		2.0	1.0	0
2. Accepts responsibility and takes initiative for learning.	5.0	4.0	3.0		2.0	1.0	0
3. Utilizes therapeutic techniques to elicit client and family's concerns.	5.0	4.0	3.0		2.0	1.0	0
4. Demonstrates appropriate level of empathy in communicating with clients and family.	5.0	4.0	3.0		2.0	1.0	0
5. Facilitates client decision making regarding plan of care.	5.0	4.0	3.0		2.0	1.0	0

Comments: (Question 8 of 15 - Mandatory)

USE OF TECHNOLOGY

Where electronic medical records (EMR) are available, student uses EMR to document patient health data and locate sections of medical records in order to provide continuity of care, reconciliation of medications, review of past medical history ordering of labs and imaging studies.

(Question 9 of 15 -Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Enters appropriate data into EMR	5.0	4.0	3.0	2.0	1.0	0
2. Checks entries for input errors	5.0	4.0	3.0	2.0	1.0	0
3. Knows where to locate past encounters, demographics, lists of chronic and episodic problems, and medication profile.	5.0	4.0	3.0	2.0	1.0	0
4. Takes initiative to develop proficient use of EMR.	5.0	4.0	3.0	2.0	1.0	0
5. Uses appropriate communication media to client advocacy and communication with healthcare team.	5.0	4.0	3.0	2.0	1.0	0
6. Critically assesses resources for maintaining clinical competence.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 10 of 15 - Mandatory)

QUALITY AND SAFETY

Student demonstrates concern for patient safety and quality by reconciling medications to avoid adverse health outcomes, and identifies patient-centered and practice-centered barriers to safe medication management; provides effective patient education regarding drugs treatments, and devices.

(Question 11 of 15 -Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Reviews patients' medications per practice policy and updates patients' medical records.	5.0	4.0	3.0	2.0	1.0	0
2. Appropriately selects drugs and devices for individual patients and families per approved protocol	5.0	4.0	3.0	2.0	1.0	0
3. Identifies barriers to patient-centered medication management.	5.0	4.0	3.0	2.0	1.0	0
4. Recommends strategies to improve compliance with medication or treatment regimen.	5.0	4.0	3.0	2.0	1.0	0
5. Selects drugs and devices with consideration for client's age, culture, motivation, and economic resources.	5.0	4.0	3.0	2.0	1.0	0
6. Delivers appropriate patient education and documentation for drugs, treatments, and devices.	5.0	4.0	3.0	2.0	1.0	0
7. Promotes self-care to all clients, including those with disabilities.	5.0	4.0	3.0	2.0	1.0	0
6. Coaches client and caregiver for positive behavioral changes.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 12 of 15 - Mandatory)

Preceptor Administrative Duties (Question 13 of 15 - Mandatory)

How easy was it for you as preceptor to report required information about the student?

N/A	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
0	5	4	3	2	1

Feedback About Student- (Question 14 of 15)

Any feedback you would like the MSN/FNP Program to know about your student?

Program Feedback (Question 15 of 15)

Based on your observation of the student's clinical skills, what skills or topics should receive greater emphasis in the classroom?

Preview Form



Holy Names University
Family Nurse Practitioner

Subject:
Evaluator:
Site:
Period:
Dates of Course:
Course: 252
Form: Appendix C - Evaluation by Preceptor 252

Please evaluate the following competencies using this scale: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair/Improvement Needed; 1 = Inadequate.

CLINICAL KNOWLEDGE

Utilizing clinical knowledge, critical thinking, and diagnostic skills, the student gathers and performs a focused history and physical examination, in order to develop a probable, possible and doubtful assessment/diagnosis.

The student proposes and presents justification for diagnostic and therapeutic interventions, including laboratory tests and medications, for both acute and stable chronic conditions.

(Question 1 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate	NIA
1. Uses a systematic approach to collect appropriate history from physiological, psychological, and social parameters pertinent to presenting problem.	5.0	4.0	3.0		2.0	1.0	0
2. Participates in the care of increasingly complex physical and mental illnesses.	5.0	4.0	3.0		2.0	1.0	0
3. Uses techniques of physical diagnosis correctly, examining only those systems appropriate to the presenting complaint.	5.0	4.0	3.0		2.0	1.0	0
4. Selects appropriate diagnostic tests to gather relevant data to evaluate illness/wellness.	5.0	4.0	3.0		2.0	1.0	0
5. Formulates appropriate differential diagnoses based on history and physical exam.	5.0	4.0	3.0		2.0	1.0	0
6. Is able to state the most probable diagnosis or diagnoses.	5.0	4.0	3.0		2.0	1.0	0
7. Recognizes emergency situations and initiates appropriate emergency care.	5.0	4.0	3.0		2.0	1.0	0
8. Provides on-going re-evaluation and management of health status over time to minimize the development of complications	5.0	4.0	3.0		2.0	1.0	0
9. Initiates effective care for minor injuries.	5.0	4.0	3.0		2.0	1.0	0
10. Student was well-prepared.	5.0	4.0	3.0		2.0	1.0	0

Comments: *(Question 2 of 15 - Mandatory)*

EVIDENCE-BASED PATIENT CARE

Utilizing standards of health promotion and preventative services, the student provides anticipatory guidance, counseling regarding wellness, and appropriate screening services while remaining cognizant of client age, development, risk, geographic location and culture.

(Question 3 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Identifies health maintenance needs appropriate to patients' age, sex, and health risks; and develops plans for selected health maintenance.	5.0	4.0	3.0	2.0	1.0	0
2. Includes psychosocial care and counseling when indicated.	5.0	4.0	3.0	2.0	1.0	0
3. Provides pertinent patient education regarding health promotion and disease prevention.	5.0	4.0	3.0	2.0	1.0	0
4. Evaluates and applies research pertinent to client care and outcomes.	5.0	4.0	3.0	2.0	1.0	0
5. Refers to appropriate clinical practice guidelines for health promotion and disease prevention.	5.0	4.0	3.0	2.0	1.0	0
6. Refers to standards of care to plan and evaluate care for episodic illnesses, minor injuries, and chronic conditions.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 4 of 15 - Mandatory)

ROLE IDENTITY AND PROFESSIONAL RELATIONS

The student collaborates and/or consults with other members of the health care team (beyond the individual preceptor) about variations in outcomes and need for specialty evaluation and treatment.

Student demonstrates professional comportment in communicating with staff, referring to research and guidelines when needed, dressed appropriately for the facility, and properly equipped for the clinical experience..

(Question 5 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Introduces self to patient and takes responsibility for the interview and presentation of diagnosis in all but the most complex situations.	5.0	4.0	3.0	2.0	1.0	0
2. Presents cases to preceptor in a clear, concise manner including diagnosis and proposed management.	5.0	4.0	3.0	2.0	1.0	0
3. Promotes therapeutic relationships with patients, and families.	5.0	4.0	3.0	2.0	1.0	0
4. Acts as an advocate for client needs.	5.0	4.0	3.0	2.0	1.0	0
5. Accepts responsibility and takes initiative for teaming.	5.0	4.0	3.0	2.0	1.0	0
6. Makes referrals to appropriate providers and specialists.	5.0	4.0	3.0	2.0	1.0	0
7. Provides appropriate patient data with referrals.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 6 of 15 - Mandatory)

DATABASE DEVELOPMENT AND USE

The student identifies mechanisms to update the knowledge base and clinical competencies.

(Question 7 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Collects data for comprehensive health history	5.0	4.0	3.0	2.0	1.0	0
2. Updates problem list for chronic diseases and episodic illnesses for each patient	5.0	4.0	3.0	2.0	1.0	0
3. Analyzes trends inpatient outcomes	5.0	4.0	3.0	2.0	1.0	0
4. Uses information literacy in complex decision making.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 8 of 15 - Mandatory)

USE OF TECHNOLOGY

Where electronic medical records (EMR) are available, student learns to use EMR to document patient health data and locate sections of medical records in order to provide continuity of care, reconciliation of medications, review of past medical history ordering of labs and imaging studies.

(Question 9 of 15 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Enters appropriate data into EMR	5.0	4.0	3.0	2.0	1.0	0
2. Checks entries for input errors	5.0	4.0	3.0	2.0	1.0	0
3. Knows where to locate past encounters, demographics, lists of chronic and episodic problems, and medication profile.	5.0	4.0	3.0	2.0	1.0	0
4. Takes initiative to develop proficient use of EMR.	5.0	4.0	3.0	2.0	1.0	0
5. Uses appropriate communication media to advocate for clients and to communicate with healthcare team.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 10 of 15 - Mandatory)

QUALITY AND SAFETY

Student demonstrates concern for patient safety and quality by reconciling medications to avoid adverse health outcomes, and identifies patient-centered and practice-centered barriers to safe medication management; provides effective patient education regarding drugs treatments, and devices.

(Question 11 of 15 -Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Reviews patients' medications per practice policy and updates patients' medical records.	5.0	4.0	3.0	2.0	1.0	0
2. Appropriately selects drugs and devices for individual patients and families per approved protocol	5.0	4.0	3.0	2.0	1.0	0
3. Identifies barriers to patient-centered medication management.	5.0	4.0	3.0	2.0	1.0	0
4. Recommends strategies to improve compliance with medication or treatment regimen.	5.0	4.0	3.0	2.0	1.0	0
5. Delivers appropriate patient education for drugs, treatments, and devices.	5.0	4.0	3.0	2.0	1.0	0

Comments: (Question 12 of 15 -Mandatory)

Preceptor Administrative Duties (Question 13 of 15 - Mandatory)

How easy was it for you as preceptor to report required information about the student?

N/A	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
0	5	4	3	2	1

Feedback About Student- (Question 14 of 15)

Any feedback you would like the MSN/FNP Program to know about your student?

Program Feedback (Question 15 of 15)

Based on your observation of the student's clinical skills, what skills or topics should receive greater emphasis in the classroom?



Preview Form

Holy Names University
Family Nurse Practitioner

Subject
Evaluator:
Site:
Period:
Dates of Course:
Course: 253
Form: Appendoc O. Evaluat.an by Prece253

Please evaluate the following competencies. Use this scale to make your judgments. 5::Excellent; 4 = Very Good; 3=Good; 2=Fair/Improvement Needed; 1 =Inadequate.

CUNICAL KNOWLEDGE AND EVIDENCE BASED CARE

The student assesses, diagnoses, monitors, coordinates and manages the health/illness status of clients over time.

The student evaluates the results of interventions using accepted outcome criteria, revises the plan accordingly, and consults/refers when needed.

The student employs diagnostic and therapeutic interventions and regimens with attention to safety, cost, invasiveness, simplicity, acceptability and efficacy.

(Question 1 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Records the subjective and objective data, and records the assessment and logical inferences, and formulates a differential diagnosis and formulates a plan of care for the patient.	5.0	4.0	3.0	2.0	1.0	
2. Addresses all medical, social, and cultural needs as well as the patient's learning needs. The student identifies and manages of patients with	5.0	4.0	3.0	2.0	1.0	
3. <ul style="list-style-type: none"> • i. Common acute illnesses or injuries. • ii. family planning/pre/postnatal needs • iii. Pediatric care 	5.0	4.0	3.0	2.0	1.0	
4. Identifies and manages of patients with postnatal needs.	5.0	4.0	3.0	2.0	1.0	
5. Participates in the care of complex patient problems, prioritizing and determining the most appropriate interventions.	5.0	4.0	3.0	2.0	1.0	
6. Implements diagnostic and therapeutic interventions and regimens with attention to safety, cost, invasiveness, simplicity, and efficacy.	5.0	4.0	3.0	2.0	1.0	
7. Provides ongoing evaluation, non-pharmacological management of health status over time.	5.0	4.0	3.0	2.0	1.0	
8. Sets appropriate health care goals for the patient, and monitors the patient's progress toward achieving these goals.	5.0	4.0	3.0	2.0	1.0	
9. Identifies	5.0	4.0	3.0	2.0	1.0	

Comments: (Question 2 of 13 - Mandatory)

ROLE IDENTITY AND PROFESSIONAL RELATIONS

The student collaborates and consults with other members of the health care team (beyond the individual preceptor) about variations in outcomes and need for specialty evaluation and treatment. Student demonstrates professional comportment in communicating with patients and staff, refers to research and guidelines when needed, dresses appropriately for the facility, and is properly equipped for the clinical experience.

The student interprets their own professional strengths, role and scope of ability to peers, clients, and colleagues assuming accountability for practice.

(Question 3 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Identifies and discusses the most complex situations.	5.0	4.0	3.0	2.0	1.0	0
2. Promotes the professional relationships with patients, staff, and other healthcare providers.	5.0	4.0	3.0	2.0	1.0	
3. Promotes the professional relationships with patients, staff, and other healthcare providers.	5.0	4.0	3.0	2.0	1.0	
4. Acts as an advocate for the patient.	5.0	4.0	3.0	2.0	1.0	
5. Accepts responsibility and accountability.	5.0	4.0	3.0	2.0	1.0	
6. Uses professional organizations and theoretical frameworks to inform practice.	5.0	4.0	3.0	2.0	1.0	
7. Coordinates the patient's care with other healthcare providers.	5.0	4.0	3.0	2.0	1.0	
8. Provides appropriate patient data with reference.	5.0	4.0	3.0	2.0	1.0	
9. Consults with other healthcare providers and patients.	5.0	4.0	3.0	2.0	1.0	

Comments: (Question 4 of 13 - Mandatory)

DATABASE DEVELOPMENT AND USE

The student identifies mechanisms to update the knowledge base and clinical competencies.

(Question 5 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Evaluate use of CQI for quality improvement	5.0	4.0	3.0	2.0	1.0	
2. Analyze trends in patient outcomes	5.0	4.0	3.0	2.0	1.0	

Comments: (Question 6 of 13 - Mandatory 1)

USE OF TECHNOLOGY

Where electronic medical records (EMR) are available, student teams to use EMR to document patient health data and locate sections of medical records in order to provide continuity of care, reconciliation of medications, review of past medical history, ordering of labs and imaging studies.

(Question 7 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Checks entries for input errors	5.0	4.0	3.0	2.0	1.0	
2. Knows when to develop proficient use of EMR	5.0	4.0	3.0	2.0	1.0	
3. Utilize appropriate technology	5.0	4.0	3.0	2.0	1.0	

Comments: (Question 8 of 13 - Mandatory 1)

QUALITY AND SAFETY

Student demonstrates concern for patient safety and quality by reconciling medications to avoid adverse health outcomes, and identifies patient-centered and practice-centered barriers to safe medication management; provides effective patient education regarding drug treatments, and devices.

(Question 9 of 13 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate	N/A
1. Recommends strategies to improve adherence with medication or treatment regimen	5.0	4.0	3.0	2.0	1.0	
2. Delivers appropriate patient education for drugs, treatments, and devices	5.0	4.0	3.0	2.0	1.0	

Comments: (Question 10 of 13 - Mandatory)

Preceptor Administrative Duties (Question 11 of 13 Mandatory)

How easy was it for you as preceptor to report required information about the student?

N/A	Excellent	Good	Fair/Improvement Needed	Inadequate
0	5		2	1

Feedback about Student (Question 12 of 13)

Any feedback you would like the MSNIFNP Program to know about your student?

Preview Form



**Holy Names University
Family Nurse Practitioner**

Subject:
Evaluator:
Site:
Period:
Dates of Course:
Course: N251A
Form: Appendix E - Evaluation by Site Evaluator

5 = Excellent; 4 = Very Good; 3 = Good; 2 = Fair; 1 = Inadequate/Needs Improvement

(Question 1 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Professionalism	5.0	4.0	3.0	2.0	1.0

(Question 2 of 31 - Mandatory)

Professionalism - Check Skill if Observed:	No	Yes
1 Attire appropriate to clinical setting	1.0	2.0
2 Well-groomed	1.0	2.0
3 Wearing name tag to identify self as FNP student	1.0	2.0
4 Stethoscope, writing instrument, and other necessary equipment	1.0	2.0
5 Clinic reference materials provided by student	1.0	2.0
6 Identifies location of and can access Standardized Procedures.	1.0	2.0

Professionalism - Comments: *(Question 3 of 31 - Mandatory)*

(Question 4 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Communication Skills	5.0	4.0	3.0	2.0	1.0

(Question 5 of 31 - Mandatory)

Communication Skills -Check If Observed:		No	Yes
1	Introduces and defines self as FNP student/resident	1.0	2.0
2	Determines how client wishes to be addressed	1.0	2.0
3	Initial time putting client at ease	1.0	2.0
4	Eye contact	1.0	2.0
5	Open-ended questioning	1.0	2.0
6	Directive questioning	1.0	2.0
7	Non-directive facilitation of stated feelings	1.0	2.0
8	Repetition/clarification of stated feelings/history	1.0	2.0
9	Support of expressed feelings	1.0	2.0
10	Use of silence	1.0	2.0
11	Summary of stated history	1.0	2.0
12	Closing comments	1.0	2.0
13	Termination of the encounter	1.0	2.0

Communication - Comments: (Question 6 of 31 -Mandatory)

(Question 7 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. History Taking Skills	5.0	4.0	3.0	2.0	1.0

(Question 8 of 31 - Mandatory)

Reason for Contact/Present Illness - Descriptors:		No	Yes
1	Chief Complaint in client's own words:	1.0	2.0
2	Last time feeling well	1.0	2.0
3	General Health	1.0	2.0
4	Onset	1.0	2.0
5	Character	1.0	2.0
6	Location	1.0	2.0
7	Radiation	1.0	2.0
8	Duration	1.0	2.0
9	Frequency	1.0	2.0
10	Time of day occurring	1.0	2.0
11	Severity/disability	1.0	2.0
12	Progression	1.0	2.0
13	Changes in character	1.0	2.0
14	Associated phenomena	1.0	2.0
15	Prior history of same	1.0	2.0
16	Contact with others with same	1.0	2.0
17	Prior Treatment	1.0	2.0
18	Medication	1.0	2.0

(Question 9 of 31 - Mandatory)

ROS,PMH, FH,Concerns:	No	Yes
1 Pertinent ROS (complete perc/c)	1.0	2.0
2 Systems Addressed: Pertinent PMH	1.0	2.0
3 Systems addressed: Pertinent FH	1.0	2.0
4 Client's perception	1.0	2.0

History Taking - Skills Systems Addressed and Comments:
(Question 10 of 31 - Mandatory)

(Question 11 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate
1. Physical Exam Skills	5.0	4.0	3.0		2.0	1.0

(Question 12 of 31 - Mandatory)

Physical Exam Skills - Check Skill if Observed:	No	Yes
1 Complete per c/c	1.0	2.0
2 Organized	1.0	2.0
3 Good Technique	1.0	2.0

List systems examined and Comments: (Question 13 of 31 - Mandatory)

(Question 14 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair	Improvement Needed	Inadequate
1. Assessment Skills	5.0	4.0	3.0		2.0	1.0

(Question 15 of 31 - Mandatory)

Assessment Skills • Check Skill if Observed	No	Yes
1 Appropriate to history and physical findings	1.0	2.0
2 Separation of relevant problems	1.0	2.0
3 Complete problem list	1.0	2.0

Assessment Skills - Comments: (Question 16 of 31 - Mandatory)



(Question 17 of 31 -Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Plan & Management Skills	5.0	4.0	3.0	2.0	1.0

(Question 18 of 31 - Mandatory)

Plan & Management Skills -Check Skill if Observed	No	Yes
1. Appropriate plan for assessment	1.0	2.0
2. Adequate rationale	1.0	2.0
3. Diagnostic studies (Ox)	1.0	2.0
4. Treatment complete (Rx)	1.0	2.0
5. Client/family education (Pt.Ed.)	1.0	2.0
6. Plan for follow-up (FIU)	1.0	2.0

Plan & Management Skills-Comments: (Question 19 of 31 -Mandatory)

(Question 20 of 31)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Health Promotion and Disease Prevention Services	5.0	4.0	3.0	2.0	1.0

(Question 21 of 31 - Mandatory)

Health Promotion and Disease Prevention	No	Yes
1. Identifies health maintenance needs.	1.0	2.0
2. Appropriate screening for client's age, developmental stage, health risks, geographic location, and culture.	1.0	2.0
3. Anticipatory guidance related to client's health status and plan of care.	1.0	2.0
4. Wellness coaching appropriate for client's health status, motivation, literacy, and learning style.	1.0	2.0
5. Includes psychosocial care and counseling in plan of care when indicated.	1.0	2.0

Health Promotion and Disease Prevention-Comments: (Question 22 of 31 - Mandatory)

(Question 23 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Oral Presentation Skills	5.0	4.0	3.0	2.0	1.0

(Question 24 of 31 - Mandatory)

Oral Presentation Skills- Check Skill if Observed	No	Yes
1 Presents client profile	1.0	2.0
2 Accurate	1.0	2.0
3 Complete/major areas from problem list	1.0	2.0
4 Separate problems in problem list	1.0	2.0

Oral Presentation Skills - Comments: (Question 25 of 31 - Mandatory)

(Question 26 of 31 - Mandatory)

	Excellent	Very Good	Good	Fair/Improvement Needed	Inadequate
1. Record Keeping Skills	5.0	4.0	3.0	2.0	1.0

(Question 27 of 31 - Mandatory)

Record Keeping Skills - Check skill if observed	No	Yes
1 Presents client profile	1.0	2.0
2 SOAP format	1.0	2.0
3 Clear, logically organized	1.0	2.0
4 All pertinent positives & negatives	1.0	2.0
5 Separation of problems	1.0	2.0

Record Keeping Skills - Comments: (Question 28 of 31 - Mandatory)

Students are expected to score 3 or better in each category by the end of the semester.

Faculty Summary: (Question 29 of 31 - Mandatory)

Areas to work on: (Question 30 of 31 - Mandatory)



Did the student Pass or Fail? (Question 31 of 31 -Mandatory)

Fail

Pass

2

Preview Form



Holy Names University Family Nurse Practitioner

Subject:
 Evaluator:
 Site:
 Period:
 Dates of Course:
 Course: N251A
 Form: Appendix F - Student Evaluates Preceptor

Rate the performance of the Preceptor by circling 5 to 1, with 5 being the highest level of performance. **Mark N** if you have not observed this aspect of the preceptor's performance. Rate how valuable the preceptor was in helping you.

(Question 1 of 3 - Mandatory)

Course Goals	N	5	4	3	2	1
1. I was familiarized with the organization and philosophy by the preceptor	0	5.0	4.0	3.0	2.0	1.0
2. I was oriented to agency's policies and procedures by the preceptor	0	5.0	4.0	3.0	2.0	1.0
3. My clinical experience was coordinated by the preceptor	0	5.0	4.0	3.0	2.0	1.0
4. Goals for the experience were mutually reviewed so that they related to the course objectives	0	5.0	4.0	3.0	2.0	1.0
5. The preceptor and I planned learning activities that met the OOU's objectives	0	5.0	4.0	3.0	2.0	1.0
6. Preceptor provided feedback to me and the faculty regarding my performance toward achieving clinical course objectives	0	5.0	4.0	3.0	2.0	1.0
7. Preceptor increased my growth by acting as a role model	0	5.0	4.0	3.0	2.0	1.0

(Question 2 of 3 - Mandatory)

Communication Goals	N	5	4	3	2	1
1. The preceptor used appropriate interpersonal skills to establish professional but personable relationships	0	5.0	4.0	3.0	2.0	1.0
2. The preceptor demonstrated willingness to assist me	0	5.0	4.0	3.0	2.0	1.0
3. The preceptor demonstrated an understanding and sensitivity to my learning needs.	0	5.0	4.0	3.0	2.0	1.0
4. The preceptor utilized and communicated with other healthcare administrative and management.	0	5.0	4.0	3.0	2.0	1.0

Comments: (Question 3 of 3 - Mandatory)

Preview Form



Holy Names University Family Nurse Practitioner

Subject:
Evaluator:
Site:
Period:
Dates of Course:
Course: N251A
Form: Appendix G- Evaluation of Site

Please mark 'yes' or 'no' after each statement regarding the site. Space is provided at the bottom of the first section for additional comments.

(Question 1 of 7 - Mandatory)

	Yes	No
1 Is adequate space provided?	2.0	1.0
2 Is adequate time given to see clients?	2.0	1.0
3 Are there sufficient numbers of clients?	2.0	1.0
4 Are the types of clients varied as to age, type of problem, etc.?	2.0	1.0
5 Are students allowed to select clients according to their needs?	2.0	1.0
6 Are students given the opportunity to follow-up with clients and/or problems of interest?	2.0	1.0
7 Are reports from lab and x-ray accessible to student?	2.0	1.0
8 Is support staff appropriately helpful to student?	2.0	1.0
9 Is support staff accepting of student's role?	2.0	1.0
10 Are instructional materials available for clients to supplement their learning (e.g. pamphlets, outside class opportunities, etc.)?	2.0	1.0
11 Are community resources, other agencies, and professional disciplines involved with client care?	2.0	1.0

On average how many patients do you see independently on a daily basis? *(Question 2 of 7 - Mandatory)*

Enter a number:

Is the philosophy of the clinic to provide health promotion and disease prevention? Or disease diagnosis and management? Or both?
(Question 3 of 7)



General Comments

List ways this agency/individual provides good clinical experience for students: *(Question 4 of 7 - Mandatory)*

List areas in which this agency/individual needs improvement in order to provide optimal student learning. (Question 5 of 7)

(Question 6 of 7 - Mandatory)

	Yes	No
1 Do you recommend this agency/individual for other students?	2.0	1.0

Why or why not? (Question 7 of 7 - Mandatory)

Adapted from Advanced Practice Nursing: Curriculum Guidelines and Program Standards for Nurse Practitioner Education (NONPF, 1995)