COLLEGE OF NURSING

PRECEPTOR ORIENTATION HANDBOOK

ADVANCED PRACTICE NURSE PROGRAM

Fall Semester – 2010-2011
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THE ROLE OF THE PRECEPTOR

The College of Nursing Graduate Faculty would like to thank you for taking time to be a preceptor for one of our students. The role of the preceptor is important in shaping the development of a nurse practitioner. We recognize that it takes time to supervise a student and we appreciate the additional time you give to each student. As the semester advances, the student will become more accomplished and require less supervision on your part and should begin to facilitate your client case load.

PRECEPTOR

➢ In the role as a preceptor, you should:

- Review semester objectives and goals to facilitate clinical learning.
- Review daily objectives to be discussed with you at the beginning of each clinical day.
- Create a learning environment for the student and facilitate the critical thinking skills required of a nurse practitioner.
- Be available to hear the student’s case presentation
- To see the patient with the student
- Provide feedback about the assessment and proposed plan of care
- Be with the student for all new procedures
- Re-check all abnormal examination findings identified by the student, as well evaluate the student’s management plan for these problems
- Always be present in the clinical area during the student’s experience, and name a qualified substitute if you have to leave the clinic
- Ensure that you co-sign all entries in the patient’s health/medical record
- Complete the Clinical Preceptor Assessment of Student Progress assessment form enclosed in this handbook (NOTE: We ask that this form be completed at the end of the semester and returned by faxing it to Nanci Borg, Preceptor Program Support, at 402-559-4303, or by giving it to the student and asking them to return it to their Clinical Faculty.

- If you prefer, there is a public accessible website that contains the Clinical Preceptor Assessment of Student Progress Form at http://www.unmc.edu/nursing/Agency_and_Preceptor_Information.htm, which will allow you to fill out the form online, save it to another file name, and then email it back to Nanci at nborg@unmc.edu.

In addition, it would be helpful to provide the student with the opportunity to develop a differential diagnosis and problem list for the patient. Depending on the level of the student (beginning, middle, or advanced), they will participate alone or with assistance for performance of the history and physical examinations, ordering necessary lab data, analyzing assessments,
proposing appropriate diagnostic and/or therapeutic plans, and documenting the encounter. Students should show progress in skill and clinical judgment as they proceed through each course and semester. The preceptor has a right to ask that the student be placed in another learning environment if problems arise that cannot be resolved.

**CLINICAL FACULTY**

- Clinical faculty will:
  - Contact you and setup prior arrangements with the student and yourself to visit the clinical site (if feasible), for evaluating the student’s performance at various times throughout the semester.
  - Evaluate the student’s performance at mid-term and at the end of the semester. (NOTE: The preceptor will provide input into the evaluation process by completing the enclosed Clinical Preceptor Assessment of Student Progress. Please contact the clinical faculty member with any questions, concerns, or comments.

**STUDENTS**

The student also has responsibility to the Preceptor to be prepared, ask questions, and to identify their own strengths and weaknesses. They are also expected to ask for assistance with new procedures or learning opportunities and to seek confirmation with any findings of which they may be unsure. The student should show evidence of utilizing the clinical experience for advanced learning.
PROFESSIONAL ROLE

Nurse Practitioners are licensed independent practitioners who practice in ambulatory, acute and long term care as primary and/or specialty care providers. According to their practice specialty they provide nursing and medical services to individuals, families and groups. In addition to diagnosing and managing acute episodic and chronic illnesses, nurse practitioners emphasize health promotion and disease prevention. Services include, but are not limited to ordering, conducting, supervising, and interpreting diagnostic and laboratory tests, and prescription of pharmacologic agents and non pharmacologic therapies. Teaching and counseling individuals, families and groups are a major part of nurse practitioner practice.

As licensed independent practitioners, nurse practitioners practice autonomously and in collaboration with health care professionals and other individuals to assess, diagnose, treat and manage the patient's health problems/needs. They serve as health care researchers, interdisciplinary consultants and patient advocates.

EDUCATION

Entry level preparation for nurse practitioner practice is at the master’s, post master’s or doctoral level. Didactic and clinical courses prepare nurses with specialized knowledge and clinical competency to practice in primary care, acute care and long term health care settings. Self-directed continued learning and professional development beyond the formal advanced education is essential to maintain clinical competency.

ACCOUNTABILITY

The autonomous nature of the nurse practitioner’s advanced clinical practice requires accountability for health care outcomes. Insuring the highest quality of care requires certification, periodic peer review, clinical outcome evaluations, a code for ethical practice, evidence of continuing professional development and maintenance of clinical skills. Nurse practitioners are committed to seeking and sharing knowledge that promotes quality health care and improves clinical outcomes. This is accomplished by leading and participating in both professional and lay health care forums, conducting research, and applying findings to clinical practice.

RESPONSIBILITY

The role of the nurse practitioner continues to evolve in response to changing societal and health care needs. As leaders in primary and acute health care, nurse practitioners combine the roles of provider, mentor, educator, researcher and administrator. Members of the profession are responsible for advancing the role of the nurse practitioner and insuring that the standards of the profession are maintained. This is accomplished through involvement in professional organizations and participation in health policy activities at the local, state, national, and international levels.
Standards of Practice for Nurse Practitioners
Standards of Practice

I. Qualifications

Nurse Practitioners are licensed independent practitioners who provide primary and/or specialty nursing and medical care in ambulatory, acute and long term care settings. They are registered nurses with specialized advanced education and clinical competency to provide health and medical care for diverse populations in a variety of primary care, acute and long term care settings. Master’s, post master’s or doctoral preparation is required for entry level practice. (AANP 2006)

II. Process of Care

The nurse practitioner utilizes the scientific process and national standards of care as a framework for managing patient care. This process includes:

A. Assessment of health status
   The nurse practitioner assesses health status by:
   - obtaining a relevant health and medical history
   - performing a physical examination based on age and history
   - performing or ordering preventive and diagnostic procedures based on the patient’s age and history
   - identifying health and medical risk factors

B. Diagnosis
   The nurse practitioner makes a diagnosis by:
   - utilizing critical thinking in the diagnostic process
   - synthesizing and analyzing the collected data
   - formulating a differential diagnosis based on the history, physical examination, and diagnostic test results
   - establishing priorities to meet the health and medical needs of the individual, family, or community

C. Development of a treatment plan
   The nurse practitioner, together with the patient and family, establishes an evidence based, mutually acceptable, cost-awareness plan of care that maximizes health potential.
   Formulation of the treatment plan includes:
   - ordering and interpreting additional diagnostic tests
   - prescribing/ordering appropriate pharmacologic and non-pharmacologic interventions
   - developing a patient education plan
   - appropriate consultation/referral

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D. Implementation of the plan
   Interventions are based upon established priorities.
   Actions by the nurse practitioners are:
   - individualized
   - consistent with the appropriate plan for care
   - based on scientific principles, theoretical knowledge, and clinical expertise
   - consistent with teaching and learning opportunities

   Actions include:
   - accurately conducting, supervising, and interpreting diagnostic tests
   - prescribing/ordering pharmacologic agents and non pharmacologic therapies
   - providing relevant patient education
   - making appropriate referrals to other health professionals and community agencies

E. Follow-up and evaluation of the patient status
   The nurse practitioner maintains a process for systematic follow-up by:
   - determining the effectiveness of the treatment plan with documentation of patient care outcomes
   - reassessing and modifying the plan with the patient and family as necessary to achieve health and medical goals

III. Care Priorities

   The nurse practitioner’s practice model emphasizes:

   A. Patient and family education
      The nurse practitioner provides health education and utilizes community resource opportunities for the individual and/or family

   B. Facilitation of patient participation in self care.
      The nurse practitioner facilitates patient participation in health and medical care by providing information needed to make decisions and choices about:
      - promotion, maintenance, and restoration of health
      - consultation with other appropriate health care personnel
      - appropriate utilization of health care resources

   C. Promotion of optimal health

   D. Provision of continually competent care

   E. Facilitation of entry into the health care system

   F. The promotion of a safe environment
IV. Interdisciplinary/Collaborative Responsibilities

As a licensed independent practitioner, the nurse practitioner participates as a team leader and member in the provision of health and medical care, interacting with professional colleagues to provide comprehensive care.

V. Accurate Documentation of Patient Status and Care

The nurse practitioner maintains accurate, legible, and confidential records.

VI. Responsibility as Patient Advocate

Ethical and legal standards provide the basis of patient advocacy. As an advocate, the nurse practitioner participates in health policy activities at the local, state, national and international levels.

VII. Quality Assurance and Continued Competence

Nurse practitioners recognize the importance of continued learning through:
- participation in quality assurance review, including systematic review of records and treatment plans on a periodic basis
- maintenance of current knowledge by attending continuing education programs
- maintenance of certification in compliance with current state law
- applying standardized care guidelines in clinical practice

VIII. Adjunct Roles of Nurse Practitioner

Nurse practitioners combine the roles of provider, mentor, educator, researcher, manager and consultant. The nurse practitioner interprets the role of the nurse practitioner to individuals, families, and other professionals.

IX. Research as Basis for Practice

Nurse practitioners support research by developing clinical research questions, conducting or participating in studies, and disseminating and incorporating findings into practice.

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GRADUATE PROGRAM IN CHILDREN’S HEALTH NURSING

Preceptor Overview of Pediatric Nurse Practitioner Clinical

The following clinical courses will be taken consecutively by the student:

NRSG 819, Primary Care Health Promotion in Children’s Health (Fall of odd years)

Preceptors would assist the student in refining their skills in physical assessment and management of common health problems such as otitis media. The student will be able to perform well child physical exams and manage the immunization needs including the health promotion instruction of the child and family at all ages. The students are required to be in a clinical experience for approximately 9 hours per week from September through December.

NRSG 822, Primary Care of Children II: Acute Health Problems (Spring of even years)

Preceptors would assist the student in the diagnosis and management of acute disorders of children. This course uses a family-centered approach so that the student can provide teaching and instruction within the management phase. The students are required to be in a clinical experience for approximately 9 hours per week from January through May.

NRSG 824, Primary Care of Children III: Chronic Health Problems (Fall of even years)

Preceptors would assist the student in the diagnosis and management of chronic disorders of children. This course uses a family-centered approach so that the student can provide teaching and instruction within the management phase. The students are required to be in a clinical experience for approximately 12-15 hours per week from August through December.

NRSG 839, Advanced Women's & Children's Health Nursing Practicum (Spring of odd years)

Preceptors would continue to assist students in the synthesis of the knowledge for advance nursing practice. The course is intended to promote the collaborative management of children and their families. The students are required to be in a clinical experience for approximately 15 hours per week from January through May.

Total Clinical Hours Required of the MSN PNP Specialty - 630 hours
Total Credit Hours Required of the MSN PNP Specialty - 45

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