

PRECEPTOR ORIENTATION HANDBOOK

Transition to Professional Nursing

NRSG 419



**University of Nebraska
College of Nursing**

Welcome!

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Preceptor Handbook for Nursing 419 “Transition to Professional Nursing”

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Introduction

Preceptor Orientation Handbook

You should have received, or will shortly receive an email from the College of Nursing with contact information for your student assignment. Within the same email will be a link to the Preceptor Credential Form. This form is vital documentation for our records for the Nebraska State Board, please complete it as directed as soon as possible. **All** preceptors need to complete OR update this form each year.

A 419 Preceptor Orientation Handbook has been prepared for your use during the Transition to Professional Nursing course. Please be sure to read the contents for all relevant information regarding the course and any new updates. Most of the commonly asked questions and situations of this course are presented in the Handbook. For any other questions and/or concerns, feel free to contact the Faculty Resource.

When you have completed reading the Handbook, please click on the link under “Handbook Confirmation” found on page 12.

To: NU 419 Preceptors
From: NU 419 Faculty

The Faculty and students of the University of Nebraska College of Nursing are grateful for your willingness to help in the education of our senior students. Working beside you, sharing your expertise and sensing your commitment to excellent patient care and to Nursing will help the student make the transition into the role of the beginning nurse. Many sincere thanks.

Course Description

This course is a clinical practicum which provides the student an opportunity to assume the role of a beginning professional nurse under the direct guidance of an experienced registered nurse preceptor in a health care setting. The student will integrate previously acquired knowledge while caring for a small group of patients, gaining organizational and time management skills, allowing for improved self-confidence.

Credit Allocation

- 4 Credits (4 clinical, 180 hours of clinical practice to be completed during a five (5) week session of Level 4 in which the prerequisite courses are completed).
- The 180-hour requirement includes 4 hours of required classroom activity, and 176 clinical practice hours. Regular meal time or breaks are not to be included as practice hours.

Student Obligation to Provide Care

All students are obligated to provide care to assigned clients regardless of race, creed, or religion.

Any student with health concerns, religious beliefs or moral convictions that proscribe their participation in a health care activity must inform the faculty resource person no later than clinical orientation to the course, or as soon as the information becomes available.

The faculty member shall make the final decision about assignment of care; taking into consideration the student’s expressed concern.

Confidentiality

The University of Nebraska Medical Center College of Nursing adheres to HIPAA guidelines. Please go to <https://wiki.unmc.edu/index.php/Privacy/Confidentiality#:~:text=and%20proprietary%20information.,Procedures,release%20of%20the%20original%20record> for more detailed information on the UNMC Privacy, Confidentiality and Information Security Policy #6045.

Course Objectives/Competencies

- Continue pursuit of unfamiliar/advanced knowledge, skills, and beliefs deemed necessary for nursing practice by using a formalized contract to plan, implement, evaluate, and document learning experiences.
- Demonstrate knowledge, critical decision making and competencies deemed necessary for safe nursing practice at the beginning professional nurse level.
- Demonstrate self-reliance in providing and coordinating health care for clients in a selected setting.
- Demonstrate the roles of provider of health care, coordinator of health care, and member of the health care Profession.
- Accept the rights and responsibilities of a professional nurse.
- Demonstrate legal and ethical accountability for nursing actions and associated outcomes which reflect respect for client diversity.
- Use practicum experience to compare personal acculturation and role transition.
- Incorporate findings from research into nursing care.
- Participate as a member of the interdisciplinary team to foster continuity of care for the promotion, restoration, and protection of clients' health.
- Evaluate factors which promote or inhibit the provision of client specific, cost effective, quality care in the assigned setting.
- Use verbal, written, and technological modalities to communicate effectively.
- Course Outline
- Students may be required to attend an orientation, focus group, and final seminar.
- These activities may be scheduled during a student's scheduled clinical time with the preceptor. We ask that the preceptor excuse the student for the few hours they need to attend these classroom activities.

Evaluation

- This is a pass/fail course. Faculty will base their evaluation on student accomplishment of the course objectives/competencies and fulfillment of the number of clinical hours.
- Preceptor verbal and written feedbacks are very important in the evaluation process.
- Faculty will contact preceptors for verbal feedback.
- Preceptors need to complete an evaluation form weekly for the assigned student as directed later in this handbook.
- Preceptors may contribute to the evaluation and revision of this course by completing a "Preceptor Evaluation of Experience" form as directed later in this handbook.

Legal Responsibilities

- The question of who is responsible for nursing students' practice is often asked, particularly by nurses who are potential preceptors. The question most commonly asked is "Will the students be practicing on my license?" Many nurses assume that nursing students have to practice on or under the license of a nurse who is already licensed because the students have not taken the NCLEX examination or received their license to practice. Under Nebraska law, nursing students are authorized to practice nursing while they are enrolled in a school of nursing which has been approved by the Nebraska State Board of Nursing. Nursing students do not practice on or under another nurse's license; they are accountable for **their own** actions.

- Because a faculty member is not present in the agency when the student is practicing, the question which often arises is, "Who is liable and accountable for the student's actions or lack of action? "
- The legal principle of duty is used by the courts to determine whether a person has a responsibility or has acted in an appropriate manner in a given situation.
- A person's duty is determined by asking how would a reasonable and prudent nursing student, Nursing faculty member, or nursing preceptor have acted in a same or like situation.
- To date, courts in the United State have maintained the precedents established in case law which hold nursing students accountable for all nursing content which they have been taught.
- Additionally, student nurses have a duty to inform the person who is supervising them if they feel unprepared to assume the responsibilities to which they have been assigned. The person who bears the primary responsibility for the actions or lack of action of a student nurse is the student nurse.
- The preceptor has primary responsibility for the clients of the agency; however, the student shares the preceptor's work load.
- Jointly, the student and the preceptor determine how much independence the student has in accomplishing the preceptor's assigned work load.
- The **preceptor** has a duty to supervise the student. The duty to supervise is based on the same principles as when the nurse is supervising the actions of other nursing personnel for whom they have responsibility.

Role of the Preceptor

FACILITATOR /COACH

- Meet with the student prior to clinical experience to review the clinical evaluation tool and course expectations.
- Facilitate the students working with, gathering information from and observing people in the organization.
- Direct the student to opportunities for meaningful learning experiences that contribute to meeting the course outcomes (critical clinical behaviors).
- Meet with student to discuss the daily plan and evaluate specific experiences according to their clinical goals.
- Provide ongoing direction and feedback to the student about abilities and competencies related to student performance of provider, coordinator, and collaborator roles.
- Assist student to develop, plan, and evaluate specific experiences.
- Select jointly, with the student, experiences that facilitate observations of excellent nursing practice by self or other staff members.
- Discuss your perceptions of the nursing role in the specific setting.
- Evaluate with the student his/her observations within the agency.

LIAISON BETWEEN FACULTY AND STUDENT

- The preceptor needs to inform the faculty resource person of concerns or issues pertinent to the student's experience. Contact information will be provided to you later.

FAQs About Preceptor Role

SCHEDULING

The student is expected to work the same schedule as the preceptor.

Q: Does the student need to work a certain number of shifts?

A. They need to complete the 180 hours in the 5 weeks of their assigned time. This can be accomplished by 3-12 hr. shifts per week, plus various classroom requirements.

Q: My student wants to start earlier than is officially scheduled. Is this allowed?

A. No. Students must have successfully completed all other courses prior to beginning NRSG 419

Q: What should I do if I'm sick or get staff reduced and the student is scheduled to work with me?

A: Ask the Lead Nurse to arrange for another nurse to serve as a preceptor for the day so the student can meet the required number of clinical hours for the course.

Q: What should I do if I am "floated" to another floor and the student is scheduled to work with me?

A: The student may either "float" with you or remain on the assigned unit and work with another nurse for the day.

Q: If I'm "on call" should the student be "on call" also?

A: You may negotiate this with the student.

Q: What should I do if I take vacation days while I'm serving as a preceptor?

A: It is very important to have continuity for the student during this period of transition to professional nursing. It is preferable to have only one other nurse as a preceptor during the student's experience. If you are taking only a few days off, the Lead Nurse could assign another RN to serve as a preceptor. The same applies if you call in ill, but the student has arrived for duty.

Q: If the student is absent on a scheduled day what should I do?

A: The student is expected to notify the unit of their absence appropriately. The student is responsible to schedule and make-up the time before the end of the course.

If the student has a prolonged absence that student should contact their Faculty Resource person and the Course Coordinator to determine appropriate actions.

Q: Is the student required to work holidays (e.g., Thanksgiving) if I'm scheduled to work?

A: The student has the option to take the day off AS LONG as the required hours will be completed on time, and course objectives are being met.

Q: Am I responsible for keeping track of the number of hours the student is with me?

A: The student is responsible for completing the Clinical Hours Log.

Q: If I have a clinically related committee meeting may the student accompany me? Can attendance be counted towards the student's clinical hours?

A: If the student is welcome in your meeting this would be an excellent learning opportunity and may count towards the student's clinical hours. However, if the meeting is an all-day affair (e.g., retreat or all day continuing education) then it is best that the student stay on the clinical unit. (Usually less than 6 hours is acceptable)

NURSING CARE

Q: How much independent care should I allow the student to do?

A: This really depends on the acuity in your unit and the comfort level of the student and preceptor. Most preceptors prefer to work alongside the student until they have made an evaluation of the student's abilities. It is important to remember, that students may not have had the opportunity to do some procedures, or to do them repeatedly. They will need your guidance. Once you are comfortable, then the amount of independence is at your discretion. The student should ask questions when they arise or are unsure of themselves. Students should follow policies and procedures of the institution. Further information is available in the "Student Role" section of this handbook.

EVALUATIONS

Q: Where do I get an evaluation form?

A. At present the electronic version is not in use, so please print off a copy from the email link, or the student can access the form in Canvas and print it off for you. Use the Evaluation form to document and discuss your observations with the student weekly. You should discuss areas of satisfactory performance as well as areas needing continued work. This input is very valuable for the student's continued growth. After the final week of clinical the form should be given to the resource faculty.

Q: If my student has worked with other nurses do they need to complete an evaluation too?

A. If two nurses have worked with the student and are in agreement about the progress, they may write a joint statement and co-sign it. If there are specific comments either nurse wishes to make, each may make a separate comment in the "Comment" area and sign for the date they are addressing. The nurse who is assigned as preceptor, or covering the majority of the weekly hours is responsible for the weekly entry.

Q: When do I complete the evaluation?

A. Please record your evaluation on a **weekly** basis. Faculty and preceptor will decide on a method of communication that works best for the preceptor (phone call, text, email) to communicate student progress. Since this is the last course in the curriculum, and graduation is dependent on successful completion of NRS 419, it is imperative that the evaluation be completed as soon as the student has finished all of the clinical hours.

Q: How do I fill out the evaluation form?

A. Review the critical behaviors on the evaluation form and the possible strategies that could be used to attain the outcomes. Students need to demonstrate accomplishment of the critical behaviors (course outcomes) to successfully complete the course. Possible items that can be used in

evaluating attainment of these behaviors are noted in the third column. Preceptors may not be able to evaluate some items, such as computerized adaptive testing, log entries etc. since faculty will be responsible for these areas. The preceptor then needs to use the “key” (ex. “S” for Satisfactory or “U” for Unsatisfactory) to record in the last column of the evaluation tool. Please feel free to add any comments. We ask that you provide specific examples when recording for any unsatisfactory ratings. Please correspond with the resource faculty for questions or concerns.

Q: How can I provide feedback about my experience as a preceptor and make any suggestions about the course?

A. At the completion of the course, you will be sent via email the *Preceptor Evaluation of the Experience Form* to be completed online. Your feedback is very important. The form consists of several questions; please feel free to make additional comments.

Q: How do I get the completed evaluation and preceptor evaluation of experience forms to faculty?

A. All documentation will be completed online and will be sent to the appropriate personnel.

CONTACT INFORMATION

Q: Who do I call if I have questions or concerns about the course?

A. You are encouraged to contact the Faculty Resource person as soon as you detect ANY concern. There will be contact information in the email you receive. If you have urgent matters and the faculty resource is unavailable, the course coordinators for each campus are listed below.

- Kearney: Katie Messner, MSN, APRN-NP, FNP-BC, AGACNP-BC, Kearney Division, Room 142, Telephone: 308-865-1137, E-mail: katie.messner@unmc.edu
- Lincoln: Katie Wertz MSN, RN, Room: UHCN Suite 317 Telephone: 402-202-3709, Email: kwertz@unmc.edu
- Norfolk: Anne Wilber, MSN, APRN-CNS, PHCNS-BC, Northern Division, Room 289 , Telephone: 402-649-3285, E-mail: anne.wilber@unmc.edu
- Omaha: Brittany Schlueter, MSN, RN Room CON 4070, Telephone: 402-559-6552, E-mail: brittany.schlueter@unmc.edu
- Scottsbluff: Mat Burton, MSN, APRN, FNP-C, CDCES, West Nebraska Division, Telephone: 308-632-0435, Email: mathew.burton@unmc.edu

Student Role

STUDENT CHARACTERISTICS

- The student is enrolled in the last semester of their senior year and is in a transition, moving from student to beginning practitioner.
- The primary focus of this learning experience is to provide the student an opportunity to assume the role of a beginning professional nurse. Students will be concerned with their patient care skills (e.g. starting IV's)

STUDENTS RESPONSIBILITIES

The student participating in the clinical experience will assume several different roles and responsibilities, remaining at all times accountable for his or her own actions. Three broad areas of responsibility warrant mention.

- The student is a representative of UNMC and the College of Nursing, and as such shall be responsible for adhering to all applicable University, College and Division policies and regulations.
- The student is, for the duration of the affiliation, also a representative of the clinical facility to which they are assigned and shall be responsible for adhering to all applicable policies and regulations of that facility.
- The student is also a representative of the healthcare community and the nursing profession, and as such shall be expected to demonstrate concomitant attitudes and behaviors, abiding by the American Nurses Association Code of Ethics.

STUDENTS ARE EXPECTED TO:

- Attend required classroom activities.
- Complete documentation as scheduled.
- Provide the faculty resource person with their clinical schedule.
- Maintain communication with the faculty resource person.
- Identify learning needs/experiences.
- Review the clinical objectives/competencies with the preceptor.
- Regularly evaluate progression towards the clinical objectives/competencies with the preceptor.
- Follow the dress code of the CON unless otherwise directed by faculty or the preceptor (e.g., Labor and Delivery may require wearing the scrubs provided by the hospital).
- Wear UNMC/CON identification which clearly identifies student nurse status.
- Arrive on time to clinical experiences.
- Notify the preceptor if unable to attend clinical.
- **Seek guidance from the preceptor and act in accordance with preceptor instruction.**
- Provide safe care following policies and procedures of the institution.
- Demonstrate self-direction seeking learning opportunities.

STUDENTS RESPONSIBILITIES WITH MEDICATIONS

- Students will be held accountable to have a working knowledge for all medications he/she administers.
- Initially the administration of all medications is under the preceptor's supervision -- the preceptor and the student jointly determine when the student is prepared to be more independent.

THE STUDENT SHALL NOT:

- Transport patient/clients **in** their cars or drive other vehicles to transport these persons or ride in ambulances.
- Recommend over-the-counter drugs or treatments not prescribed or ordered by a person licensed to practice medicine, dentistry, or podiatry.
- Take telephone or verbal order for medications or treatments unless the preceptor also hears the verbal order or telephone conversation.
- Package or label drug supplies for any individual.
- Give Chemotherapeutic or experimental drugs or ACLS medications. No administration of continuous ambulatory peritoneal dialysis (CAPD).
- Change tubing on subclavian infusions or discontinue subclavian infusions without direct supervision of the Preceptor or their qualified designate e.g. a Registered Nurse.
- Check out or administer blood for transfusions.
- Administer **any** medication requiring 2(two) RN's to cosign.
- Administer intravenous heparin or long-acting insulin by any method at Nebraska Medical Center.
- Perform an intra-arterial stick for blood gas analysis.
- Administer any IV drugs by the "push" method unless the Agency has a policy that identifies drugs considered safe for the staff nurse to administer by "IV Push". Some drugs are universally given "IV Push" only by specially trained nurses. Students will give only those IV drugs ["push" or "Piggy Back"] which are identified by the agency as appropriate for administration by staff nurses.
- Perform endotracheal intubation on any person.
- Care for or make decisions concerning critically ill patients with monitoring devices which require an expert to read or make an interpretation, including adjustment of any rate of

- any IV critical care medication without direct preceptor guidance.
- Sign out narcotics without co-signature of a staff nurse.
- Witness permits for procedures requiring informed consent.

Faculty Role

- Review the clinical evaluation tool and course objectives with the student prior to clinical.
- Consult, as needed, with student, preceptor and/or NRS 419 coordinators during the practicum clinical experience. Provide student's preceptor with faculty phone numbers in event questions or concerns arise.
- Provide feedback in the last column of the clinical evaluation tool. Additionally, write a summative evaluation about the student's performance based on clinical logs and student's self and preceptor evaluations.

Getting to Know the Student

- The Preceptor should remember that the student coming into the facility for the clinical education experience will have many adjustments to make, both professionally and personally. He or she must become familiar with a new facility, a new group of "colleagues" and fellow professionals, a new patient group, and must find out who the clinical preceptor is, what that individual will expect and be like in the working environment. Many students approach this experience with some excitement but have trepidation, even alarm -- and certainly fear of failure, confusion, uncertainty, perhaps even bewilderment.
 - A sense of acceptance and security will be very important in helping the student adjust as quickly as possible to the new environment and expectations. The student needs to accept YOU as a first step in development of that sense of acceptance and security, and that will be determined by what you do and do not do. Following are some specific things you can do to help.
 - Find out what the student is like as a person. Afford the student much the same consideration you do to your colleagues in the facility. Take the time to ask about their personal interests, hobbies, background, etc.
2. Consider the student a member of the staff.
- The student will gain a better perspective of being a practicing healthcare professional when the student feels like a part of the staff and participates actively in the work being done. Include the student in staff/team meetings, ask for suggestions and insights, and involve the student in problem solving.
 - Consider the student's suggestions and ideas. Encourage active participation and whenever possible put the student's suggestions and ideas to use.
 - If you cannot accept a student's idea or suggestion, discuss the factors you have considered to arrive at your decision- often data are not apparent in the situation.
 - Encourage the student to ask questions. The best rule of thumb to remember here is that there is no "bad" question.
 - Use examples from your experience to and even your student days to suggest more effective ways to deal with a situation or problem
 - The course objectives offer a wide array of areas where you can offer the student valuable insight and direction. Be sure to find a private location if the remarks could be taken as

particularly personal. Public criticism is likely to cause the student to focus on embarrassment and humiliation. If there are any concerns about how to state your concerns, feel free to contact the Faculty Resource person immediately.

Copyright Information

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